



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

Intake

Intake ID: [REDACTED]
 Intake Taken By: [REDACTED] Intake Date/Time: 05/03/2014 11:47 AM [REDACTED]
 Track Assigned: Investigation Priority Assigned: 1
 Screened By: [REDACTED]
 Date Screened: 05/03/2014

Investigation

Investigation ID: [REDACTED]
 First County/Region: [REDACTED]
 Date/Time Assigned : 05/05/2014 11:01 AM
 First Team Leader Assigned: Date/Time
 First Case Manager Date/Time

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	1 Yr 2 Mos	Neglect Death	Yes	[REDACTED]	Birth Father
[REDACTED]	1 Yr 2 Mos	Neglect Death	Yes	[REDACTED]	Birth Mother
[REDACTED]	3 Yrs	Environmental Neglect	No	[REDACTED]	Birth Father
[REDACTED]	3 Yrs	Environmental Neglect	No	[REDACTED]	Birth Mother
[REDACTED]	5 Yrs	Environmental Neglect	No	[REDACTED]	Birth Father
[REDACTED]	5 Yrs	Environmental Neglect	No	[REDACTED]	Birth Mother

Referent(s)

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

Referent Address: [REDACTED]

Referent Phone Number: [REDACTED]

Type of Contact: I-3 Phone

Notification: None

Narrative: The child is not in state custody.

TFACTS:

Family ID: None found

Open Court Custody/FSS/FCIP None found

Closed Court Custody None found

Open CPS - None found



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

Substantiated None found
 Fatality None found
 Screened out None found
 History - (not listed above) - None found

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

Reporter's name/relationship: [REDACTED]

Reporter states:

The child is not in state custody.

The child, [REDACTED] (age 3 months) died today, 5-3-2014. [REDACTED] lived with his parents, [REDACTED] and [REDACTED]. [REDACTED] had two siblings in the home, [REDACTED] (age 4) and [REDACTED] (age 2).

[REDACTED] and his siblings are not in DCS custody. It is unknown if the older children have any special needs or disabilities. [REDACTED] was hospitalized last month for a viral infection and vomiting. It is unknown if he required any follow up medical treatment after his hospitalization.

Today, 5-3-2014, Law Enforcement was called to the family's home around 8:46 A.M. in regards to an unresponsive 3 month old child [REDACTED]. Law Enforcement and EMS responded. The mother, [REDACTED] reported she fed [REDACTED] this morning about thirty to forty minutes before going to work. She said [REDACTED] acted normally during the feeding. [REDACTED] laid [REDACTED] on the couch on his back. [REDACTED] old [REDACTED] father, [REDACTED], she was leaving for work. [REDACTED] left the home at 5:00 A.M.

[REDACTED] said he awakened around 8:00 A.M. today and found [REDACTED] on the couch. [REDACTED] was turned facing the backside of the couch. The father found [REDACTED] to be unresponsive. The father started CPR on [REDACTED] but [REDACTED] remained unresponsive. The father called the mother and she arrived home within 10 minutes. The mother then called 911.

[REDACTED] was transported to [REDACTED]. The child was not seen prior to the transport. Per the paramedics, there were no reports of trauma to [REDACTED] body. The child was pronounced deceased at 9:34 A.M. at [REDACTED]. An autopsy is pending.

The parents are appropriately upset about the incident. The family members are back at home with extended family members grieving. Law Enforcement has left the scene.

It is unknown if the parents have criminal history. It is unknown if the household members have alcohol and drug, mental health, or domestic violence issues. Officers have not spoken to the other children in the home.

In addition to [REDACTED] death, there are concerns about the environmental living conditions of the family's home. The home is "very filthy, dirty from the front to the back." There is clothing on the floors of the home. Old food and dishes were observed to be not washed inside the home. The older children "look decent but the parents could do a better job." There is electricity in the home and food in the refrigerator.

Law Enforcement's report number is # [REDACTED]



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

Per SDM: Investigation / P1 [REDACTED] CM 3 on 5-3-14 at 12:37 P.M.

[REDACTED] paged - Time Issued: 12:40:44 PM

[REDACTED] 05-03-14 12:40:44 PM [REDACTED]

[REDACTED] 05-03-14 12:41:31 PM [REDACTED]

Received

Email notification sent to [REDACTED]

[REDACTED] mail notification group.



**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: Age: 1 Yr 2 Mos

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] **Race:** [REDACTED] **Age:** 22 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] **Race:** [REDACTED] **Age:** 3 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] **Race:** [REDACTED] **Age:** 25 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: [REDACTED]

Gender: Female

Date of Birth [REDACTED]

Partipant ID: [REDACTED]

SSN: [REDACTED] Race: Black/African Age: 5 Yrs

Address: [REDACTED]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact: [REDACTED]

Contact Type:

Contact Comments:

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: 05/03/2014

Assignment Date:

Street Address:

City/State/Zip:

B. Allegation

#	Children's Name	DOB	Specific Allegation for Each Child	Alleged Perpetrator's Name	DOB	Classification	Severe Abuse	Classified By
		SSN			SSN			Classified Date
1	[REDACTED]	[REDACTED]	Neglect Death	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[REDACTED] 08/14/2014
2	[REDACTED]	[REDACTED]	Environmental Neglect	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	No	[REDACTED] 08/14/2014
3	[REDACTED]	[REDACTED]	Environmental Neglect	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	No	[REDACTED] 08/14/2014
4	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[REDACTED] 08/14/2014
5	[REDACTED]	[REDACTED]	Environmental Neglect	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	No	[REDACTED] 08/14/2014
6	[REDACTED]	[REDACTED]	Environmental Neglect	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	No	[REDACTED] 08/14/2014

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: Allegation Unfounded/Perpetrator Unfounded

D. Case Workers

Case Worker: [REDACTED]

Date: 08/21/2014



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]

Team Leader: [REDACTED]

Date: 08/21/2014

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:

There were no concerns observed with [REDACTED] age 4 and [REDACTED] age 2.

The parents reported the home was unkempt because they were trying to find clothes for the children to put on upon the arrival of police

[REDACTED] stated he has been staying at home while [REDACTED] works and he does not clean as well as she does.

The home has been observed since the initial report was made and there were no concerns observed.

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

Autopsy report of [REDACTED] was received from the [REDACTED]. The autopsy was performed by Dr. [REDACTED] under the supervision of [REDACTED]. The cause of death is undetermined and the manner of death could not be determined. There were no signs of external trauma to the body nor were there any congenital abnormalities noted with the child organs. There was no evidence of fractures or foreign bodies. The child's past medical history includes viral gastroenteritis and failure to thrive for which he was hospitalized April 22-25, 2014.

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

[REDACTED] mother stated she got up at 4:45am on Saturday morning. She stated she got up to check all the children. She stated she laid [REDACTED] on the couch, on his back, and she turned to TV on. She stated she went to wash up for work. She stated she fed and burped [REDACTED] before she left going to work. She stated she left going to work around 5:30am. She stated she received a call from [REDACTED] telling her that she needed to come home because something was wrong with [REDACTED]. [REDACTED] stated she called 911 upon her arrival to the home. She stated [REDACTED] started to do CPR. She stated when she arrived home she stated [REDACTED] nose was cold and his lips were blue. She stated the police and paramedics arrived at the same time. She stated they tried to revive [REDACTED]. She stated they put an oxygen mask over his mouth and put him on the heart monitor. She stated they then rushed him out of the home and put him in the back of the ambulance. She stated he did not have a heart rate. She stated she went to the hospital with [REDACTED] and [REDACTED] stayed behind with the other children and he was being questioned by the police. [REDACTED] stated [REDACTED] was in the hospital in March 2014 and again in April 2014 with a viral infection. She stated both times he was taken to the hospital he had the same symptoms. She stated he was limp, weak, struggling to breathe, he could not keep food down, he was vomiting, and he had diarrhea. She also reported that he would have a thick mucus in his throat and he appeared to choking off of it. She stated they gave him an IV and he was hospitalized until he was able to keep food down. She stated the last time he was in the hospital for 3 days (April 22-25). [REDACTED] stated the hospital ran test. She stated they checked his blood, his stool, and they thought something was wrong with his liver. She stated they also stated there were crystals in his urine. She stated the hospital could not tell them what was wrong with [REDACTED]. She stated they diagnosed him with a viral infection. She stated he was discharged and prescribed multivitamins to take (Poly-vitamin drops 50 ml by mouth daily). She stated she forgot to get the prescription filled and she got it filled on Friday. [REDACTED] stated [REDACTED] often slept on the couch or in his swing. She stated she laid him on the couch because he liked to watch TV.



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

Case Name : ██████████

Investigation ID: ██████████

██████████ stated he woke up at 8am and found ██████████ on the couch. He stated he was not breathing. He stated he called ██████████ and told her to come home now because something was wrong with ██████████. ██████████ stated he began to do CPR. He stated when he tilted ██████████ head back he heard a gurgling sound. He stated ██████████ called 911 on her way home. He stated she arrived home within minutes of him calling her. He stated the police and the ambulance also arrived right after she did. ██████████ stated when he came into the living room ██████████ was lying on his back and his face was turned toward the pillow.

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

It was reported the child, ██████████ (age 3 months) died today, 5-3-2014. ██████████ lived with his parents, ██████████ and ██████████. ██████████ had two siblings in the home, ██████████ (age 4) and ██████████ (age 2). ██████████ and his siblings are not in DCS custody. It is unknown if the older children have any special needs or disabilities. ██████████ was hospitalized last month for a viral infection and vomiting. It is unknown if he required any follow up medical treatment after his hospitalization. Today, 5-3-2014, Law Enforcement was called to the family's home around 8:46 A.M. in regards to an unresponsive 3 month old child ██████████. Law Enforcement and EMS responded. The mother, ██████████, reported she fed ██████████ this morning about thirty to forty minutes before going to work. She said ██████████ acted normally during the feeding. ██████████ laid ██████████ on the couch on his back. ██████████ told ██████████ father ██████████, she was leaving for work. ██████████ left the home at 5:00 A.M. ██████████ said he awakened around 8:00 A.M. today and found ██████████ on the couch. ██████████ was turned facing the backside of the couch. The father found ██████████ to be unresponsive. The father started CPR on ██████████ but ██████████ remained unresponsive. The father called the mother and she arrived home within 10 minutes. The mother then called 911. ██████████ was transported to ██████████. The child was not seen prior to the transport. Per the paramedics, there were no reports of trauma to ██████████ body. The child was pronounced deceased at 9:34 A.M. at ██████████. An autopsy is pending. The parents are appropriately upset about the incident. The family members are back at home with extended family members grieving. Law Enforcement has left the scene. It is unknown if the parents have criminal history. It is unknown if the household members have alcohol and drug, mental health, or domestic violence issues. Officers have not spoken to the other children in the home. In addition to ██████████ death, there are concerns about the environmental living conditions of the family's home. The home is "very filthy, dirty from the front to the back." There is clothing on the floors of the home. Old food and dishes were observed to be not washed inside the home. The older children "look decent but the parents could do a better job." There is electricity in the home and food in the refrigerator.

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

The case was returned to CPIT on 8-13-2014. The case was reviewed at ADA ██████████. The allegation of neglect death will not be substantiated. The allegation of environmental neglect will not be substantiated.

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: 11/03/2014 Contact Method:
 Contact Time: 08:12 AM Contact Duration: Less than 05
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 11/05/2014
 Completed date: 11/05/2014 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: 11/05/2014 02:27 PM Entered By: [REDACTED]

The case has been reviewed by [REDACTED] who has granted permission to close this case.
 Copies of the 740 will be forwarded to the Judge and the AG.



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: 09/26/2014 Contact Method:
 Contact Time: 02:15 AM Contact Duration: Less than 30
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 09/26/2014
 Completed date: 09/26/2014 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: 09/26/2014 02:58 PM Entered By: [REDACTED]

CPSI [REDACTED] has made contact with the family interviewed the mother and father. The two siblings have been observed and there were no safety concerns noted. The CPSI spoke with a neighbor and the paternal grandmother but has not heard back from the third collateral. Background checks have been completed on all adults living inside of the home with no concerns noted. The autopsy report has been completed and the cause and manner are undetermined. The CPSI offered services to the family on several occasions and they were declined each time. The case has been reviewed in CPIT and assistant AG [REDACTED] signed off on the cases APUP. The children have been seen prior to submitting this case for review. The case is being forwarded to [REDACTED] for review.



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: 09/24/2014

Contact Method:

Contact Time: 03:28 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/24/2014

Completed date: 09/24/2014

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: 09/24/2014 04:02 PM Entered By: [REDACTED]

The Department received a referral on 5-3-2014, with an allegation of neglect death regarding [REDACTED]. The child was not in the Department's custody at the time of this referral. On 5-3-2014, law enforcement was called to home because the child was found to be unresponsive. The mother [REDACTED] reported she fed the child about thirty or forty minutes prior to going to work. The mother reported the child acted normal during his feeding. The mother reported she laid the child on the couch on his back. The mother stated she told the father [REDACTED] she was leaving for work and she left at 5:00am. The father later awoke at 8:00 am and found the child to be unresponsive. The child's face was turned facing the backside of the couch. The father stated he did CPR but the child remained unresponsive. The father called the mother and she arrived home within in 10 minutes. The mother called 911. [REDACTED] was transported to [REDACTED]. The child was pronounced deceased at 9:34am.

The Investigator spoke with the mother [REDACTED]. [REDACTED] stated she got up at 4:45am on Saturday morning. She stated she got up to check all the children. She stated she laid [REDACTED] on the couch, on his back, and she turned to TV on. She stated she went to wash up for work. She stated she fed and burped [REDACTED] before she left going to work. She stated she left going to work around 5:30am. She stated she received a call from [REDACTED] telling her that she needed to come home because something was wrong with [REDACTED]. [REDACTED] stated she called 911 upon her arrival to the home. She stated [REDACTED] started to do CPR. She stated when she arrived home she stated [REDACTED] nose was cold and his lips were blue. She stated the police and paramedics arrived at the same time. She stated they tried to revive [REDACTED]. She stated they put an oxygen mask over his mouth and put him on the heart monitor. She stated they then rushed him out of the home and put him in the back of the ambulance. She stated he did not have a heart rate. [REDACTED] stated after they arrived to hospital they told her [REDACTED] had passed away. [REDACTED] reported the child was recently hospitalized for a viral infection in March and April of 2014.

The investigator also spoke with the father [REDACTED]. [REDACTED] stated he woke up at 8am and found [REDACTED] on the couch. He stated he was not breathing. He stated he called [REDACTED] and told her to come home now because something was wrong with [REDACTED]. [REDACTED] stated he began to do CPR. He stated when he tilted [REDACTED] head back he heard a gurgling sound. He stated [REDACTED] called 911 on her way home. He stated she arrived home within in minutes of him calling her. He stated the police and the ambulance also arrived right after she did. He stated [REDACTED] was rushed to the hospital and [REDACTED] went with him. He stated he stayed behind with the other children and he was questioned by the police. [REDACTED] stated when he came into the living room [REDACTED] was lying on his back and his face was turned toward the pillow.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

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

The Child Protection Investigation Team Meeting held on 5-5-2014, in [REDACTED] The disposition given was for the Department of Children Services to handle as appropriate.

The case was returned to Child Protection Investigation Protection Team (CPIT) on 8-13-2014, in [REDACTED] The case was reviewed by Assistant District Attorney (ADA) [REDACTED]. The allegation was classified as Allegation Unsubstantiated/Perpetrator Unsubstantiated for the allegation of Child Neglect Death.

The parents were interviewed on 5-3-2014. The mother reported the child was acting normal during the time she fed him. She stated she placed the child on his back on the couch. The father stated he found the child unresponsive when he woke up at 8:00am. Both parents were observed to be distraught during the interview. [REDACTED] cried and watched a video of his son. [REDACTED] was observed to be claim and she stated could not believe that her child had passed away.

The autopsy report of [REDACTED] was received from the [REDACTED] on 8-13-2014. The autopsy was performed by Dr. [REDACTED] Pediatric Pathology Fellow under the supervision of Dr. [REDACTED]. The cause of death is undetermined and the manner of death could not be determined. There were no signs of external trauma to the body nor were there any congenital abnormalities noted with the child organs. There was no evidence of fractures or foreign bodies. The child's past medical history includes viral gastroenteritis and failure to thrive for which he was hospitalized April 22-25, 2014.

The case will be closed and classified as allegation unsubstantiated/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]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/15/2014

Contact Method: Face To Face

Contact Time: 03:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: [REDACTED]

Created Date: 09/24/2014

Completed date: 09/24/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): ACV Interview/Observation, Parent/Caretaker Interview

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/24/2014 04:29 PM Entered By: [REDACTED]

The Investigator met with [REDACTED] and [REDACTED] today. [REDACTED] stated she has been getting stronger each day. She stated she often thinks about her son and what he would be doing. She stated she has good days and bad days. She stated tries to keep herself busy when she is not at work. She stated she finds herself thinking about [REDACTED] when she does not have anything to do. She stated she has been working extra hours and she when she is not working she is spending every moment with [REDACTED] and [REDACTED]

[REDACTED] reported he is doing better. He stated he misses his son every day. He stated he knows he is in a better place but it still is hard not having him around. He stated he often stares at his sons picture or watches videos of him on his phone.

The Investigator spoke with both parents about grief counseling. They both stated they did not feel like the counseling would not be appropriate for them. They stated no one can tell them how to grieve for their child. Both parents were informed that if they changed their minds they could contact this investigator and a referral would be made for them.

[REDACTED] age 3 was observed at the home. There were no marks or bruises observed at the time of this visit.

[REDACTED] age 4 was also observed at the home. There were no marks or bruises observed at the time of this visit. [REDACTED] was observed playing with a doll. She stated she was feeding the baby.



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:	01:09 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	08/21/2014
Completed date:	08/21/2014	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: 08/21/2014 01:17 PM Entered By: [REDACTED]

NEGLECT DEATH:

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

ENVIRONMENTAL NEGLECT:

DCS Policy defines a living situation either inside or outside the residence that is dangerous or unhealthy. The situation described can cause harm or significant risk of harm to the child (ren) in the home. The child's age and developmental status must be considered when evaluating the impact of the environmental condition of the child. The following are some examples of environmental situations as they relate to the child's age and developmental status: Leaking gas from stove or heating unit; Substances or objects accessible to the child that may endanger health/safety; Open/broken/missing windows; Structural hazards such as caving roof, holes in floor or walls; Exposed electrical wires; Children that lack clothing so that they are dangerously exposed to the elements, i.e., not having shoes or warm clothes for winter, etc.; Excessive garbage or rotted or spoiled food, which threatens health; Evidence of human or animal waste in the living quarters; and Insect or rodent infestation.

The Department received a referral with an allegation for neglect death and environmental neglect. According to the referral, the child, [REDACTED] (age 3 months) died today, 5-3-2014. [REDACTED] lived with his parents, [REDACTED] and [REDACTED]. [REDACTED] had two siblings in the home, [REDACTED] (age 4) and [REDACTED] (age 2). [REDACTED] and his siblings are not in DCS custody. It is unknown if the older children have any special needs or disabilities. [REDACTED] was hospitalized last month for a viral infection and vomiting. It is unknown if he required any follow up medical treatment after his hospitalization. Today, 5-3-2014, Law Enforcement was called to the family's home around 8:46 A.M. in regards to an unresponsive 3 month of child [REDACTED]. Law Enforcement and EMS responded. The mother, [REDACTED], reported she fed [REDACTED] this morning about thirty to forty minutes before going to work. She said [REDACTED] acted normally during the feeding. [REDACTED] laid [REDACTED] on the couch on his back. [REDACTED] told [REDACTED] ather, [REDACTED], she was leaving for work. [REDACTED] left the home at 5:00 A.M. [REDACTED] said he awakened around 8:00 A.M. today and found [REDACTED] on the couch. [REDACTED] was turned facing the backside of the couch. The father found [REDACTED] to be unresponsive. The father started CPR on [REDACTED] but [REDACTED] remained unresponsive. The father called the mother and she arrived home within 10 minutes. The mother then called 911 [REDACTED] was transported to [REDACTED]. The child was not seen prior to the transport. Per the paramedics, there were no reports of trauma to [REDACTED] body. The child was pronounced deceased at 9:34 A.M. at [REDACTED]. An autopsy is pending. The parents are appropriately upset about the incident. The family members are back at home with extended family



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

members grieving. Law Enforcement has left the scene. It is unknown if the parents have criminal history. It is unknown if the household members have alcohol and drug, mental health, or domestic violence issues. Officers have not spoken to the other children in the home. In addition to [REDACTED] death, there are concerns about the environmental living conditions of the family's home. The home is "very filthy, dirty from the front to the back." There is clothing on the floors of the home. Old food and dishes were observed to be not washed inside the home. The older children "look decent but the parents could do a better job." There is electricity in the home and food in the refrigerator. Law Enforcement's report number is # [REDACTED]

CPIT meeting held on 5-5-2014. DCS to handle as appropriate.

The investigator spoke with [REDACTED], mother stated she got up at 4:45am on Saturday morning. She stated she got up to check all the children. She stated she laid [REDACTED] on the couch, on his back, and she turned to TV on. She stated she went to wash up for work. She stated she fed and burped [REDACTED] before she left going to work. She stated she left going to work around 5:30am. She stated she received a call from [REDACTED] telling her that she needed to come home because something was wrong with [REDACTED]. [REDACTED] stated she called 911 upon her arrival to the home. She stated [REDACTED] started to do CPR. She stated when she arrived home she stated [REDACTED] nose was cold and his lips were blue. She stated the police and paramedics arrived at the same time. She stated they tried to revive [REDACTED]. She stated they put an oxygen mask over his mouth and put him on the heart monitor. She stated they then rushed him out of the home and put him in the back of the ambulance. She stated he did not have a heart rate. She stated she went to the hospital with [REDACTED] and [REDACTED] stayed behind with the other children and he was being questioned by the police. [REDACTED] stated after they arrived to hospital they told her [REDACTED] had passed away. [REDACTED] stated [REDACTED] was in the hospital in March 2014 and again in April 2014 with a viral infection. She stated both times he was taken to the hospital he had the same symptoms. She stated he was limp, weak, struggling to breathe, he could not keep food down, he was vomiting, and he had diarrhea. She also reported that he would have a thick mucus in his throat and he appeared to choking off of it. She stated they gave him an IV and he was hospitalized until he was able to keep food down. She stated the last time he was in the hospital for 3 days (April 22-25). [REDACTED] stated the hospital ran test. She stated they checked his blood, his stool, and they thought something was wrong with his liver. She stated they also stated there were crystals in his urine. She stated the hospital could not tell them what was wrong with [REDACTED]. She stated they diagnosed him with a viral infection. She stated he was discharged and prescribed multivitamins to take (Poly-vitamin drops 50 ml by mouth daily). She stated she forgot to get the prescription filled and she got it filled on Friday. [REDACTED] stated [REDACTED] often slept on the couch or in his swing. She stated she laid him on the couch because he liked to watch TV.

[REDACTED] stated he woke up at 8am and found [REDACTED] on the couch. He stated he was not breathing. He stated he called [REDACTED] and told her to come home now because something was wrong with [REDACTED]. [REDACTED] stated he began to do CPR. He stated when he tilted [REDACTED] head back he heard a gurgling sound. He stated [REDACTED] called 911 on her way home. He stated she arrived home within minutes of him calling her. He stated the police and the ambulance also arrived right after she did. He stated [REDACTED] was rushed to the hospital and [REDACTED] went with him. He stated he stayed behind with the other children and he was questioned by the police. [REDACTED] stated when he came into the living room [REDACTED] was lying on his back and his face was turned toward the pillow.

There were no concerns observed with [REDACTED] age 4 and [REDACTED] age 2.

The parents reported the home was unkempt because they were trying to find clothes for the children to put on upon the arrival of police.

[REDACTED] stated he has been staying at home while [REDACTED] works and he does not clean as well as she does.

The home has been observed since the initial report was made and there were no concerns observed.

Autopsy report of [REDACTED] was received today from the [REDACTED]. The autopsy was performed by Dr. [REDACTED], Pediatric Pathology Fellow under the supervision of Dr. [REDACTED]. The cause of death is undetermined and the manner of death could not be determined. There were no signs of external trauma to the body nor were there any congenital abnormalities noted with the child organs. There was no evidence of fractures or foreign bodies. The child's past medical history includes viral gastroenteritis and failure to thrive for which he was hospitalized April 22-25, 2014.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

The family was offered grief counseling but they declined the services.

The case was returned to CPIT on 8-13-2014. The case was reviewed at ADA [REDACTED]. The allegation of neglect death will not be substantiated. The allegation of environmental neglect will not be substantiated.

Narrative Type: Addendum 1 Entry Date/Time: 09/03/2014 01:05 PM Entered By: [REDACTED]

The case was returned to Child Protection Investigation Protection Team CPIT on 8-13-2014, in [REDACTED]. The case was reviewed by Assistant District Attorney (ADA) [REDACTED].

The case will be closed and classified as Allegation Unsubstantiated/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]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/21/2014

Contact Method:

Contact Time: 01:08 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/21/2014

Completed date: 08/21/2014

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: 08/21/2014 01:08 PM

Entered By: [REDACTED]

740 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: 08/21/2014

Contact Method:

Contact Time: 01:08 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/21/2014

Completed date: 08/21/2014

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: 08/21/2014 01:09 PM Entered By: [REDACTED]

Closioing SDM completed rated as 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: 08/21/2014

Contact Method: Attempted Phone Call

Contact Time: 12:58 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/21/2014

Completed date: 08/21/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/21/2014 01:08 PM Entered By: [REDACTED]

The investigator attempted to contact [REDACTED] maternal grandfather. There was no answer at the number provided. A message was left asking [REDACTED] to contact this investigator.



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: Phone Call

Contact Time: 12:45 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/21/2014

Completed date: 08/21/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/21/2014 01:06 PM Entered By: [REDACTED]

The investigator spoke with [REDACTED], paternal grandmother. [REDACTED] stated this has been a difficult time for her son and [REDACTED]. She stated she has held both of them up in prayer. She stated she cannot imagine what they are going through. She stated she has been there to listen when they both need to talk and support them in anyway she can. She stated she often picks up [REDACTED] and [REDACTED] up so [REDACTED] and [REDACTED] can have some time together. She stated they really are good parents. She stated she will continue to be there for them and support them. She stated has no concerns with the family.



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: 08/14/2014

Contact Method: Correspondence

Contact Time: 09:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/18/2014

Completed date: 08/18/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

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

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/18/2014 08:45 AM Entered By: [REDACTED]

The case of [REDACTED] was reviewed in CPIT today by ADA [REDACTED]. The allegation of neglect death will not be substantiated by the Department. Per the autopsy report received on 8-13-2014, the cause of death is undetermined and the manner of death could not be determined.



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:	08/13/2014	Contact Method:	Face To Face
Contact Time:	05:00 PM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:	Family Home	Created Date:	08/21/2014
Completed date:	08/21/2014	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	ACV Interview/Observation, Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 08/21/2014 12:58 PM Entered By: [REDACTED]

The investigator completed a home visit today at [REDACTED]. The investigator did not observe any safety of environmental concerns during this visit. [REDACTED] reported she has been working and that each day is a process for her. She stated each day is different. She stated she is still awaiting a copy of the death certificate. [REDACTED] was informed that [REDACTED] autopsy report has been received and the cause of death is unknown and the manner of death is undetermined. [REDACTED] appeared to be upset and she wanted to know why her son died. [REDACTED] stated he had been to the hospital with a viral infection. [REDACTED] was informed that it was noted that [REDACTED] was hospitalized with viral gastroenteritis. She asked if there was a problem with his heart or lungs. [REDACTED] was informed that there were no concerns with his vital organs. [REDACTED] stated she did not understand why the cause of death could not be determined. She stated this situation has been difficult for her and her family. She stated she assumed the autopsy report would tell her something more about her son's death.

The investigator spoke with [REDACTED] about grief counseling. She declined the services and stated she does not think a book can tell her how to feel. [REDACTED] was informed that this counseling may help her come to terms with her son's death. She stated she did not think so and that she would continue to deal the way she has been. She stated she has talked with close relatives and co-worker. She stated her other two children have also helped her. [REDACTED] was informed that if she changes her mind about the services she can contact this investigator and a referral will be made on her behalf.

[REDACTED] age 4 was observed at the home. There were no marks or bruises observed at the time of this visit. [REDACTED] was observed playing with a doll. When asked how she was doing she stated she was fine.

[REDACTED] age 2 was also observed at the home. There were no marks or bruises observed at the time of this visit. [REDACTED] was observed running through the apartment. He hid behind the couch when this investigator attempted to speak with him.



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: 08/13/2014

Contact Method: Correspondence

Contact Time: 09:16 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/13/2014

Completed date: 08/18/2014

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: 08/13/2014 09:38 AM Entered By: [REDACTED]

Autopsy report of [REDACTED] was received today from the [REDACTED]. The autopsy was performed by Dr. [REDACTED], Pediatric Pathology Fellow under the supervision of Dr. [REDACTED]. The cause of death is undetermined and the manner of death could not be determined. There were no signs of external trauma to the body nor were there any congenital abnormalities noted with the child organs. There was no evidence of fractures or foreign bodies. The child's past medical history includes viral gastroenteritis and failure to thrive for which he was hospitalized April 22-25, 2014. The complete report will be placed in the CPS 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: 08/11/2014

Contact Method:

Contact Time: 03:15 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/13/2014

Completed date: 08/13/2014

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: 08/13/2014 09:16 AM

Entered By: [REDACTED]

Request sent to the Medical Examiner's Office for the autopsy report of [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: 07/14/2014

Contact Method: Face To Face

Contact Time: 04:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 07/30/2014

Completed date: 07/30/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): ACV Interview/Observation, Parent/Caretaker Interview

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 07/30/2014 09:26 AM Entered By: [REDACTED]

The investigator met with [REDACTED] and [REDACTED], today at there are apartment home located at [REDACTED]. There were no concerns observed with the home during this visit. [REDACTED] stated today was her off day and she was just trying to get some rest. She stated her other two children are ok. She stated everything is different. She stated her daughter [REDACTED] is asking more questions about [REDACTED]. [REDACTED] stated she has told her daughter her baby brother is "in the sky". She stated when [REDACTED] talks about [REDACTED] she says "baby gone, he's in the sky". [REDACTED] stated every time this investigator makes contact with her it's a constant reminder about the lost they have suffered. [REDACTED] stated some days she becomes emotional but it is not to the point where she is suicidal. [REDACTED] was offered grief counseling and she stated "there is no manual to say how she should feel and how to deal with this situation". [REDACTED] stated every day is different. [REDACTED] was asked about her support system. She stated she talks with her co-workers and her immediately family. [REDACTED] asked if this investigator has received a copy of the autopsy. [REDACTED] was informed that a copy of the report has not been received and it usually takes about 3 months before the report is received. [REDACTED] stated she just wants this to be over so she and her family can move on and deal with this privately.

The investigator also spoke with [REDACTED]. He stated he was doing ok. He stated he started a new job at [REDACTED] last Wednesday. He stated he only worked two days and he had to be rushed to the hospital. He stated he was severely dehydrated and his kidneys could have shut down. He stated the hospital has recommended that he not return. [REDACTED] stated he will be looking for another job. He was also offered services and he stated he agreed with [REDACTED] and felt that they could deal with things on their own rather than listening to someone read from a book.

[REDACTED] age 4 was observed at the home. There were no marks or bruises observed. She was smiling and laughing during this visit.

[REDACTED] age 2 was observed at the home. There were no marks or bruises observed. When the investigator would speak to him he would smile and hide his face with his hands.



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 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/02/2014

Completed date: 07/02/2014

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: 07/02/2014 03:40 PM Entered By: [REDACTED]

A second request was sent to the [REDACTED] Medical Examiner's Office requesting a copy of the autopsy report for [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: 06/30/2014

Contact Method: Face To Face

Contact Time: 05:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 07/02/2014

Completed date: 07/02/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): ACV Interview/Observation, Parent/Caretaker Interview, Notation

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 07/02/2014 03:39 PM Entered By: [REDACTED]

The Investigator completed a home visit today at [REDACTED]. There were no concerns observed at the time of this visit. The Investigator spoke with the family regarding grief services and they declined the need for counseling at this time. They stated they were receiving support from family and friends. [REDACTED] stated she has returned to work and her job has been very supportive towards her and her family. She thanked this investigator for allowing them to have time to themselves.

[REDACTED] age 4 was observed and there were no concerns observed at this time. Child was observed to be neatly dressed and no marks or bruises were observed.

[REDACTED] age 2 was observed. There were no concerns observed at the time of this visit. He was observed to be neatly dressed and there were no marks or bruises observed. He greeted this investigator with a "High five".



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:	05/20/2014	Contact Method:	
Contact Time:	12:07 PM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	05/20/2014
Completed date:	05/20/2014	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: 05/20/2014 12:14 PM Entered By: [REDACTED]

The case has been reviewed with the CPSI. The CPSI is being instructed to document that she has forwarded the notice of fatality to the Office of Child safety and that she has forwarded her request for an autopsy to [REDACTED]. The CPSI has spoken with one collateral and will need to speak with two more. The two remaining siblings have been observed by the CPSI and will need to be seen again. The parents have been offered services i.e. grief counseling but declined when initially asked, the CPSI will follow up with a second request. The CPSI has completed background checks on the parents and will need to enter the results into the documentation. The CPSI will request medical records from [REDACTED] for [REDACTED] and his two siblings.



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: 05/19/2014

Contact Method:

Contact Time: 04:32 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/02/2014

Completed date: 07/02/2014

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: 07/02/2014 03:08 PM Entered By: [REDACTED]

Request for the autopsy request was sent to [REDACTED] today.



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:	05/19/2014	Contact Method:	
Contact Time:	01:00 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	08/18/2014
Completed date:	08/18/2014	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: 08/18/2014 11:45 AM Entered By: [REDACTED]
 Medical records received today from [REDACTED] or [REDACTED]. The medical records will be placed in the CPS file.

Narrative Type: Addendum 1 Entry Date/Time: 09/29/2014 02:15 PM Entered By: [REDACTED]

Medical records confirmed that the child [REDACTED] was seen on April 22, 2014. Child presented with vomiting, diarrhea, dehydration, and fever which began on 4-22-2014. Child has similar symptoms in March 2014. A full work up was completed and child was diagnosed to be failure to thrive. Child also diagnosed with viral gastroenteritis, transaminitis, metabolic acidosis, and inadequate caloric intake. Mother was given instructions to feed baby with Good Start Gentle 20 kcal per ounce, 4 ounces every 3 to 4 hours for 7 feeds a day.



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: 05/12/2014

Contact Method: Phone Call

Contact Time: 09:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/02/2014

Completed date: 07/02/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/02/2014 03:13 PM Entered By: [REDACTED]

The Investigator received a telephone call today from [REDACTED] [REDACTED] stated she was calling to inform this Investigator that she and her family will be away from their home today because her son's memorial service is today at 11am.



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: 05/06/2014

Contact Method: Phone Call

Contact Time: 09:30 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/02/2014

Completed date: 07/02/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 07/02/2014 03:27 PM Entered By: [REDACTED]

The Investigator received a telephone call from [REDACTED] today [REDACTED] stated he was very upset because [REDACTED] mother had their son's body moved to a the funeral home. He stated he did not know that his son's body had been removed from the hospital. He stated he thought they would call them before that moved the body. He stated that he has not had a chance to see his son's body. He asked if the investigator had been informed of the body being moved. The Investigator informed [REDACTED] his son's body to be removed from the hospital in order for an autopsy for be completed. [REDACTED] was informed that autopsies are completed at the [REDACTED] [REDACTED] was informed that this investigator was not informed of that. [REDACTED] stated he felt that he and [REDACTED] should have been notified about the body being removed. [REDACTED] was informed once the medical examiner has completed its exam then the body is sent to the funeral home that the family picks. [REDACTED] stated he was upset because no one discussed this with him [REDACTED] stated that he is still distraught over his son's untimely death. [REDACTED] asked if any report has been received detailing the cause of his son's death. [REDACTED] was informed that no paperwork has been received at this time and it usually takes a few weeks or months before a report is provided. He was informed that once the Medical Examiner has completed their report a copy will be provided to them. [REDACTED] just needed to speak to someone to find out what is going on. [REDACTED] stated he would contact this Investigator if he had any other questions or 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: 05/05/2014

Contact Method:

Contact Time: 12:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 05/05/2014

Completed date: 05/05/2014

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: 05/05/2014 04:09 PM Entered By: [REDACTED]

Medical records requested from [REDACTED] for [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: 05/05/2014

Contact Method:

Contact Time: 12:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 05/05/2014

Completed date: 05/05/2014

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: 05/05/2014 04:11 PM Entered By: [REDACTED]

Request was faxed to the [REDACTED] requesting a copy of the autopsy once it has been 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: 05/05/2014

Contact Method: Correspondence

Contact Time: 09:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 05/05/2014

Completed date: 05/05/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

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

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 05/05/2014 04:08 PM Entered By: [REDACTED]

CPIT meeting held today. DCS to handle as appropriate.



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: 05/05/2014

Contact Method:

Contact Time: 08:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/02/2014

Completed date: 07/02/2014

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: 07/02/2014 03:05 PM Entered By: [REDACTED]

Medical Records requested today from [REDACTED] for [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: 05/03/2014 Contact Method: Face To Face
 Contact Time: 06:30 PM Contact Duration: Less than 02 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 05/05/2014
 Completed date: 05/05/2014 Completed By: [REDACTED]
 Purpose(s): Safety - Child/Community
 Contact Type(s): Alleged Perpetrator Interview, Collateral Contact, Initial ACV Face To Face
 Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 05/05/2014 04:07 PM Entered By: [REDACTED]

[REDACTED] mother stated she got up at 4:45am on Saturday morning. She stated she got up to check all the children. She stated she laid [REDACTED] on the couch, on his back, and she turned to TV on. She stated she went to wash up for work. She stated she fed and burped [REDACTED] before she left going to work. She stated she left going to work around 5:30am. She stated she received a call from [REDACTED] telling her that she needed to come home because something was wrong with [REDACTED]. [REDACTED] stated she called she called 911 upon her arrival to the home. She stated [REDACTED] started to do CPR. She stated when she arrived home she stated [REDACTED] nose was cold and his lips were blue. She stated she knew he was gone. She stated the police and the ambulance arrived to the home at the same time. She stated one of the paramedics came in and looked at [REDACTED] and he waited until the second paramedic came in. She stated they tried to revive [REDACTED]. She stated they put an oxygen mask over his mouth and put him on the heart monitor. She stated they then rushed him out of the home and put him in the back of the ambulance. She stated he did not have a heart rate. She stated went to the hospital with [REDACTED] and [REDACTED] stayed behind with the other children and he was being questioned by the police. [REDACTED] stated after they arrived to hospital they told her [REDACTED] had passed away. [REDACTED] stated [REDACTED] was in the hospital in March 2014 and again in April 2014 with a viral infection. She stated both times he was taken to the hospital he had the same symptoms. She stated he was limp, weak, struggling to breathe, he could not keep food down, he was vomiting, and he had diarrhea. She also reported that he would have a thick mucus in his throat and he appeared to choking off of it. She stated they gave him an IV and he was hospitalized until he was able to keep food down. She stated the last time he was in the hospital for 3 days (April 22-25). [REDACTED] stated the hospital ran test. She stated they checked his blood, his stool, and they thought something was wrong with his liver. She stated they also stated there were crystals in his urine. She stated the hospital could not tell them what was wrong with [REDACTED]. She stated they diagnosed him with a viral infection. She stated he was discharged and prescribed multivitamins to take (Poly-vitamin drops 50 ml by mouth daily). She stated she forgot to get the prescription filled and she got it filled on Friday. [REDACTED] stated [REDACTED] often slept on the couch or in his swing. She stated she laid him on the couch because he liked to watch TV. [REDACTED] stated the home was not cleaned because she has been working. She stated that there were clothes thrown throughout the home because she was trying to find the children something to put on. She stated she has not been able to wash clothes or dishes because their water is off. She stated the water has been off since 6am this morning. She stated they called [REDACTED] and they told them it was not there problem. She stated she contacted the leasing office and they keep telling her they will get to it. [REDACTED] reported that the autopsy will be completed on Sunday (5-4-2014). [REDACTED] stated she did not



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

physically harm her child. She stated if she had the police would have arrested her on the spot.

[REDACTED] stated he woke up at 8am and found [REDACTED] on the couch. He stated he was not breathing. He stated he called [REDACTED] and told her to come home now because something was wrong with [REDACTED]. [REDACTED] stated he began to do CPR. He stated when he tilted the [REDACTED] head back he heard a gurgling sound. He stated [REDACTED] called 911 on her way home. He stated she arrived home within minutes of him calling her. He stated the police and the ambulance also arrived right after she did. He stated [REDACTED] was rushed to the hospital and [REDACTED] went with him. He stated he stayed behind with the other children and he was questioned by the police. He stated he became upset and he knocked things around because he was upset, because his son had just passed away and he was being treated like a criminal. [REDACTED] stated he stays at home while [REDACTED] works. He stated he is still adjusting to picking up after the children and cleaning the home. He stated the home is not always unkempt. He stated when he cleans he does not clean as well as [REDACTED]. He stated there are piles of clothes because they need to wash. He also reported that the water has been off and they have been unable to. He stated [REDACTED] began to cry and watched videos of [REDACTED] laughing and playing. [REDACTED] stated when he came into the living room [REDACTED] face laying on his back and his face was turned toward the pillow. [REDACTED] stated he removed the pillow from the couch because he did not want anyone to sit on it. He stated his other two children were still asleep. He stated the other two children were sent with his mother and father so he and [REDACTED] could grieve. He stated they have not had time to themselves because people have been in and out of the home all day. [REDACTED] remained emotional and tearful through this visit. He asked at the beginning of the visit if this could be done on another day. He stated he and his girlfriend have not had time to grieve. He stated he could not help his son and he could not be with [REDACTED] when she was at the hospital, because he was being treated like a criminal. He stated he just lost his son and he is being interrogated by the police and now DCS is in his home. [REDACTED] stated "how do we know he's gone people wake up in their caskets all the time". [REDACTED] stated his son had just come home from the hospital prior to turning 3 months old. He stated they took him to the hospital when he was sick and they could not tell them what was wrong with him. He asked how people get over this psychologically. He and [REDACTED] were offered grief counseling. He stated he did not want to talk to anyone. Prior to the conclusion of the visit and he and [REDACTED] became very emotional. [REDACTED] stated at first it did not seem real. She stated since this CPSI was at her home it all became real, that her son is gone. She stated "I carried him for nine months and only got to spend 3 months with him. I'm not supposed to bury my child; my child is supposed to bury me". [REDACTED] became extremely emotional. [REDACTED] cried during the entire visit and repeatedly watched a video of [REDACTED]. He did clam down and he called his mother [REDACTED] and asked her to bring [REDACTED] and [REDACTED] to the home. [REDACTED] stated it was difficult for him to have the other children in the home at this time.

The CPSI met with [REDACTED], paternal grandmother briefly in the parking lot of the [REDACTED]. [REDACTED] and [REDACTED] were both observed in the back seat of the car sleeping. There were no concerns observed during this visit. [REDACTED] told this CPSI to contact her if any other additional information is needed. She stated she understood that this was a procedure. She stated her son and [REDACTED] are distraught and they need time alone. She stated the children will be with her until arrangements are made. [REDACTED] was informed that this CPIS would follow up with her in a few days.

Narrative Type: Addendum 1 Entry Date/Time: 05/05/2014 04:12 PM Entered By: [REDACTED]

The home was observed to be unkempt. There was food item on the kitchen counter, piles of clothes on the floor, the bedroom were also unkempt.



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:	05/03/2014	Contact Method:	Attempted Face To Face
Contact Time:	02:40 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	05/05/2014
Completed date:	05/05/2014	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Collateral Contact		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 05/05/2014 03:47 PM Entered By: [REDACTED]

CPSI [REDACTED] went to the leasing office at the [REDACTED]. The leasing office was closed for the weekend.



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: 05/03/2014

Contact Method: Attempted Face To Face

Contact Time: 02:30 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 05/05/2014

Completed date: 05/05/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Alleged Perpetrator Interview, Initial ACV Face To Face

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 05/05/2014 03:41 PM Entered By: [REDACTED]

CPSI [REDACTED] attempted to complete a home visit today at [REDACTED] TN. There was no answer at the residence at the time of this visit. A business card was left at the residence for the family.



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: 05/03/2014

Contact Method: Face To Face

Contact Time: 02:30 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 05/05/2014

Completed date: 05/05/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 05/05/2014 03:45 PM Entered By: [REDACTED]

CPSI [REDACTED] spoke with [REDACTED], Neighbor of [REDACTED] and [REDACTED]. [REDACTED] stated she does not know anything about the family personally. She stated the only thing she knows about the family is that they recently moved into the apartment next door and their baby died today. [REDACTED] stated there was a lot of people at the apartment earlier. [REDACTED] stated she does not know how long the family has been gone. She stated she keeps to herself.



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: 05/03/2014

Contact Method:

Contact Time: 02:30 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 05/05/2014

Completed date: 05/05/2014

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: 05/05/2014 04:16 PM

Entered By: [REDACTED]

Family Composition

[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: 05/03/2014

Contact Method: Attempted Face To Face

Contact Time: 02:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: [REDACTED]

Created Date: 08/18/2014

Completed date: 08/18/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Initial ACV Face To Face, Parent/Caretaker Interview

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)**Narrative Details**

Narrative Type: Original Entry Date/Time: 08/18/2014 08:57 AM Entered By: [REDACTED]

The investigator was not able to observe [REDACTED] age 3 months. The child was transported to [REDACTED] prior to this investigator's arrival to the home. The child was pronounced dead once he arrived to the hospital on 5-3-2014.



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: 05/03/2014

Contact Method: Attempted Face To Face

Contact Time: 01:45 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 05/05/2014

Completed date: 05/05/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Alleged Perpetrator Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 05/05/2014 03:38 PM Entered By: [REDACTED]

CPS [REDACTED] attempted to contact [REDACTED] [REDACTED] via telephone. There was no answer at the number provided. The call went straight to voice mail. A message was left informing [REDACTED] of the referral and she was asked to contact this CPSI.



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: 05/03/2014

Contact Method: Phone Call

Contact Time: 01:30 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 05/05/2014

Completed date: 05/05/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Referent Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 05/05/2014 03:35 PM Entered By: [REDACTED]

The referent was contacted today to obtain additional information regarding the referral. The referent reported the child [REDACTED] was not observed. The referent when law enforcement responded to the home the child was being rushed to the ambulance by paramedics. The referent stated the paramedics were asked if there was any trauma to the body and he was informed that they did not see anything. The referent stated the home was observed to be nasty. The referent stated the home was unkempt, there were piles of clothes lying around, and dishes with food in them. The referent stated the parents could do better with cleaning the home. The referent stated there was a lot of extended family at the home with the family.



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: 05/03/2014

Contact Method:

Contact Time: 11:47 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 05/05/2014

Completed date: 05/05/2014

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: 05/05/2014 03:28 PM Entered By: [REDACTED]

The Department received referral with an allegation of neglect and environmental neglect. According to the referral, The child, [REDACTED] (age 3 months) died today, 5-3-2014. [REDACTED] lived with his parents, [REDACTED] and [REDACTED]. [REDACTED] had two siblings in the home, [REDACTED] (age 4) and [REDACTED] (age 2). [REDACTED] and his siblings are not in DCS custody. It is unknown if the older children have any special needs or disabilities. [REDACTED] was hospitalized last month for a viral infection and vomiting. It is unknown if he required any follow up medical treatment after his hospitalization. Today, 5-3-2014, Law Enforcement and EMS responded to the family's home around 8:46 A.M. in regards to an unresponsive 3 month old child. Law Enforcement and EMS responded. The mother, [REDACTED], reported she fed [REDACTED] this morning about thirty to forty minutes before going to work. She said [REDACTED] acted normally during the feeding. [REDACTED] laid [REDACTED] on the couch on his back. [REDACTED] old father, [REDACTED], she was leaving for work. [REDACTED] left the home at 5:00 A.M. [REDACTED] said he awakened around 8:00 A.M. today and found [REDACTED] on the couch. [REDACTED] was turned facing the backside of the couch. The father found [REDACTED] to be unresponsive. The father started CPR on [REDACTED] but [REDACTED] remained unresponsive. The father called the mother and she arrived home within 10 minutes. The mother then called 911. [REDACTED] was transported to [REDACTED]. The child was not seen prior to the transport. Per the paramedics, there were no reports of trauma to [REDACTED] body. The child was pronounced deceased at 9:34 A.M. at [REDACTED]. An autopsy is pending. The parents are appropriately upset about the incident. The family members are back at home with extended family members grieving. Law Enforcement has left the scene. It is unknown if the parents have criminal history. It is unknown if the household members have alcohol and drug, mental health, or domestic violence issues. Officers have not spoken to the other children in the home. In addition to [REDACTED] death, there are concerns about the environmental living conditions of the family's home. The home is "very filthy, dirty from the front to the back." There is clothing on the floors of the home. Old food and dishes were observed to be not washed inside the home. The older children "look decent but the parents could do a better job." There is electricity in the home and food in the refrigerator. Law Enforcement's report number is # [REDACTED].