



Tennessee Department of Children's Services
Notice of Child Death/Near Death

Case # 2014.057

Intake #:	██████████	Investigation #:	██████████	Date of Referral:	04/01/2014
Type: (Please check one)	<input checked="" type="checkbox"/> DEATH	<input type="checkbox"/> NEAR DEATH	Date of Death/Near Death:	02/24/2014	
Child's Name:	██████████	DOB:	██████████	Person ID:	██████████
Gender:	<input checked="" type="checkbox"/> Male	<input type="checkbox"/> Female	Race/Ethnicity:	Unknown	
County/Region:	██████████				
Parents' Names:	Mother:	██████████	Father:	not reported	
Alleged Perpetrator's Name:	██████████		Relationship to Victim:	birthmother	
Child in custody at time of incident?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	Adjudication:		
If child is in DCS custody, list placement type and name:					

Describe (in detail) circumstances surrounding death/near death:

On 04/01/2014 at 1:38 PM ██████ the Tennessee Department of Children's Services received a Priority 1 investigation regarding alleged child victim, ██████, with date of birth of ██████. It was reported that 13 month old was found unresponsive by his brother with a plastic grocery sack on his face on the morning of 02/24/2014. It was reported that paramedics with ██████ Fire Department Ambulance transported child to ██████ where Dr. ██████ pronounced death at 0800 hours. It was reported the residence is located at ██████. A scene investigation was conducted by the medical examiner's office and the police department, and the decedents remains were transported to the medical examiner's office for autopsy. The cause and manner of death are pending at this time. The mother's name is ██████. It was reported that several siblings also live in the house.

If this is a near death certified by a physician, identify physician by name and provide contact information:

Name of Physician:	n/a	Telephone #	() -
Street Address:	██████████		
City/State/Zip:	██████████		

Describe (in detail) interview with family:

Child Protection Services Investigator (CPSI), ██████ received P1 referral with the allegation of Neglect Death on 4/1/2014. CPSI ██████ arrived to ██████ at 7:15pm. An empty lot which appeared to have been a house in the past but was torn down sits to the left of the address provided. CPSI ██████ also observed trash sitting outside on the curb of the home. It appeared as if someone has been cleaning the home out. CPSI ██████ knocked on door but there was no answer. CPSI ██████ observed a neighbor outside and inquired about the family residing at ██████. The neighbor reported that a Hispanic family was residing in the home but have moved. The neighbor reported that they are unsure of the exact time that the family moved. The neighbor stated that contractors were observed renovating the home during the day. CPSI ██████ asked neighbor if they knew where the family may have moved and the neighbor reported that they did not communicate with the family and do not know the family's current whereabouts.

On 04/02/2014, CPSI ██████ was assigned this investigation. CPSI ██████ contacted referent and was informed that forensic investigator was not available; CPSI left a message for return phone call.

On 04/04/2014, CPSI ██████ made contact with ██████ County Forensic Investigator ██████. Per Investigator ██████ the funeral services was held by ██████ Funeral Home and CPSI obtained their telephone number. CPSI ██████ requested a copy of any medical records regarding ACV, ██████ death; however, CPSI was advised that medical records would have to be subpoena. CPSI ██████ asked Forensic Investigator ██████ if there were any marks or bruises on child and this CPSI was advised that ██████ had some minor bruising; however, it is not believed to be a result of physical abuse. It was reported that the home at the ██████ address was observed "trashy" and that it was reported that ██████ 13 y/o brother (name unknown) discovered him with the shopping bag over his head. Investigator ██████ denied any knowledge of contact information for other family members. CPSI also learned that the family are non English speaking, hispanic.

On 4/2/2014, CPSI ██████ CPSI ██████ submitted requests to ██████ Light Gas and Water and Department of Human Services for contact information on this family. CPSI ██████ received a return email from ██████ Light Gas and Water. She reported that Ms. ██████ doesn't currently have services in her name and

was never listed as residing a [REDACTED].

On 04/04/2014, CPSI [REDACTED] made contact with [REDACTED] Home. CPSI [REDACTED] spoke with [REDACTED] who informed this CPSI that she would have to talk to the director of the funeral home, [REDACTED]. CPSI [REDACTED] was advised that "per their policy, they can not give out any information on the family, but can aid the Department by taking CPSI's contact information and pass it along to the family.

04/04/2014, CPSI [REDACTED] also attempted to contact birthmother [REDACTED] by phone. CPSI was unsuccessful.

04/04/2014, CPSI [REDACTED] was advised to return to the reported address of the [REDACTED] family to take pictures and to speak with neighbors to find out if they know the current whereabouts of this family. CPSI [REDACTED] arrived [REDACTED] at approximately 11:23 AM [REDACTED]. No one appeared to be at the residence. There was a big black trash bag at the curb of the home near the sidewalk. The bag appeared to have wood, metal rods, ripped lanolium and other household material in it. CPSI took photos that will be placed in case file of this home and trash bag. CPSI walked up the sidewalk and across the street to knock on doors to find out if anyone knew of this family and of their whereabouts.

The address of [REDACTED] is the home to the right of reported home. The home appeared light yellow in color with cast iron screen door. No one answered the door, CPSI left a contact letter with telephone number in effort to make contact.

The address of [REDACTED] is the home to left of reported home. Ms. [REDACTED] reported she lives in this home. When asked, she reported she's been at her residence for about 4 months and that when she moved in there was a Hispanic family living next door. She reported she did not know them or been around them; however, did report the home being vacant for about a month.

The address of [REDACTED] is across the street. No one answered the door; the home is brick; however, there was a red tahoe truck in the yard with large tires. CPSI left a letter for contact.

The address of [REDACTED] is across the street. No one answered the door; the home is a light brown/cream color. CPSI left a letter for contact.

04/07/2014, CPSI [REDACTED] has not obtained any information as to the whereabouts of this family. There has been no response from the Department of Human Services at this time.

If child was hospitalized, describe (in detail) DCS involvement during hospitalization:

n/a

Describe disposition of body (Death):

Name of Medical Examiner/Coroner:	[REDACTED] County	Was autopsy requested?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
-----------------------------------	-------------------	------------------------	-----------------------------	---

Did CPS open an investigation on this Death/Near Death?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
---	-----------------------------	---

Was there DCS involvement at the time of Death/Near Death?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
--	--	------------------------------

Type:	Case #:	
-------	---------	--

Describe law enforcement or court involvement, if applicable:

There is no known court involvement at this time. It was reported law enforcement was on the scene on 2/24/2014. There is no other information currently available.

Describe (in detail) action taken to ensure safety of other children (list names and ages of surviving children) and/or victim

Intake #:	Investigation #:	Date of Referral:	Case # 2014-057
-----------	------------------	-------------------	-----------------

(Near Death) (attach safety plan, if applicable):

CPSI [redacted] is currently trying to locate this family as they'd moved since [redacted] death.

Name: unknown	Age: 13
Name: unknown	Age: unknown
Name:	Age:
Name:	Age:
Name:	Age:

Prior DCS involvement with the family. Include dates, type, case #s, allegations, victims, perpetrators (if applicable), and classifications/adjudications (if applicable):

Date	Case #	Allegations	Victims	Perpetrators	Classification/Adj
n/a/ /			N/a		
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

Any media inquiry or is attention expected?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	List organizations requesting information: TN Department of Children Services
---	--	------------------------------	---

Contact Person/Phone Number(s) (include CM, TL, and TC):

Contact: [redacted]	Telephone Number: [redacted]
Case Manager: [redacted]	Telephone Number: [redacted]
Team Leader: [redacted]	Telephone Number: [redacted]
Team Coordinator: [redacted]	Telephone Number: [redacted]

ATTACH a copy of the <u>TFACTS Incident Report</u> or if TFACTS is inoperable, <u>DCS Form CS-0496, Serious Incident Report</u> to this notice.	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
---	--	------------------------------

Email to: [redacted]
within forty-eight (48) hours of notification
Include subject line (in RED): CHILD DEATH [secure email] or
CHILD NEAR DEATH [secure email]



**Tennessee Department of Children's Services
Tennessee Child Abuse Hotline Summary**

Intake

Intake ID: [REDACTED]
 Intake Taken By: [REDACTED] Intake Date/Time: 04/01/2014 01:38 PM [REDACTED]
 Track Assigned: Investigation Priority Assigned: 1
 Screened By: [REDACTED]
 Date Screened: 04/01/2014

Investigation

Investigation ID: [REDACTED]
 First County/Region: [REDACTED]
 Date/Time Assigned : 04/02/2014 11:36 AM
 First Team Leader Assigned: [REDACTED] Date/Time 04/03/2014 12:00 AM
 First Case Manager [REDACTED] Date/Time 04/03/2014 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	2 Yrs 1 Mos	Neglect Death	Yes	[REDACTED]	Birth Mother

Referent(s)

Referent Name: [REDACTED] Role to Alleged Victim(s): [REDACTED]

Referent Address: [REDACTED]

Referent Phone Number: [REDACTED]

Type of Contact: Facsimile

Notification: None

Narrative: This is non-custodial child.

TFACTS: No history was found based on the demographics provided in the fax.

Family Case IDs: None

Open Court Custody/FSS/FCIP No

Closed Court Custody No

Open CPS - No

Substantiated No

Death No



Tennessee Department of Children's Services
Tennessee Child Abuse Hotline Summary

Screened out None

History (not listed above): No

County: [REDACTED]
Notification: None
School/ Daycare: Unknown
Native American Descent: No
Directions: None Given

Reporters name/relationship: [REDACTED]

Reporter states: This will serve as notification that the [REDACTED] County Medical Examiner is investigating the death [REDACTED].) This 13 month-old child was found unresponsive by his brother with a plastic grocery sack on his face on the morning of 2/24/2014. Paramedics with [REDACTED] Fire Department Ambulance transported the child to [REDACTED] where Dr. [REDACTED] pronounced death at 0808 hours. The residence is located a [REDACTED]. A scene investigation was conducted by this office and the [REDACTED] Police Department, and the decedents remains were transported to this office for autopsy. The cause/manner of death are pending at this time. The mothers name is [REDACTED]. Several siblings also live in the house. Our case # is [REDACTED]

This is all the information that the referent had to report at this time.

NOTE: Only a partial address was provided via fax. Per Google search, there is a [REDACTED] in [REDACTED]. Also, there were two unknown siblings added to this report due to the reference in the fax of "several siblings."

County paged in MIR3
Per SDM: Investigative Track: P 1 / Neglect Death, [REDACTED] TL on 4-1-14 @ 5:12 pm

Notified Child Death Group: [REDACTED]
RA [REDACTED] was also copied on the notification email.

Recipients	Time Issued	Response Received	Devices	Responses		
[REDACTED]	04-01-14 05:16:23 PM	[REDACTED]	04-01-14 05:17:21 PM	[REDACTED]	PRIVATE	Received
	04-01-14 05:16:24 PM	---	PRIVATE	Email Sent		



Tennessee Department of Children's Services
Tennessee Child Abuse Hotline Summary

Participant(s)

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN:

Race: Unable to

Age: 2 Yrs 1 Mos

Address: [REDACTED]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Name: [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN:

Race:

Age: 34 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



**Tennessee Department of Children's Services
Tennessee Child Abuse Hotline Summary**

Name: Unknown Participant [REDACTED] Unknown

Gender: Male

Date of Birth:

Partipant ID: [REDACTED]

SSN:

Race:

Age:

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Name: Unknown Participant [REDACTED] Unknown

Gender:

Date of Birth:

Partipant ID: [REDACTED]

SSN:

Race:

Age:

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



Tennessee Department of Children's Services
Child Protective Service Investigation Summary
and Classification Decision of Child Abuse/Neglect Referral

A. Investigation

Case Name: [REDACTED]

Investigation ID: [REDACTED]

Referral Date: 04/01/2014

Assignment Date: 04/03/2014

Street Address: [REDACTED]

City/State/Zip: [REDACTED]

B. Allegation

#	Children's Name	DOB	Specific Allegation for Each Child	Alleged Perpetrator's Name	DOB	Classification	Severe Abuse	Classified By
		SSN			SSN			
1	[REDACTED]	[REDACTED]	Neglect Death	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[REDACTED] 10/13/2014

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: Allegation Unsubstantiated and Perpetrator Unsubstantiated

D. Case Workers

Case Worker: [REDACTED]

Date: 10/13/2014

Team Leader: [REDACTED]

Date: 10/14/2014

E. Investigation Summary

Instruction: Condense the finding rationale for each allegation relative to the child victim(s). Be sure to identify the facts that provided for the classification decision.

Summarize the key points and dates of the child or children's statements and/or the observation of the child or children's physical state or home environment:

The alleged victim, [REDACTED], passed away on 2/24/2014 and this case was received by the Department on 4/01/2014.

8/4/14, forensic interviews were completed on his siblings. 8/4/14, [REDACTED] (14) disclosed that he found his 1 y/o brother [REDACTED] unresponsive one Monday in February 2014. He said he and his siblings woke up for school around 7 am. He stated [REDACTED] was lying beside him when he saw a Family Dollar grocery bag on his face. He stated he noticed a white substance coming from his mouth. He said his mother was at work, but he went into the other room where the mothers boyfriend was to tell him what happened and he then called their mother and told her what happened. [REDACTED] stated that the night before he made [REDACTED] a 8 oz bottle of milk and added 2 mm of prescribed medicine because he said [REDACTED] had so much energy and he did not want him to wake up the other children. He stated his mother did not know he gave [REDACTED] the medication. [REDACTED] reported he doesnt know how bag got on [REDACTED] head. He stated they were living at the old residence when [REDACTED] died.

[REDACTED] (12) disclosed during the forensic interview that she woke up one morning and saw a bag around 1 y/o brothers head. She stated she told her 14 y/o brother [REDACTED] and he and other brother, [REDACTED]



Tennessee Department of Children's Services
Child Protective Service Investigation Summary
and Classification Decision of Child Abuse/Neglect Referral

Case Name : ██████████

Investigation ID: ██████████

ripped the bag from around ██████████ head. ██████████ stated ██████████ carried ██████████ to ██████████ and ██████████ gave him mouth to mouth. She also stated her mother and ambulance were called. ██████████ stated the night before his death, ██████████ did not want to go to sleep and stated she tried to give ██████████ his bottle but he did not want it. She stated she then took him to ██████████ ██████████ denied ever seeing ██████████ playing with a bag before.

██████████ (10) disclosed during the forensic interview that on one morning he woke up and told his brother ██████████ that ██████████ had a bag over his head. ██████████ said he ripped the bag off ██████████ head and he wasn't moving. ██████████ stated ██████████ picked ██████████ up and took him to ██████████ stated ██████████ was given mouth to mouth and white stuff came out. He reported his ██████████ other had gone to work already and that she and the ambulance were called. Also ██████████ said that they had all gone to a cookout the night before and that ██████████ did not want to go to sleep and ██████████ gave ██████████ some medicine in his bottle. ██████████ reported he did not know if ██████████ was sick or not.

Summarize professional, medical or psychological findings or opinions: What is the collateral's oral or written finding/opinion of the incident(s)/allegation(s)?

An autopsy was completed by the ██████████ County Medical Examiners Office and the cause of death is Asphyxia due to suffocation, the contributory cause of death is Diphenhydramine toxicity and the manner of death could not be determined.

Summarize alleged perpetrator's statement or admission: What is the perpetrator's explanation of the incident(s)/allegation(s)?

██████████ was interviewed. Ms. ██████████ reported she was not home during the time ██████████ was found unresponsive at home and that she was work when she received a phone call from her boyfriend, ██████████, who was at home with the children. Ms. ██████████ reported she left for work around 6am, prior to her leaving for work, she checked on the children who were sleeping at the time and did not see anything unusual and did not see a bag over ██████████ head. Ms. ██████████ reported that she even turned on the light in the room and noticed that ██████████ was trying to wake up but as soon as she turned the light back off, he laid back down and appeared to have gone back to sleep.

Summarize witnesses' descriptions of what they saw and what they believe indicates child abuse/neglect:

Reporter states ██████████ 13 month-old child was found unresponsive by his brother with a plastic grocery sack on his face on the morning of 2/24/2014. Paramedics with ██████████ Fire Department Ambulance transported the child to ██████████ where Dr. ██████████ pronounced death at 0808 hours.

Summarize any other evidence or factors that support the investigative finding(s) for the allegation(s) of abuse/neglect:

NEGLECT DEATH:

DCS Policy defines any child death that is the result of the caretakers failure to meet childcare responsibilities. The Department of Children's Services (DCS) Office of Child Safety received a referral on 04/01/2014 with an allegation of Child Neglect Death regarding non-custodial child ██████████, 13 month old, was found unresponsive by his brother with a plastic grocery sack on his face on the morning of 02/24/2014. Paramedics with ██████████ Fire Department Ambulance transported child to ██████████ where Dr. ██████████ pronounced him deceased at 0808 hours. The decedents remains were transported for autopsy. The manner of death is pending. Several siblings also live in the house.

The investigation into this incident was conducted by The ██████████ Police Department- Homicide Bureau, Detective ██████████ Detective ██████████, the ██████████ County Medical Examiners Office and DCS Investigator ██████████.



Tennessee Department of Children's Services
Child Protective Service Investigation Summary
and Classification Decision of Child Abuse/Neglect Referral

Case Name : [REDACTED]

Investigation ID: [REDACTED]

The report to DCS listed [REDACTED] as the alleged perpetrator of Child Neglect Death. Numerous interviews were conducted of the siblings, the mothers paramour and the [REDACTED] County Medical Examiners Office.

As part of the investigation, the autopsy report was obtained, forensic interview of the older siblings, and both the [REDACTED] Police Homicide Bureau and the Attorneys General office were consulted. The cause of death is Asphyxia due to suffocation, the contributory cause of death is Diphenhydramine toxicity and the manner of death could not be determined. The detectives from the homicide bureau informed this worker this case will not be classified as a homicide. Forensic interviews were conducted and sibling, [REDACTED] admitted he gave [REDACTED] 2 ml of medicine in his 8 oz bottle the night before he was found unresponsive with plastic bag over his head because [REDACTED] had too much energy and he did not want him to awaken the other children who were already asleep. [REDACTED] reported he did not tell his mother nor did his mother tell him to give [REDACTED] any medication. During the forensic interview and other interviews, no one knows how the plastic bag got over [REDACTED] head. This case was sent to the Child Protection Investigation Team for review and Assistant District Attorney [REDACTED] reported the District Attorneys office will not prosecute on this case. The case will be closed and classified as Allegation Unsubstantiated and Perpetrator Unsubstantiated for the allegation of Child Neglect Death.

Distribution Copies: Juvenile Court in All Cases
District Attorney in Severe Child Abuse Cases
Regional Supervising Attorney



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 01/26/2015 Contact Method:
 Contact Time: 02:01 PM Contact Duration: Less than 15
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 01/26/2015
 Completed date: 01/26/2015 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Administrative Review
 Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 01/26/2015 02:02 PM Entered By: [REDACTED]

The case has been reviewed and changes have been made to the closing summary as requested by RID [REDACTED] during his review of the investigation. The case will be closed and copies of the 740 will be forwarded to the AG and the Judge.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 01/26/2015

Contact Method:

Contact Time: 12:25 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 01/26/2015

Completed date: 01/26/2015

Completed By: [REDACTED]

Purpose(s): Permanency,Safety - Child/Community,Well Being

Contact Type(s): Case Summary

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 01/26/2015 12:27 PM Entered By: [REDACTED]

[REDACTED]:

The Department of Children's Services (DCS) Office of Child Safety received a referral on 04/01/2014 with an allegation of Child Neglect Death regarding non-custodial child [REDACTED], 13 month old, was found unresponsive by his brother with a plastic grocery sack on his face on the morning of 02/24/2014. Paramedics with [REDACTED] Fire Department Ambulance transported child to [REDACTED] where Dr. [REDACTED] pronounced him deceased at 0808 hours. The decedents remains were transported for autopsy. The manner of death is pending. Several siblings also live in the house.

The investigation into this incident was conducted by The [REDACTED] Police Department- Homicide Bureau, Detective [REDACTED], Detective [REDACTED] County Medical Examiners Office and DCS Investigator [REDACTED]. The report to DCS listed [REDACTED] as the alleged perpetrator of Child Neglect Death. Numerous interviews were conducted of the siblings, the mothers paramour and the [REDACTED] County Medical Examiners Office.

As part of the investigation, the autopsy report was obtained, forensic interview of the older siblings, and both the [REDACTED] Police Homicide Bureau and the Attorneys General office were consulted. The cause of death is Asphyxia due to suffocation, the contributory cause of death is Diphenhydramine toxicity and the manner of death could not be determined. The detectives from the homicide bureau informed this worker this case will not be classified as a homicide. Forensic interviews were conducted and sibling, [REDACTED] (14) admitted he gave [REDACTED] 2 ml of medicine in his 8 oz bottle the night before he was found unresponsive with plastic bag over his head because [REDACTED] had too much energy and he did not want him to awaken the other children who were already asleep. [REDACTED] reported he did not tell his mother nor did his mother tell him to give [REDACTED] any medication. During the forensic interview and other interviews, no one knows how the plastic bag got over [REDACTED] head.

DCS policy Work Aid 1 (E) defines the following criteria for Child Neglect Death:

1. Any unexplained death of a child when the cause of death is unknown or pending an autopsy report.
2. Any child death caused by abuse resulting from direct action of the childs caretaker or the consequence of the childs caretakers failure to stop another persons direct action that resulted in the death of a child.
3. Any child death that is the result of the caretakers failure to meet childcare responsibilities. Neglect death is



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

always treated as severe child abuse.

This case was sent to the [REDACTED] County Child Protection Investigation Team (CPIT) on 09/30/2014. Team members were in agreement that there was not sufficient evidence to substantiate the allegation of Child Neglect Death.

There is not a preponderance of evidence to substantiate the allegation of Child Neglect Death.

The case will be closed and classified as Allegation Unsubstantiated and Perpetrator Unsubstantiated for the allegation of Child Neglect Death.

The court and Attorney Generals office have been made aware of the investigation into the Child Neglect Death allegation. A copy of the 740 will be forwarded to the Attorney Generals office and the Judge.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 01/23/2015 Contact Method:
 Contact Time: 03:33 PM Contact Duration: Less than 30
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 01/23/2015
 Completed date: 01/23/2015 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Administrative Review
 Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 01/23/2015 03:49 PM Entered By: [REDACTED]

This neglect death investigation has been submitted for review by CPSI [REDACTED]. The cause of death is listed as Asphyxia due to suffocation, manner of death could not be determined according to the autopsy report. The surviving siblings were interviewed and the older sibling stated that he gave the baby medicine to help the child go to sleep without their mother knowing what he had done. The case was reviewed in evening CPIT and the team decided that the allegation should be unsubstantiated. Assistant Attorney General [REDACTED] informed the group that charges would not be filed against the mother. Home visits have occurred to ensure safety and services were offered. This case is being forwarded to [REDACTED] Investigations Director [REDACTED] for review.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: ██████████

Case Name: ██████████

Case Status: Close

Organization: ██████████

Case Recording Details

Recording ID: ██████████	Status: Completed
Contact Date: 01/13/2015	Contact Method: Face To Face
Contact Time: 04:40 PM	Contact Duration: Less than 02 Hour
Entered By: ██████████	Recorded For:
Location: Family Home	Created Date: 01/22/2015
Completed date: 01/22/2015	Completed By: ██████████
Purpose(s): Permanency,Safety - Child/Community,Well Being	
Contact Type(s): Parent/Caretaker Interview,Sibling Interview/Observation	
Contact Sub Type:	

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 01/22/2015 12:53 PM Entered By: ██████████

4:40pm, CPSI ██████████ conducted a follow up home visit with the ██████████ family this afternoon. CPSI made contact with ██████████ who advised that his mother was gone to the store and will be returning soon. CPSI sat outside as ██████████ called for his mother to return home because this worker was at the home. Upon Ms. ██████████ arrival about 20 minutes later, CPSI used the 800# interpreter services for Spanish translation with her. Ms. ██████████ reported no concerns. She reported the holiday was good except for ██████████ not sharing them with them. She reported that ██████████ also had a birthday. Ms. ██████████ reported that she continues to have the support of her friends, family and co workers. She denied the need for services through the department. She reported that she and her boyfriend, ██████████, are not seeing each other anymore. The home appeared with no environmental concerns.

CPSI met with the children and spoke to each one of them separately. ██████████ (14), ██████████ (12) and ██████████ (11) denied any concerns as it relates to abuse or neglect. They reported no concerns with school or their home environment. ██████████ reported his birthday is today and they will celebrate this weekend. Each child looked healthy and happy in their home environment. No visible marks or bruises were observed on the children. They were properly dressed and groomed.

CPSI observed ██████████ (6) and ██████████ (3) to look healthy and happy in their home environment. ██████████ and ██████████ are unable to speak English much at all. No visible marks or bruises were observed on the children. They were properly dressed and groomed. CPSI observed them playing with each other and watching television.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	12/23/2014	Contact Method:	Face To Face
Contact Time:	03:40 PM	Contact Duration:	Less than 02 Hour
Entered By:	[REDACTED]	Recorded For:	
Location:	Family Home	Created Date:	12/29/2014
Completed date:	12/29/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency, Safety - Child/Community, Well Being		
Contact Type(s):	Sibling Interview/Observation, Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 12/29/2014 11:19 AM Entered By: [REDACTED]

3:40pm, CPSI [REDACTED] made unannounced home visit with the [REDACTED] family this afternoon. CPSI met with family and used the 800# interpreter services for Spanish translation with Ms. [REDACTED] birthmother. Ms. [REDACTED] reported no concerns except for the thought of missing a child for the Christmas holiday. She also reported his birthday to be on Saturday. Ms. [REDACTED] reported that she has the support of her friends, family and co workers. She denied the need for services through the department. The home appeared with no environmental concerns. It was warm and decorative. CPSI observed lots of food and presents under the Christmas tree.

CPSI met with the children and spoke to each one of them separately. They are able to speak English. [REDACTED] (14), [REDACTED] (12) and [REDACTED] (10) denied any concerns as it relates to abuse or neglect. They reported no concerns with school or their home environment. Each child looked healthy and happy in their home environment. No visible marks or bruises were observed on the children. They were properly dressed and groomed.

CPSI observed [REDACTED] (6) and [REDACTED] (3) to look healthy and happy in their home environment. [REDACTED] and [REDACTED] are unable to speak English much at all. No visible marks or bruises were observed on the children. They were properly dressed and groomed.



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	12/15/2014	Contact Method:	
Contact Time:	11:30 AM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	12/15/2014
Completed date:	12/15/2014	Completed By:	[REDACTED]
Purpose(s):	Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 12/15/2014 11:40 AM Entered By: [REDACTED]
 CPSI completed directives as advised by LI [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	System Completed
Contact Date:	10/22/2014	Contact Method:	
Contact Time:	01:04 PM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	10/22/2014
Completed date:	11/22/2014	Completed By:	System Completed
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/22/2014 01:12 PM Entered By: [REDACTED]

The CPSI is being instructed to conduct the required background checks on the mother and her paramour. The CPSI is also being instructed to attempt to get collateral statements for the mother and her paramour. The CPSI must also document and describe the living conditions in the family's current home. The case has been reviewed in CPIT and the group felt that there was not enough evidence to prosecute. The CPSI has offered services which were declined by the family. The CPSI did leave the family with information if the need for services arises in the future. This case will be forwarded to upper management for review once the CPSI completes the requested tasks.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 10/14/2014

Contact Method:

Contact Time: 03:53 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/14/2014

Completed date: 10/14/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Case Summary

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 03:54 PM Entered By: [REDACTED]

The Department of Children's Services (DCS) Office of Child Safety received a referral on 04/01/2014 with an allegation of Child Neglect Death regarding non-custodial child [REDACTED], 13 month old, was found unresponsive by his brother with a plastic grocery sack on his face on the morning of 02/24/2014. Paramedics with [REDACTED] Fire Department Ambulance transported child to [REDACTED] where Dr. [REDACTED] pronounced him deceased at 0808 hours. The decedents remains were transported for autopsy. The manner of death is pending. Several siblings also live in the house.

The investigation into this incident was conducted by The [REDACTED] Police Department- Homicide Bureau, [REDACTED] Detective [REDACTED], the [REDACTED] County Medical Examiners Office and DCS Investigator [REDACTED].

The report to DCS listed [REDACTED] as the alleged perpetrator of Child Neglect Death. Numerous interviews were conducted of the siblings, the mothers paramour and the [REDACTED] County Medical Examiners Office.

As part of the investigation, the autopsy report was obtained, forensic interview of the older siblings, and both the [REDACTED] Police Homicide Bureau and the Attorneys General office were consulted. The cause of death is Asphyxia due to suffocation, the contributory cause of death is Diphenhydramine toxicity and the manner of death could not be determined. The detectives from the homicide bureau informed this worker this case will not be classified as a homicide. Forensic interviews were conducted and sibling, [REDACTED] (14) admitted he gave [REDACTED] 2 ml of medicine in his 8 oz bottle the night before he was found unresponsive with plastic bag over his head because [REDACTED] had too much energy and he did not want him to awaken the other children who were already asleep. [REDACTED] reported he did not tell his mother nor did his mother tell him to give [REDACTED] any medication. During the forensic interview and other interviews, no one knows how the plastic bag got over [REDACTED] head. This case was sent to the Child Protection Investigation Team for review and Assistant District Attorney [REDACTED] reported the District Attorneys office will not prosecute on this case. The case will be closed and classified as Allegation Unsubstantiated and Perpetrator Unsubstantiated for the allegation of Child Neglect Death.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Narrative Type: Addendum 1 Entry Date/Time: 10/14/2014 04:10 PM Entered By: [REDACTED]

NEGLECT DEATH:

DCS Policy defines any child death that is the result of the caretakers failure to meet childcare responsibilities.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 10/14/2014

Contact Method:

Contact Time: 03:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/14/2014

Completed date: 10/14/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 03:52 PM Entered By: [REDACTED]

CPSI completed 740 and will place a copy in case file.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 10/08/2014

Contact Method:

Contact Time: 11:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/14/2014

Completed date: 10/14/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 03:49 PM Entered By: [REDACTED]

CPSI completed closing safety assessment. The score is rated Safe.



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	System Completed
Contact Date:	10/07/2014	Contact Method:	Face To Face
Contact Time:	05:00 PM	Contact Duration:	Less than 02 Hour
Entered By:	[REDACTED]	Recorded For:	
Location:	Family Home	Created Date:	12/15/2014
Completed date:	12/16/2014	Completed By:	System Completed
Purpose(s):	Safety - Child/Community, Service Planning		
Contact Type(s):	Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type:	Original	Entry Date/Time:		Entered By:	
-----------------	----------	------------------	--	-------------	--



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 10/07/2014

Contact Method:

Contact Time: 04:50 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 12/15/2014

Completed date: 12/15/2014

Completed By: [REDACTED]

Purpose(s): Permanency, Safety - Child/Community, Well Being

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 12/15/2014 10:30 AM Entered By: [REDACTED]

Home environment

The home was observed to be neat, clean, and spacious with functional utilities and an abundant food supply. The home consists of 3 bedrooms. [REDACTED] and [REDACTED] share a room whereas the boys have their own room equipped with bunk bed set and a twin bed. No environmental concerns observed during this visit.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	10/07/2014	Contact Method:	Face To Face
Contact Time:	04:05 PM	Contact Duration:	Less than 01 Hour
Entered By:	[REDACTED]	Recorded For:	
Location:	Family Home	Created Date:	10/14/2014
Completed date:	10/14/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Parent/Caretaker Interview,Sibling Interview/Observation		
Contact Sub Type:			

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/14/2014 03:49 PM Entered By: [REDACTED]

4:30pm, CPSI met with Ms. [REDACTED] CPSI utilized 800# for interpreter services. Ms. [REDACTED] reported they are doing fine and they are going to miss [REDACTED] on Thanksgiving, Christmas and his birthday [REDACTED]. She reported they will be fine and they have family, friends and the church for support. She reported they may have a celebration on [REDACTED] birthday with family in his remembrance. She stated she did not want any services from DCS.

CPSI met with [REDACTED] in private. He stated hes been doing ok and that he misses [REDACTED] running around the house and playing with him. He stated [REDACTED] birthday is coming up and the family plans to get together to celebrate in his memory. He denied the need to talk to a counselor and stated that when he feels sad, that he can talk to his family and friends if he wants to. CPSI observed him to look comfortable in his home environment. He appeared healthy, properly dressed and properly groomed with no visible marks or bruises.

CPSI met with [REDACTED] in private. She reported she is doing good and is sort of enjoying school. [REDACTED] complained of lots of homework. [REDACTED] stated that she also misses [REDACTED] running around the house messing with everybody. She stated he was fun to have around. When asked, she denied the need for counseling and can talk to her family and friends whenever she feels the need. She was observed comfortable at home in her own room that is creatively decorated. She was observed properly dressed, groomed and without visible marks or bruises.

CPSI met with [REDACTED] in private. He stated was doing good. He reported that he is ready for Christmas so he could get some new toys. He stated that his brother [REDACTED] is in heaven and he will not be able to play with new toys with him and that [REDACTED] will get new toys in heaven. [REDACTED] reported he goes to school every day. He stated he play with his friends at school and his siblings and cousins. [REDACTED] was observed to be properly dressed and groomed. He appeared comfortable in his home environment. No visible marks or bruises observed.

CPSI met with [REDACTED] (3) and [REDACTED] (6) in private. [REDACTED] was very shy and can not speak English. She was observed to play with her doll and engaged with this worker by lending a comb for worker to comb doll's hair. CPSI observed she was properly dressed, groomed and no visible marks or bruises were observed.

CPSI observed [REDACTED] who can not speak English. He was observed to be very active and shared his toys with this worker as he played with them. CPSI observed he was also properly dressed, groomed with no visible marks or



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

bruises.

Narrative Type: Addendum 1 Entry Date/Time: 12/15/2014 11:31 AM Entered By: [REDACTED]

NOTE: CPSI realized upon case review that entire statement pertaining to home visit with Ms. [REDACTED] was not recorded in this section. CPSI will record collateral contact statements under "Collateral" tab. Additional documentation regarding visit with Ms. [REDACTED] is as follows:

CPSI asked for collaterals who can speak English. Ms. [REDACTED] said her neighbor to left of the home is [REDACTED] and her neighbor across the street is [REDACTED] but she doesnt know her last name. Ms. [REDACTED] reported that she doesnt know anybody else. Interpreter services ended as Ms. [REDACTED] said she would walk over to neighbors; CPSI advised that she did not have to do so. Ms. [REDACTED] stayed home.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 10/07/2014

Contact Method: Face To Face

Contact Time: 06:03 AM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 12/15/2014

Completed date: 12/15/2014

Completed By: [REDACTED]

Purpose(s): Well Being

Contact Type(s): Collateral Contact

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 12/15/2014 11:34 AM Entered By: [REDACTED]

Collaterals:

6:03pm, CPSI went next door Ms. [REDACTED] home, Ms. [REDACTED] neighbor. CPSI made formal introduction and explained to her that Ms. [REDACTED] said I could talk to her. Ms. [REDACTED] was able to speak acceptable English. Ms. [REDACTED] reported her last name is [REDACTED]. She reported [REDACTED] moved into the home next door with her children. She reported that [REDACTED] is a nice person and a good mother. She reported that she has nothing bad to say about Ms. [REDACTED] and that she buys food for the household, cooks and takes good care of her children. She reported the children always look nice when she sees them.

6:22pm, CPSI went to the other neighbors home. [REDACTED]. CPSI explained that Ms. [REDACTED] mentioned they were friendly neighbors and he said they are good neighbors. He reported her sons come over to watch wrestling some Monday nights and that he is friends with her boyfriend, [REDACTED]. He reported they appear to be good people and that he's never seen or witness any problems. He reported the children appear well mannered and respectful. He denied any concerns regarding the parenting of [REDACTED] and [REDACTED] towards the children.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 10/06/2014

Contact Method:

Contact Time: 03:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 10/14/2014

Completed date: 10/14/2014

Completed By: [REDACTED]

Purpose(s): Well Being

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 03:45 PM Entered By: [REDACTED]

CPSI utilized the 800# for interpreter services. CPSI contacted Ms. [REDACTED] and scheduled home visit for 10/07/2014 at 4pm.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/30/2014

Contact Method: Face To Face

Contact Time: 09:00 AM

Contact Duration: Less than 02 Hour

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/14/2014

Completed date: 10/14/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): CPIT (Child Protective Investigative Team)

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/14/2014 03:33 PM Entered By: [REDACTED]

This case was presented and reviewed at morning the Child Protection Investigations Team Meeting in [REDACTED] County. The case was classified as Allegation Unsubstantiated and Perpetrator Unsubstantiated. Assistant District Attorney [REDACTED] was present.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/29/2014

Contact Method: Phone Call

Contact Time: 02:30 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/14/2014

Completed date: 10/14/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community, Well Being

Contact Type(s): Collateral Contact

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 03:31 PM Entered By: [REDACTED]

CPSI received phone call from ADA [REDACTED]. She advised that she reviewed the forensic interviews and also DVDs of the forensic interviews and reported that the Attorney General's office will not be pursuing the case and stated [REDACTED] death is sad and it appeared to be an accidental death.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/12/2014

Contact Method:

Contact Time: 10:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/14/2014

Completed date: 10/14/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 03:29 PM Entered By: [REDACTED]

CPSI emailed [REDACTED], Special Assistant to the Deputy Commissioner Office of Child Safety, the child death verification he requested upon opening of this investigation.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/21/2014

Contact Method:

Contact Time: 03:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/14/2014

Completed date: 10/14/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 03:28 PM Entered By: [REDACTED]

CPSI [REDACTED] sent copies of the forensic interviews to ADA [REDACTED] at the District Attorneys Office for review by ADA [REDACTED] on today. CPSI will await advisement by ADA [REDACTED] for other tasks to be performed in efforts to work this case towards closure.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	08/05/2014	Contact Method:	
Contact Time:	09:03 AM	Contact Duration:	Less than 01 Hour
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	10/14/2014
Completed date:	10/14/2014	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 03:26 PM Entered By: [REDACTED]

CPSI made contact with TN care insurance. According to Tn Care, the mother can call and update needed information and the cards can be mailed to her and they should arrive in the mail within 2 weeks.

Telephone- CPSI made contact with interpreter, Ms. [REDACTED] to translate to Ms. [REDACTED] that all she needs is to contact TN Care and give them updated address for cards to be mail and to expect them within 2 weeks.

Telephone- CPSI received confirmation call from Ms. [REDACTED] that Ms. [REDACTED] had received the message.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/04/2014

Contact Method:

Contact Time: 04:30 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/14/2014

Completed date: 10/14/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 03:24 PM Entered By: [REDACTED]

Case services entered and routed to supervisor : Spanish interpreter is being requested for birthmother [REDACTED], person [REDACTED], who does not speak English fluently.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/04/2014

Contact Method:

Contact Time: 03:50 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/14/2014

Completed date: 10/14/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 03:22 PM Entered By: [REDACTED]

Spanish Interpreter, [REDACTED], informed this worker that Ms. [REDACTED] called her this weekend to ask her for this workers assistance with obtaining a copy of TN Care cards because the others were misplaced. CPSI will put in case services request for interpreter services to further assist.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	08/04/2014	Contact Method:	Face To Face
Contact Time:	01:00 PM	Contact Duration:	Less than 02 Hour
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	10/14/2014
Completed date:	10/14/2014	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community, Service Planning, Well Being		
Contact Type(s):	Collateral Contact		
Contact Sub Type:			

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 03:10 PM Entered By: [REDACTED]

1:00 pm [REDACTED] and [REDACTED] came in for their forensic interviews on today. Forensic interviewer [REDACTED] interviewed [REDACTED] and [REDACTED] and forensic interviewer [REDACTED] conducted [REDACTED] interview.

During the forensic interview, [REDACTED] (14) disclosed that he found his 1 y/o brother [REDACTED] unresponsive one Monday in February 2014. He said he and his siblings woke up for school around 7 am. He stated [REDACTED] was lying beside him when he saw a Family Dollar grocery bag on his face. He stated he noticed a white substance coming from his mouth. He said his mother was at work, but he went into the other room where the mothers boyfriend was to tell him what happened and he then called their mother and told her what happened. [REDACTED] stated that the night before he made [REDACTED] a 8 oz bottle of milk and added 2 mm of prescribed medicine because he said [REDACTED] had so much energy and he did not want him to wake up the other children. He stated his mother did not know he gave [REDACTED] the medication. [REDACTED] reported he doesnt know how bag got on [REDACTED] head. He stated they were living at the old residence when [REDACTED] died.

[REDACTED] (12) disclosed during the forensic interview that she woke up one morning and saw a bag around 1 y/o brothers head. She stated she told her 14 y/o brother [REDACTED] and he and other brother, [REDACTED] ripped the bag from around [REDACTED] head. [REDACTED] stated [REDACTED] carried [REDACTED] to [REDACTED] and [REDACTED] gave him mouth to mouth. She also stated her mother and ambulance were called. [REDACTED] stated the night before his death, [REDACTED] did not want to go to sleep and stated she tried to give [REDACTED] his bottle but he did not want it. She stated she then took him to [REDACTED] [REDACTED] denied ever seeing [REDACTED] playing with a bag before.

[REDACTED] (10) disclosed during the forensic interview that on one morning he woke up and told his brother [REDACTED] that [REDACTED] had a bag over his head. [REDACTED] said he ripped the bag off [REDACTED] head and he wasnt moving. [REDACTED] stated [REDACTED] picked [REDACTED] up and took him to [REDACTED] stated [REDACTED] was given mouth to mouth and white stuff came out. He reported his mother had gone to work already and that she and the ambulance were called. Also [REDACTED] said that they had all gone to a cookout the night before and that [REDACTED] did not want to go to sleep and [REDACTED] gave [REDACTED] some medicine in his bottle. [REDACTED] reported he did not know if [REDACTED] was sick or not.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/04/2014

Contact Method:

Contact Time: 11:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 12/15/2014

Completed date: 12/15/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 12/15/2014 10:12 AM Entered By: [REDACTED]

08/04/2014 Purpose of Contact:

Background checks on: [REDACTED], paramour

Content:

The following Internet Records Clearance inquiries were completed on the date(s) indicated:

Justice System Inquiry (JSSI): negative- completed on 8/04/2014

Methamphetamine Offender Registry: negative-completed on 08/04/2014

Tennessee Sexual offender Registry: negative-completed on 8/04/2014

Tennessee Felony Offender Registry: negative-completed on 08/04/2014



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/29/2014

Contact Method:

Contact Time: 03:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/14/2014

Completed date: 10/14/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 03:21 PM Entered By: [REDACTED]

[REDACTED] boyfriend of [REDACTED]

CPSI met with Mr. [REDACTED] with the assistance of Ms. [REDACTED] translator in a private area after the childrens forensic interviews at the advocacy center. Mr. [REDACTED] that Ms. [REDACTED] had already left for work on the morning [REDACTED] was found unresponsive. He reported that around 7 am, [REDACTED] brought [REDACTED] to him and [REDACTED] told him that he saw [REDACTED] with a bag over his head. He reported he observed [REDACTED] to have turned purple in color and had foam coming out of his mouth. Mr. [REDACTED] reported he got nervous and called Ms. [REDACTED] and she called the ambulance and the ambulance came and took [REDACTED] away. He reported the police came at the same time as ambulance, but he could not leave with [REDACTED] because the police held him for questioning. He reported Ms. [REDACTED] arrived home just as the ambulance had pulled away. He reported he did not sleep in the room with the children, but in a separate room. He reported to his knowledge, [REDACTED] was not sick and that he nor [REDACTED] knew that [REDACTED] had given him any medicine.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/29/2014

Contact Method:

Contact Time: 01:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/14/2014

Completed date: 10/14/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 03:02 PM Entered By: [REDACTED]

CPSI completed initial safety assessment. Score rated: Safe.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/29/2014

Contact Method:

Contact Time: 09:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 10/14/2014

Completed date: 10/14/2014

Completed By: [REDACTED]

Purpose(s): Permanency

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 10/14/2014 03:01 PM Entered By: [REDACTED]

Household composition:

[REDACTED], birthmother, dob [REDACTED]
[REDACTED], paramour, dob [REDACTED]
[REDACTED] sibling, dob: [REDACTED]; birthfather is [REDACTED]
[REDACTED] sibling, dob: [REDACTED] birthfather is [REDACTED]
[REDACTED] sibling, dob: [REDACTED] birthfather is [REDACTED]
[REDACTED], dob: [REDACTED] birthfather is [REDACTED] (no contact or known address)
[REDACTED], sibling, [REDACTED] birthfather is [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/29/2014

Contact Method: Face To Face

Contact Time: 08:00 AM

Contact Duration: Less than 03 Hour

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 10/13/2014

Completed date: 10/13/2014

Completed By: [REDACTED]

Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being

Contact Type(s): Sibling Interview/Observation

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/13/2014 10:03 PM Entered By: [REDACTED]

CPSI observed 2 y/o [REDACTED] to laid in her mothers arms during the interview. She did not want to leave her mothers side although Ms. [REDACTED] tried to get her to stay in the room with her siblings, but she would cry. CPSI observed [REDACTED] to look healthy as she was properly dressed and groomed with no visible marks or bruises. She eventually fell asleep in her mothers arms.

CPSI did not interview the siblings, [REDACTED], nor [REDACTED] regarding [REDACTED] death as they are already scheduled to have forensic interviews at the [REDACTED] [REDACTED] [REDACTED] on next week. However, CPSI observed [REDACTED], and [REDACTED] to be properly dressed with no visible marks or bruises on their bodies. They appeared happy and comfortable in their home environment. The children expressed no concerns.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	07/29/2014	Contact Method:	Face To Face
Contact Time:	08:00 AM	Contact Duration:	Less than 03 Hour
Entered By:	[REDACTED]	Recorded For:	
Location:	Family Home	Created Date:	10/14/2014
Completed date:	10/14/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Alleged Perpetrator Interview,Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 02:58 PM Entered By: [REDACTED]

8:00 am, CPSI met with Ms. [REDACTED] at the residence of [REDACTED]. At the home were Ms. [REDACTED] (mother) and [REDACTED] (14), [REDACTED] (12), [REDACTED] (10), [REDACTED] (6) and [REDACTED] (3). All the children appeared healthy with no visible marks or bruises observed. CPSI met with Ms. [REDACTED] alone and asked her about her knowledge of [REDACTED] death. Ms. [REDACTED] reported that she was at work when she received the call from her boyfriend, [REDACTED] that [REDACTED] was found with a plastic bag over his head and that he was not breathing. Ms. [REDACTED] reported that she called the ambulance from work and left from work to return home immediately. Ms. [REDACTED] reported that upon her arrival home, the ambulance was leaving with [REDACTED] and the police held her for questioning. She reported that around 6 am, prior to her leaving for work, she checked on the children who were sleeping at the time and did not see anything unusual and did not see a bag over [REDACTED] head. Ms. [REDACTED] reported that she even turned on the light in the room and noticed that [REDACTED] was trying to wake up but as soon as she turned the light back off, he laid back down and appeared to have gone back to sleep. When asked about the sleeping arrangements, Ms. [REDACTED] reported that her youngest daughter, [REDACTED] slept in the room with her and her boyfriend and [REDACTED] was sleeping beside [REDACTED] in the other room along with the other children. Ms. [REDACTED] reported she was told by police that they were told that a plastic bag was around [REDACTED] head and that he may have suffocated, an autopsy will be ordered and the case would likely be transferred to another unit within the police department for further investigation.

CPSI informed Ms. [REDACTED] of the autopsy results and asked her if she knew how a benedryl type medicine got into [REDACTED] body. She reported that she did not know how, but that the detective came to interview them and that she learned that [REDACTED] (14) had given [REDACTED] some medicine in hope that he goes to sleep because he was being very active. Ms. [REDACTED] reported the detectives took statements from [REDACTED] and informed her they will give statement to the medical examiners office. She reported the detectives informed her that no one seems to know how the bag got over [REDACTED] head.

When CPSI asked, Ms. [REDACTED] reported that over time, they talk about [REDACTED] death and no one still knows how the bag got over [REDACTED] head. However, Ms. [REDACTED] did tell where the bag came from. According to Ms. [REDACTED] the day before [REDACTED] death, they were all at a friend house and on the way home [REDACTED] (12; daughter) stated that she needed some sanitary napkins. She reported they stopped by Family Dollar store and purchased the items and the items were put in a plastic bag. Ms. [REDACTED] reported that when they got home, [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

took the items out of the bag and left it in the room they all were sleeping in.

CPSI reiterated the date and time for the forensic interviews. CPSI offered grief services. Ms. [REDACTED] denied the need for services and stated that right after [REDACTED] died, the children received counseling at school. In addition, Ms. [REDACTED] reported receiving support from her friends, family members and church. CPSI shared a brochure for camp [REDACTED] in case she changes her mind.

CPSI reviewed spanish version of DCS forms to include the Clients Rights Handbook, HIPAA, Equal Access/Grievance, Native American Veto Verification and Release of Information forms through the interpreter and signatures were obtained from Ms. [REDACTED]

CPSI observed the home to be spacious, clean, with functional utilizes, furnishings, food, separate sleeping spaces, and clothing for the children. No immediate environmental concerns observed.

CPSI also observed that Ms. [REDACTED] is able to speak some common phrases of the English language but not a lot. CPSI observed [REDACTED] and [REDACTED] to speak English fluently and they reported they attend [REDACTED] and [REDACTED] High School.

CPSI asked for collaterals. Ms. [REDACTED] reported she doesnt know a lot of people but does have a close friend, [REDACTED] and gave her contact information. Ms. [REDACTED] reported she had no other friends really. Ms. [REDACTED] reported Ms. [REDACTED] can speak English better than she can.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/24/2014

Contact Method:

Contact Time: 10:00 AM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/14/2014

Completed date: 10/14/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/14/2014 02:44 PM Entered By: [REDACTED]

CPSI received a call from [REDACTED], Spanish interpreter who advised this worker that she has been assigned the case and will make contact with [REDACTED] in efforts to find out her work schedule and a good date and time for a home visit and forensic interviews so that this worker could schedule those forensic interviews as advised by ADA [REDACTED]

Telephone- CPSI received a phone call from Ms. [REDACTED] to inform CPSI that Ms. [REDACTED] is available at any time for home visit and for the forensics and that she has transportation. CPSI requested that Ms. [REDACTED] inform Ms. [REDACTED] of home visit for 7/29/2014 at 8:00am.

Telephone- CPSI made contact with Ms. [REDACTED], forensic interviewer. She reported that children can be interviewed on 08/04/2014 at 1:00pm.

Telephone- CPSI contacted Ms. [REDACTED] to confirm forensic interview for 8/04/2014 at 1:00 pm and that Ms. [REDACTED] can meet with this worker for a home visit and Ms. [REDACTED] for translation purposes on 7/29/2014 at 8:00am.



**Tennessee Department of Children's Services
Case Recording Summary**

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	07/24/2014	Contact Method:	
Contact Time:	09:30 AM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	10/14/2014
Completed date:	10/14/2014	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 10/14/2014 02:41 PM Entered By: [REDACTED]

Case services entered and routed to supervisor : Spanish interpreter is being requested for birthmother, [REDACTED], person [REDACTED], who does not speak English at all. Her phone numbers are reported to be [REDACTED] and [REDACTED]. Childs name is [REDACTED], dob: [REDACTED] Person [REDACTED]. Case manager assigned is [REDACTED] supervisor's name is [REDACTED].



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/23/2014

Contact Method:

Contact Time: 10:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/14/2014

Completed date: 10/14/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 02:28 PM Entered By: [REDACTED]

CPSI staffed case with LI [REDACTED] CPSI was advised to do a TFACTS case service to request a Spanish interpreter due to reports that the mother does not speak English fluently in efforts to communicate the request for forensic interviews for her children as a directive from ADA [REDACTED].



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/18/2014

Contact Method: Face To Face

Contact Time: 11:10 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/14/2014

Completed date: 10/14/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community, Service Planning

Contact Type(s): Collateral Contact

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 12:09 PM Entered By: [REDACTED]

11:10 am, CPSI received phone call from Sgt. [REDACTED], Lead Investigator on this case, [REDACTED] Police, Homicide Bureau. Per Sgt. [REDACTED] an oral supplement report was completed upon taking a statement from older child, [REDACTED]. Per Sgt. [REDACTED] this case is not a homicide.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	07/16/2014	Contact Method:	Face To Face
Contact Time:	09:30 AM	Contact Duration:	Less than 01 Hour
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	10/14/2014
Completed date:	10/14/2014	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Collateral Contact		
Contact Sub Type:			

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 12:02 PM Entered By: [REDACTED]

CPSI staffed this case with Detective [REDACTED] in the absence of Detective [REDACTED] is the lead investigator on this case (on vacation) with the [REDACTED] Police- Homicide Bureau and [REDACTED], District Attorneys office at the [REDACTED]. During this staffing, this CPSI was able to obtain a current address for the [REDACTED] family as well as contact information. According to homicides investigation, there is a total of 5 children with the oldest being 13 y/o. The 13 y/o, whose name is [REDACTED], admitted to pouring benedryl into [REDACTED] bottle. According to their interviews with the family, no one admitted to knowing how the plastic bag got over [REDACTED] head. During their investigation, Detective learned the 7 y/o, reportedly saw the bag over [REDACTED] head when he woke up that morning then told [REDACTED] and then [REDACTED] told the mothers boyfriend, [REDACTED] (who was awoken from sleeping) who then called Ms. [REDACTED] the mother, who was at work. Also during this staffing, it was reported by Homicide Detective during the mothers interview that she went to work around 5 am, she checked on the children and did not see a bag over [REDACTED] head and that everything looked normal. Per Detective, the initial concern was the bag over [REDACTED] head and not the benedryl until the tox report came back. It was stated that [REDACTED] had gone to the doctor for a cold previously and that is why benedryl was given to him by the 13 y/o because he stated he saw his mother give it to him after he went to the doctor. It was stated the mother does not speak much English. Per ADA, [REDACTED], she will like for forensic interviews on siblings [REDACTED], age 12; [REDACTED], age 10 and [REDACTED], age 14.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/03/2014

Contact Method: Face To Face

Contact Time: 09:00 AM

Contact Duration: Less than 03 Hour

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/14/2014

Completed date: 10/14/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community, Service Planning

Contact Type(s): CPIT (Child Protective Investigative Team)

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 12:01 PM Entered By: [REDACTED]

CPSI submitted the DCS Handle and Return. The [REDACTED] County CPIT (Child Protection Investigation Team) team made a copy of the handle and return for review and for further discussion with Assistant District Attorney [REDACTED] who will make a decision regarding prosecution.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	07/02/2014	Contact Method:	
Contact Time:	03:15 PM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	07/02/2014
Completed date:	07/02/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 07/02/2014 03:31 PM Entered By: [REDACTED]

The case has been staffed with the CPSI has been unable to locate the family. The CPSI contacted DHS benefits in an attempt to locate along with other resources but has not received an answer back from DHS. The CPSI is to send a follow up email to Ms. [REDACTED] at DHS. The CPSI has received a copy of the autopsy report and the manner of death cannot be determined. The CPSI is being instructed to complete a handle and return for the CPIT team and to follow whatever recommendations the team gives.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/02/2014

Contact Method:

Contact Time: 10:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/14/2014

Completed date: 10/14/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community, Service Planning, Well Being

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 11:58 AM Entered By: [REDACTED]

This case was staffed with LI [REDACTED] CPSI was directed to make another request to Department of Human Services (DHS) to find out if Ms. [REDACTED] has benefits in her name and her current address.

Narrative Type: Addendum 1 Entry Date/Time: 10/14/2014 12:00 PM Entered By: [REDACTED]

CPSI made another request to DHS as directed by LI [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 06/20/2014

Contact Method: Correspondence

Contact Time: 01:00 PM

Contact Duration: Less than 01 Hour

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/14/2014

Completed date: 10/14/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community, Service Planning

Contact Type(s): Collateral Contact

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 11:57 AM Entered By: [REDACTED]

CPSI received copy of medical examiners report. The cause of death is Asphyxia due to suffocation, the contributory cause of death is diphenhydramine toxicity and the manner of death could not be determined. CPSI will staff case with LI [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 05/27/2014

Contact Method:

Contact Time: 08:30 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/14/2014

Completed date: 10/14/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 11:55 AM Entered By: [REDACTED]

CPSI made request to medical examiners office for copy of autopsy once completed.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/08/2014

Contact Method:

Contact Time: 09:30 AM

Contact Duration: Less than 01 Hour

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/14/2014

Completed date: 10/14/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 11:55 AM Entered By: [REDACTED]

Notice of Child/Near Death report form was reviewed and approved. CPSI was given directive to email report to Child-Fatality-Notification [REDACTED] on this date.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/04/2014

Contact Method: Attempted Face To Face

Contact Time: 11:23 AM

Contact Duration: Less than 01 Hour

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 04/04/2014

Completed date: 04/04/2014

Completed By: [REDACTED]

Purpose(s): Permanency, Service Planning

Contact Type(s): Alleged Perpetrator Interview, Parent/Caretaker Interview, Sibling Interview/Observation

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 04/04/2014 02:17 PM Entered By: [REDACTED]

11:23am, CPSI arrived to [REDACTED]. No one appeared to be at the residence. There was a big black trash bag at the curb of the home near the sidewalk. The bag appeared to have wood, metal rods, ripped lanolium and other household material in it. CPSI took photos that will be placed in case file of this home and trash bag. CPSI walked up the sidewalk and across the street to knock on doors to find out if anyone knew of this family and of their whereabouts.

-address of [REDACTED] is the home to the right of reported home. The home appeared light yellow in color with cast iron screen door. No one answered the door, CPSI left a contact letter with telephone number in effort to make contact.

-address of [REDACTED] is the home to left of reported home. Ms. [REDACTED] reported she lives in this home. When asked, she reported shes been at her residence for about 4 months and that when she moved in there was a Hispanic family living next door. She reported she did not know them or been around them; however, did report the home being vacant for about a month.

-address of [REDACTED] is across the street. No one answered the door; the home is brick; however, there was a [REDACTED] in the yard with large tires. CPSI left a letter for contact.

-address [REDACTED] is across the street. No one answered the door; the home is a light brown/cream color. CPSI left a letter for contact.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/04/2014

Contact Method:

Contact Time: 10:09 AM

Contact Duration: Less than 01 Hour

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/04/2014

Completed date: 04/04/2014

Completed By: [REDACTED]

Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 04/04/2014 02:05 PM Entered By: [REDACTED]

10:09am, CPSI made contact with [REDACTED] Funeral Home and made formal introduction. The purpose of this contact is to learn of any new contact information on this family as advised. CPSI spoke with [REDACTED] who informed this CPSI that she would have to talk to the director of the funeral home, [REDACTED]. CPSI was asked for the deceased child's/ decedent's name and put on a brief hold. Upon Ms. [REDACTED] return to the phone, she advised this CPSI that per their policy, they can not give out any information on the family, but can aid the Department by taking workers contact information and contact the family that way. This CPSI shared contact information so that family could be given this CPSI's contact information.

10:23am, CPSI attempted to contact Ms. [REDACTED] via telephone. The call went to voicemail and the voicemail message was in Spanish. CPSI left a message for a return call in hopes the family knows someone who can translate english to Spanish for them.

Telephone- 12:37pm, CPSI received a return call from Ms. [REDACTED] funeral home. She advised this worker that funeral director is on the phone trying to reach Ms. [REDACTED] at this very moment and will share this CPSI's contact information if Ms. [REDACTED] answers the phone.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/04/2014

Contact Method:

Contact Time: 10:08 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/04/2014

Completed date: 04/04/2014

Completed By: [REDACTED]

Purpose(s): Well Being

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 04/04/2014 02:04 PM Entered By: [REDACTED]

10:08am, CPSI made contact and informed Medical Examiners office of new case assignment to this worker involving decedent, ACV [REDACTED], age 1. CPSI [REDACTED] made contact with forensic medical investigator in efforts to learn of any contact information for this family. CPSI spoke with Investigator [REDACTED] who informed this CPSI of the funeral home in which family used. CPSI learned of [REDACTED] Funeral Home and address/ contact number was given.

CPSI asked if any medical records could be shared with this CPSI and CPSI was informed that medical records would have to be subpoena. Per Investigator [REDACTED] even [REDACTED] Police would have to do the same.

In reference to a preliminary report of the autopsy, Investigator [REDACTED] informed this CPSI that child has some minor bruising; however, it is not believed to be a result of physical abuse. It was reported that the home at the [REDACTED] address was observed trashy and that it was reported that [REDACTED] older brother (name unknown) discovered him with the shopping bag over his head. Investigator [REDACTED] denied any knowledge of contact information for other family members. CPSI also learned that the family are non English speaking, hispanic.



**Tennessee Department of Children's Services
Case Recording Summary**

Case Id: [REDACTED]

Case Name | [REDACTED]

Case Status: Close

Organization | [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	04/04/2014	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	12/15/2014
Completed date:	12/15/2014	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 12/15/2014 10:13 AM Entered By: [REDACTED]

04/04/2014 Purpose of Contact:

Background checks on: [REDACTED], birthmother

Content:

The following Internet Records Clearance inquiries were completed on the date(s) indicated:

Justice System Inquiry (JSSI): negative- completed on 4/04/2014

Methamphetamine Offender Registry: negative-completed on 04/04/2014

Tennessee Sexual offender Registry: negative-completed on 04/04/2014

Tennessee Felony Offender Registry: negative-completed on 04/04/2014



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/04/2014

Contact Method:

Contact Time: 09:05 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/04/2014

Completed date: 04/04/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 04/04/2014 02:07 PM Entered By: [REDACTED]

9:05am, This case was staffed with LI [REDACTED] LI [REDACTED] advised CPSI to take a picture of the home at [REDACTED], [REDACTED] to get names of neighbors spoken with regarding any information of family's whereabouts and to follow up with Medical examiner.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/04/2014

Contact Method:

Contact Time: 09:00 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/14/2014

Completed date: 10/14/2014

Completed By: [REDACTED]

Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 11:54 AM Entered By: [REDACTED]

04/04/2014 Purpose of Contact:

Background checks on: [REDACTED], birthmother

Content:

The following Internet Records Clearance inquiries were completed on the date(s) indicated:

Justice System Inquiry (JSSI): negative- completed on 4/04/2014

Methamphetamine Offender Registry: negative-completed on 04/04/2014

Tennessee Sexual offender Registry: negative-completed on 04/04/2014

Tennessee Felony Offender Registry: negative-completed on 04/04/2014

DCS History: no prior history



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/04/2014

Contact Method:

Contact Time: 12:26 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/04/2014

Completed date: 04/04/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 04/04/2014 02:19 PM Entered By: [REDACTED]

12:26am, CPSI was asked to make contact with [REDACTED] and [REDACTED] as it relates to verifying custody status, age of death and gender of ACV [REDACTED]. CPSI informed Mr. [REDACTED] that [REDACTED] has not been able to make contact with family since theyd moved. CPSI informed that a request to Department of Human Services had been sent and is currently awaiting a response. Mr. [REDACTED] informed CPSI to contact him as soon as information has been verified.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/02/2014

Contact Method:

Contact Time: 01:14 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/07/2014

Completed date: 04/07/2014

Completed By: [REDACTED]

Purpose(s): Permanency

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 04/07/2014 03:16 PM Entered By: [REDACTED]

CPSI [REDACTED] submitted requests to [REDACTED] Light Gas and Water and Department of Human Services for contact information on this family.

At approximately 3:59pm on 4/2/2014, CPSI [REDACTED] received a return email from [REDACTED] Light Gas and Water. She reported that Ms [REDACTED] doesn't currently have services in her name and was never listed as residing at [REDACTED] [REDACTED] CPSI will file email.

No contact from Dept of Human Services as of this date.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	04/02/2014	Contact Method:	
Contact Time:	01:14 PM	Contact Duration:	Less than 05 Hour
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	10/14/2014
Completed date:	10/14/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 11:34 AM Entered By: [REDACTED]
 1:14pm, CPSI made request to [REDACTED] Gas and Water [REDACTED] a utilities check with name of [REDACTED], last known address and her birthdate.

Correspondence- 3:59pm, CPSI received a response from [REDACTED] stating that [REDACTED] does not have services in her name and also has never been listed as [REDACTED].



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/02/2014

Contact Method: Attempted Phone Call

Contact Time: 10:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/04/2014

Completed date: 04/04/2014

Completed By: [REDACTED]

Purpose(s): Well Being

Contact Type(s): Referent Interview

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 04/04/2014 02:01 PM Entered By: [REDACTED]

CPSI [REDACTED] attempted contact with referent; however, referent had gotten off at work at 12:00pm (noon) and is not expected to return today. This CPSI left message for a return phone call.



Tennessee Department of Children's Services
Case Recording Summary

Case Id:	██████████	Case Name:	██████████
Case Status:	Close	Organization:	██████████

Case Recording Details

Recording ID:	██████████	Status:	Completed
Contact Date:	04/02/2014	Contact Method:	
Contact Time:	08:30 AM	Contact Duration:	Less than 30
Entered By:	██████████	Recorded For:	
Location:		Created Date:	04/04/2014
Completed date:	04/04/2014	Completed By:	██████████
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Case Summary		
Contact Sub Type:			

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 04/04/2014 01:49 PM Entered By: ██████████

This is non-custodial child.

TFACTS: No history was found based on the demographics provided in the fax.

Family Case IDs: None

Open Court Custody/FSS/FCIP No

Closed Court Custody No

Open CPS - No

Substantiated No

Death No

Screened out None

History (not listed above): No

County: ██████████

Notification: None

School/ Daycare: Unknown

Native American Descent: No

Directions: None Given

Reporters name/relationship:

Reporter states: This will serve as notification that the ██████████ County Medical Examiner is investigating the death of ██████████ (██████████). This 13 month-old child was found unresponsive by his brother with a plastic grocery sack on his face on the morning of 2/24/2014. Paramedics with ██████████ Fire Department Ambulance transported the child to ██████████ where Dr. ██████████ pronounced death at 0808 hours. The residence is located at ██████████. A scene investigation was conducted by this office and the City Police Department, and the decedents remains were transported to this office for autopsy. The cause/manner of death are pending at this time. The mothers name is ██████████. Several siblings also live in the house. Our case # is ██████████.

This is all the information that the referent had to report at this time. NOTE: Only a partial address was provided via fax. Per Google search, there is a ██████████. Also, there were two unknown siblings added to this report due to the reference in the fax of "several siblings."

County paged in MIR3

Per SDM: Investigative Track: P 1 / Neglect Death ██████████, TL on 4-1-14 @ 5:12 pm

Notified Child Death Group: ██████████



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

RA [REDACTED] was also copied on the notification email.

Recipients	Time Issued	Response Received	Devices	
	04-01-14 05:17:21 PM [REDACTED]	PRIVATE	Received	04-01-14 05:16:23 PM [REDACTED]
	04-01-14 05:16:24 PM [REDACTED]	---	PRIVATE	Email Sent



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 04/01/2014 Contact Method: Face To Face
 Contact Time: 07:15 PM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For: [REDACTED]
 Location: Family Home Created Date: 04/04/2014
 Completed date: 04/04/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Sibling Interview/Observation,ACV Interview/Observation,Alleged Perpetrator
 Interview,Parent/Caretaker Interview
 Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 04/04/2014 02:00 PM Entered By: [REDACTED]

CPSI [REDACTED] was assigned this case on today. CPSI [REDACTED] received responding CPSI [REDACTED] case documentation via email regarding her response to this investigation during 2nd shift. CPSI [REDACTED] will enter case documentation in TFACTS on behalf of CPSI [REDACTED]

"Investigator, [REDACTED] received P1 referral with the allegation of neglect death on 4/1/2014. The alleged victim is listed as [REDACTED] and the alleged perpetrator is listed as [REDACTED]. The referral states on 2/24/2014 thirteen month old, [REDACTED] was found unresponsive by his brother with a plastic grocery sack on his face. The familys address is listed as [REDACTED]

Investigator arrived to [REDACTED] at 715pm. An empty lot which appeared to have been a house in the past but was torn down sits to the left of the address provided. Investigator also observed trash sitting outside on the curb of the home. It appeared as if someone has been cleaning the home out. Investigator knocked on door but there was no answer. Investigator observed a neighbor outside and inquired about the family residing at [REDACTED]. The neighbor reported that a Hispanic family was residing in the home but have moved. The neighbor reported that they are unsure of the exact time that the family moved. The neighbor stated that contractors are observed renovating in the home during the day. Investigator asked neighbor if they knew where the family may have moved and the neighbor reported that they did not communicate with the family and do not know the familys current whereabouts. "



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/01/2014

Contact Method:

Contact Time: 10:00 AM

Contact Duration: Less than 01 Hour

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 10/14/2014

Completed date: 10/14/2014

Completed By: [REDACTED]

Purpose(s): Permanency, Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/14/2014 11:33 AM Entered By: [REDACTED]

CPSI completed Notice of Child/ Near Death, form CS-0635. CPSI sent to LI [REDACTED] for review.