



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

Intake

Intake ID: [REDACTED]
 Intake Taken By: [REDACTED] Intake Date/Time: 05/06/2014 03:18 PM [REDACTED]
 Track Assigned: Investigation Priority Assigned: 2
 Screened By: [REDACTED]
 Date Screened: 05/06/2014

Investigation

Investigation ID: [REDACTED]
 First County/Region: [REDACTED]
 Date/Time Assigned : 05/07/2014 02:45 PM
 First Team Leader Assigned: [REDACTED] Date/Time 05/07/2014 12:00 AM
 First Case Manager [REDACTED] Date/Time 05/07/2014 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	1 Yr 1 Mos	Neglect Death	Yes	[REDACTED]	None

Referent(s)

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

Referent Address:

Referent Phone Number:

Type of Contact: I-3 Phone

Notification: None

Narrative: TFACTS: History listed below is possibly connected to [REDACTED] This connection cannot be confirmed due to lack of DOB information (for [REDACTED]).

Family Case IDs: # [REDACTED] # [REDACTED] # [REDACTED]

Open Court Custody/FSS/FCIP No

Closed Court Custody No

Open CPS - No

Substantiated Yes - # [REDACTED] / DEC /10-10-11 [REDACTED]

Death No



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

Screened Out - Yes - 3 (# [REDACTED] / # [REDACTED] / # [REDACTED])

History (not listed above): Yes

9-18-2003 [REDACTED] / Substantial Risk Physical Injury/Unsubstantiated

5-31-2011 [REDACTED] / PHA/Services Recommended and Accepted

7-22-2010 [REDACTED] / PHA, SEE, LOS, PYA/ Unsubstantiated

7-7-2009 [REDACTED] / SEE/Unsubstantiated

County: [REDACTED]

Notification: None

School/ Daycare: Unknown

Native American Descent: Unknown

Directions: None Given

Reporters name/relationship: [REDACTED] [REDACTED] [REDACTED]

Reporter states:

[REDACTED] (7 months) lived with his mother, [REDACTED] and father [REDACTED]. It is unknown if there are other children in the home. It is unknown if the family still lives at this address.

The address listed [REDACTED] is the location of [REDACTED] death.

DCS was notified of [REDACTED] death today, 5-6-2014. They received a death certificate that said the cause of death was pending further studies. In the police report, it is reported that [REDACTED] died on January 3rd, 2014. DCS was never notified about [REDACTED] death.

The report stated that [REDACTED] was fed by [REDACTED] his babysitter, prior to being placed in his crib. It was reported that [REDACTED] was placed on his left side, propped with a pillow. When [REDACTED] was found, he was lying on his back and he was blue. There appeared to be a white substance around his mouth. It appeared to be formula. It is believed that [REDACTED] spit up and aspirated formula. He was in the care of the babysitter, [REDACTED] when this occurred. [REDACTED] appeared to be congested prior to being laid down.

It is unknown if [REDACTED] had an autopsy completed. There is no information on parents statements regarding [REDACTED] death at this time.

DCS was never notified of this death. There has been no contact with the family at this point. The police chief, [REDACTED] investigated this incident but did not report it to DCS.

It was reported that [REDACTED] is a housing authority. It is unknown if [REDACTED] still lives at the address listed.

It is reported that this information came from a death certificate and police report. There is no other information known at this time

DCS is requesting an investigation status. However, because the death occurred in January, they are not requesting a P1 status.

Special Needs or Disabilities: Unknown

Childs current location/is the child safe at this time: Unknown

Perpetrators location at this time: Unknown

Any other safety concerns for the child(ren) or worker who may respond: Unknown

Note: Based on the information provided, no history could be found for [REDACTED] or [REDACTED] to show that other children are currently present in the home, but if the history listed above is correct



**Tennessee Department of Children's Services
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for [REDACTED] (perp), then it appears as though [REDACTED] does have biological children in her care.

Per SDM: Investigative Track, P1

Override to P2 (incident occurred in January 2014, no other known children in the home at this time, LE has already investigated)

[REDACTED] TC, on 5/6/14 @ 5:32pm

Notified Child Death/Child Near Death Notification Group via Email:

[REDACTED]
[REDACTED] RA - [REDACTED]



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

Participant(s)

Name: [REDACTED]

Gender: Female

Date of Birth:

Participant ID: [REDACTED]

SSN:

Race:

Age:

Address [REDACTED]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Name: [REDACTED]

Gender: Male

Date of Birth:

Participant 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
Tennessee Child Abuse Hotline Summary**

Name: [REDACTED]

Gender: Female

Date of Birth:

Participant 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: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN:

Race: White

Age: 1 Yr 1 Mos

Address [REDACTED] [REDACTED] [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:



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

A. Investigation

Case Name: [REDACTED]
 Referral Date: 05/06/2014
 Street Address: [REDACTED],
 City/State/Zip: [REDACTED], [REDACTED] [REDACTED]

Investigation ID: [REDACTED]
 Assignment Date: 05/07/2014

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] 06/14/2014

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: Allegation Unsubstantiated / Perpetrator Unsubstantiated against [REDACTED] for death death towards [REDACTED]

D. Case Workers

Case Worker: [REDACTED] Date: 06/29/2014
 Team Leader: [REDACTED] Date: 06/29/2014

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:

CPS Central Intake received this report on 5/6/2014 and assigned as P2 response.
 The case was assigned to this CM [REDACTED] on 5/6/2014 with the response due on 5/8/2014

The Face to Face will be unable to be met due to DCS not being notified by law enforcement or [REDACTED] at the date of death for the child. DCS was notified as part of the (Child Death Review Board) as a death certificated was issued and sent to the team board members.

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 stated:
 Cause of death: could not be determined
 Manner of death: could not be determined
 Circumstances of death: found unresponsive and gurgling in crib



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]

follow through with the investigation on 5/6/2014. CPIS [REDACTED] was notified that law enforcement did not complete a full investigation of the child's death as there were no pictures taken that were given to DCS, no evidences collected, and no statements documented. When CPIS [REDACTED] asked law enforcement with the [REDACTED] Police Department for more information on the case such as pictures that were reportedly taken the day of the incident Chef [REDACTED] stated I gave you what I had. There were no pictures or statement. The child choked on his spit up. There was nothing to investigate. CPIS [REDACTED] made contact with the child's mother, [REDACTED] who reported that she now lives in [REDACTED] and gathered a statement from her. CPIS [REDACTED] met face to face with the child's father, [REDACTED] at the [REDACTED] DHS office to gather a statement and complete all necessary paperwork. CPIS [REDACTED] also contacted and meet with [REDACTED] and [REDACTED] at the home in which the incident took place. At the time of the incident [REDACTED] lived with [REDACTED]. CPIS [REDACTED] gathered step by step what happen the day [REDACTED] passed away. During [REDACTED] statement she reported that she had laid [REDACTED] in the crib on his side and propped him up with a flat pillow as she always did. [REDACTED] did not disclose any concerning information and contacted 911 once she observed the child not responding but gurgling. CPIS [REDACTED] attempted to gather all medical records for the child and received all record from [REDACTED]. On 6/4/2014 CPIT was formally convened and the team agreed that the case should be unsubstantiated.

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: 09/12/2014

Contact Method:

Contact Time: 03:23 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/12/2014

Completed date: 09/12/2014

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: 09/12/2014 03:25 PM Entered By: [REDACTED]

This case has been reviewed by IC [REDACTED] and Deputy Director of Investigations [REDACTED] and approved for closure at this time.



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: 03:54 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/11/2014

Completed date: 08/11/2014

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: 08/11/2014 03:48 PM Entered By: [REDACTED]

Lead Investigator [REDACTED] has met with the case manager regarding this case. Casework has been completed according to policy and the case is ready for closure. The appropriate forms have been signed and are placed in the hard file. A copy of the 740 will be delivered to the Juvenile Judge and/or the DA as appropriate. This is accomplished on a monthly basis and a log is maintained of such. The hard file will be logged and maintained in the county file room. this file will be submitted to the Central Office for final closure approval.



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: 03:57 PM Contact Duration: Less than 30
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 08/04/2014
 Completed date: 08/04/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Case Summary
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/04/2014 03:58 PM Entered By: [REDACTED]

Case Summary

Ending Summary to include assessment of progress and long-term view (i.e. Assess family to progress since initial contact, have established goals been met, what will family do different to prevent further DCS involvement and finding of the investigation):
 The case was originally opened on May 6, 2014 of a reported neglect death against non-relative, [REDACTED] towards [REDACTED] age 4 months. The child, [REDACTED] died on January 3rd, 2014. DCS was not notified until May 6, 2014 when the Child Death Review Board received a copy of the child's death certificate that reported that the cause of death was unable to be determined. CPSI [REDACTED] was requested to follow through with the investigation on 5/6/2014. CPIS [REDACTED] was notified that law enforcement did not complete a full investigation of the child's death as there were no pictures taken that were given to DCS, no evidences collected, and no statements documented. When CPIS [REDACTED] asked law enforcement with the [REDACTED] Police Department for more information on the case such as pictures that were reportedly taken the day of the incident Chef [REDACTED] stated I gave you what I had. There were no pictures or statement. The child choked on his spit up. There was nothing to investigate.

CPSI [REDACTED] made contact with the child's mother [REDACTED] who reported that she now lives in [REDACTED] and gathered a statement from her. CPSI [REDACTED] met face to face with the child's father, [REDACTED] at the [REDACTED] DHS office to gather a statement and complete all necessary paperwork. CPSI [REDACTED] also contacted and meet with [REDACTED] and [REDACTED] at the home in which the incident took place. At the time of the incident [REDACTED] lived with [REDACTED] CPSI [REDACTED] gathered step by step what happen the day [REDACTED] passed away. During [REDACTED] statement she reported that she had laid [REDACTED] in the crib on his side and propped him up with a flat pillow as she always did. [REDACTED] did not disclose any concerning information and contacted 911 once she observed the child not responding but gurgling.

CPIS [REDACTED] attempted to gather all medical records for the child and received all record from [REDACTED]
 On 6/4/2014 CPIT was formally convened and the team agreed that the case should be unsubstantiated.

Autopsy report stated:

Cause of death: could not be determined

Manner of death: could not be determined

Circumstances of death: found unresponsive and gurgling in crib

In Summary (located in the second paragraphs)



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Autopsy findings are significant for petechial hemorrhages on the anterior surface of the lung, organ weights higher than expected for age, and faint brown-black discoloration of the white matter in a patchy distribution of the frontal, parietal, and temporal lobes with prominence of the blood vessels. Postmortem toxicology testing is negative for drugs and alcohol, and vitreous electrolytes reveal a slight elevation in potassium and slight decrease in creatinine. Viral culture of the nasopharyngeal swab and bacterial cultures of the cerebrospinal fluid are negative. Bacterial cultures of the blood and lung tissue reveal Gram-negative rod fermenter species and Bacillus species, consistent with postmortem overgrowth. Histologic examination reveals patchy distribution of gemistocytic astrocytes in the white matter with foci of microglia and engorgement of the blood vessels. While these foci of microglia are abnormal and might represent a seizure focus, a history of seizures is not reported and no seizure-like activity is documented.

The SDM, Safety Assessment was completed on 5/6/2014 and notes a harm factor. The following safety intervention is being used (child death occurred 1/3/2014).

The CS-740 form was completed on 8/4/2014 and a copy has been placed in the file. A copy of the Classification and Summary will be submitted to TL [REDACTED] for review and a copy sent to the Juvenile Court 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:	07/29/2014	Contact Method:	Face To Face
Contact Time:	03:00 PM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:	Hospital	Created Date:	08/04/2014
Completed date:	08/04/2014	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: 08/04/2014 01:20 PM Entered By: [REDACTED]

7/29/2014 Visit to [REDACTED] to meet with Dr. [REDACTED] in order to receive a copy of the autopsy reported for [REDACTED]

CPSI [REDACTED] made the first attempt to speak with Dr. [REDACTED] at 11:40am and waited to speak with Dr. [REDACTED] until 12:45pm. CPIS [REDACTED] had to return to [REDACTED] for a prior scheduled meeting. CPSI [REDACTED] informed personnel in the ER department that CPSI [REDACTED] would return later to speak with Dr. [REDACTED].

CPSI [REDACTED] returned to the [REDACTED] at 2:45pm to speak with Dr. [REDACTED]. CPSI [REDACTED] was seen at 3pm and handed a copy of the autopsy reported for [REDACTED]. CPSI [REDACTED] discussed with Dr. [REDACTED] the concern of not being called on child death cases in [REDACTED]. CPIS [REDACTED] gave Dr. [REDACTED] a business card with CPSI [REDACTED] state and personnel cell phone number. CPSI [REDACTED] explained that if he did not have time to call the central intake center he was welcome to call CPSI [REDACTED] at any time with the situation at hand. CPSI [REDACTED] explained that there has been lack of communication between law enforcement and DCS in regards to child death cases to the point that DCS is called several months later. CPSI [REDACTED] stressed how important it was for DCS to be call in these cases. Dr. [REDACTED] reported that he understood and would try to help the Department in any way. CPSI [REDACTED] gave Dr. [REDACTED] a copy of the release of information for his file on [REDACTED].

Autopsy report stated:

Cause of death: could not be determined

Manner of death: could not be determined

Circumstances of death: found unresponsive and gurgling in crib

In Summary (located in the second paragraphs)

Autopsy finding are significant for petechial hemorrhages on the anterior surface of the lung, organ weights higher than expected for age, and faint brown-black discoloration of the white matter in a patch distribution of the frontal, parietal, and temporal lobes with prominence of the blood vessels. Postmortem toxicology testing is negative for drugs and alcohol, and vitreous electrolytes reveal a slight elevation in potassium and slight decrease in creatinine. Viral culture of the nasopharyngeal swab and bacterial cultures of the cerebrospinal fluid are negative. Bacterial cultures of the blood and lung tissue reveal Gram-negative rod fermenter species and Bacillus species, consistent with postmortem overgrowth. Histologic examination reveals patchy distribution of gemistocytic astrocytes



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

in the white matter with foci of microglia and engorgement of the blood vessels. While these foci of microglia are abnormal and might represent a seizure focus, a history of seizures is not reported and no seizure-like activity is documented.



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: 07/28/2014

Contact Method: Face To Face

Contact Time: 03:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 08/04/2014

Completed date: 08/04/2014

Completed By: [REDACTED]

Purpose(s): Permanency, 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: 08/04/2014 01:24 PM Entered By: [REDACTED]

7/28/2014 CPIS [REDACTED] reviewed the case with LI [REDACTED] and it was agreed once CPIS [REDACTED] received the autopsy report that CPIS [REDACTED] could proceed with entering the case summary and submitting the case for 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: 07/28/2014

Contact Method:

Contact Time: 09:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/14/2014

Completed date: 08/14/2014

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: 08/14/2014 04:24 PM Entered By: [REDACTED]

Lead Investigator [REDACTED] I met with the investigator today and we discussed the progress of this case. I went over the policy requirements and we discussed safety, permanency and well-being. An action plan was completed and the specific steps include: This case has been presented to CPIT and they agreed with AUPU. This case is ready to be submitted for 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:	07/23/2014	Contact Method:	Phone Call
Contact Time:	10:30 AM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	07/23/2014
Completed date:	07/23/2014	Completed By:	[REDACTED]
Purpose(s):	Well Being		
Contact Type(s):	Collateral Contact		
Contact Sub Type:			

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 07/23/2014 12:39 PM Entered By: [REDACTED]

7/23/2014 10:30am Tc CPSI [REDACTED] called [REDACTED] in order to gather a copy of [REDACTED] autopsy report. CPSI [REDACTED] spoke with the director of the ER, [REDACTED] who reported that Dr. [REDACTED] was off work today and CPIS [REDACTED] would have to speak with him about receiving a copy of the report. CPS [REDACTED] requested to leave a message for Dr. [REDACTED] and [REDACTED] reported that she would call him on his cell phone and have him call CPIS [REDACTED]

10:35am Dr. [REDACTED] with [REDACTED] called CPSI [REDACTED] and reported that he was told to call CPSI [REDACTED] in regard to an autopsy from January 2014. CPSI [REDACTED] explained that situation with the child death and law enforcement not conducting an investigation because not abuse or neglect was suspected. CPSI [REDACTED] explained that DCS was notified several months after the child's death. Dr. [REDACTED] reported that he understood and he could have CPSI [REDACTED] a copy of the report on Tuesday 7/29/2014 if CPIS [REDACTED] was willing to come to [REDACTED] hospital to pick the report up and bring a copy of the release of information.



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: 07/01/2014

Contact Method:

Contact Time: 09:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/11/2014

Completed date: 08/11/2014

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: 08/11/2014 03:47 PM Entered By: [REDACTED]

Lead Investigator [REDACTED] This case is approaching 60 days open but it will remain open waiting for the autopsy results.



**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: 03:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 07/23/2014

Completed date: 07/23/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Collateral Contact

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 07/23/2014 10:41 AM Entered By: [REDACTED]

6/30/2014 3pm CPSI [REDACTED] spoke with LI [REDACTED] face to face in regard to receiving a copy of the autopsy report for [REDACTED]. LI [REDACTED] reported that CPIS [REDACTED] could get a copy from the Investigator from law enforcement. CPSI [REDACTED] explained that that law enforcement did not conduct a full investigation of the case as reported by Officer [REDACTED] with the [REDACTED] Police Department. LI [REDACTED] reported that CPSI [REDACTED] could email several people with the state of Tennessee to determine who and where CPIS [REDACTED] could request the information needed. LI [REDACTED] provided a copy of an email with several names to 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: 06/29/2014

Contact Method:

Contact Time: 01:29 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/29/2014

Completed date: 06/29/2014

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: 06/29/2014 01:29 PM Entered By: [REDACTED]

6/29/2014 CPSI [REDACTED] faxed a second request for [REDACTED] medical records to Dr. [REDACTED] office located in [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: 06/29/2014

Contact Method: Correspondence

Contact Time: 01:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/04/2014

Completed date: 08/04/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notification of Classification

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/04/2014 12:31 PM Entered By: [REDACTED]

Allegation Unsubstantiated / Perpetrator Unsubstantiated for neglect death against [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:	06/04/2014	Contact Method:	Face To Face
Contact Time:	09:00 AM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	06/29/2014
Completed date:	06/29/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	CPIT (Child Protective Investigative Team)		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 06/29/2014 01:15 PM Entered By: [REDACTED]

6/4/2014 CPIT

CPIT was concerned on this date and time and the majority agreed that [REDACTED] should be unsubstantiated for neglect death in regard to [REDACTED] death in January 2014. The autopsy report results were reported to be unable to be determined during the child death board meeting in May 2014. CPSI [REDACTED] does not have a copy of the report.



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: 05/28/2014

Contact Method:

Contact Time: 10:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/29/2014

Completed date: 06/29/2014

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: 06/29/2014 01:03 PM Entered By: [REDACTED]

5/28/2014 CPSI [REDACTED] received medical records from [REDACTED] n [REDACTED]
 The clinical impression is sudden death, cardiac arrest, and respiratory arrest (Aspiration). An autopsy was order by Dr. [REDACTED]
 [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:	05/23/2014	Contact Method:	
Contact Time:	03:00 PM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	06/29/2014
Completed date:	06/29/2014	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: 06/29/2014 01:05 PM Entered By: [REDACTED]

5/23/2014 CPSI [REDACTED] received records from [REDACTED] in [REDACTED] as they stated there is not record for the following patient.



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: 05/15/2014

Contact Method:

Contact Time: 05:30 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/29/2014

Completed date: 06/29/2014

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: 06/29/2014 01:07 PM Entered By: [REDACTED]

5/15/2014 5:30pm CPSI [REDACTED] requested medical records from [REDACTED] in [REDACTED] [REDACTED] in [REDACTED] and Dr. [REDACTED] office in [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: 05/15/2014 Contact Method: Face To Face
 Contact Time: 04:15 PM Contact Duration: Less than 02 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Other Caretaker Home Created Date: 06/29/2014
 Completed date: 06/29/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Alleged Perpetrator Interview,Collateral Contact
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/29/2014 12:55 PM Entered By: [REDACTED]

5/15/2014 4:15pm Home Visit to [REDACTED] TN [REDACTED] (Home of [REDACTED] however at the time of the incident in January 2014 it was the home of [REDACTED] and [REDACTED] and their children)

Home Visit/Face to Face

Child Protective Services Investigator ([REDACTED] (CPSI) made a home visit/face to face (home visit) to (purpose of visit: follow up with the family).

[REDACTED] and [REDACTED] were present during this visit.

CPSI [REDACTED] arrived at the home to be greeted at the front door of the home by [REDACTED] and she and [REDACTED] gave CPSI [REDACTED] permission to enter into the home. CPIS [REDACTED] introduced herself and asked to sit down to explain why DCS was involved. [REDACTED] reported that she had already spoken with [REDACTED] and did not know why it was no long after the childs death that DCS was involved. CPIS [REDACTED] was granted permission to sit on the couch in the living room next to [REDACTED] CPSI [REDACTED] explained that DCS has to be called to acquire most information. CPIS [REDACTED] explained that DCS was not notified until several days ago of the death of [REDACTED] stated that the police did not investigate because it was deemed an accident. CPIS [REDACTED] explained that she could not speak with law enforcement but had to do what was necessary to comply with DCS policy. [REDACTED] reported that she understood and would answer any question CPIS [REDACTED] asked of her. CPIS [REDACTED] explained that process of the investigation and what concerns the Department had. [REDACTED] asked CPSI [REDACTED] why she did not get the information and pictures from the police. CPSI [REDACTED] explained that she was told from law enforcement that there were no pictures.

CPSI also provided the family with a brochure describing the Multiple Response Approach. CPSI explained all forms and engaged the family during the paperwork process. The custodian signed the Clients Rights Handbook Signature Page, Health Insurance Portability and Accountability Act (HIPAA) Acknowledgement form, Notice of Equal Access to Programs and Services. CPSI obtained signed acknowledgements of such and copies have been placed into the file. [REDACTED] signed the paper work given to her)

CPIS [REDACTED] asked [REDACTED] what happened the day [REDACTED] passed away. [REDACTED] took a deep breathe and stated you want to know what happened that day? [REDACTED] reported that [REDACTED] dropped the child off at about 1030am and she stayed at the home for about 15-20 minutes because [REDACTED] had to be at work. [REDACTED] reported that she had prospered [REDACTED] up on the floor on a bobby pillow o watch TV because he loved Mickey



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Mouse club house. [REDACTED] reported that [REDACTED] was lying in the floor before [REDACTED] had left. [REDACTED] reported that as soon as [REDACTED] left [REDACTED] began to cry. [REDACTED] reported that he was not normal for [REDACTED] to cry for long period of time because he was a very good baby. [REDACTED] reported that she thought that [REDACTED] was hungry because [REDACTED] had reported that [REDACTED] had not eaten since 7pm that night. [REDACTED] reported that she picked the child up while [REDACTED] made a 6oz bottle of formula. [REDACTED] stated that she remembered that [REDACTED] did not want the bottle and continued to cry. [REDACTED] reported that she did not understand why he was crying. [REDACTED] stated that [REDACTED] did end up drinking 1oz of formula around 11am and burped a little. [REDACTED] stated that [REDACTED] did not want his passy either. [REDACTED] reported that she held him for a while and he fell asleep. [REDACTED] reported that she carried [REDACTED] back to the bedroom where he was put down in the crib on his side and propped up on his side with a very flat rolled up pillow. [REDACTED] stated that this was normal and she always propped him up because he had been congested and she feared that if he threw up he would choke on the vomit instead of spitting it out. [REDACTED] reported that she had just finished fixing her hair and was about to walk out the door when [REDACTED] laid [REDACTED] down for a nap. [REDACTED] stopped and began to cry. [REDACTED] reported that she did not get to [REDACTED] (Appropriately .4 mile from the home) when [REDACTED] called her and said [REDACTED] was not breathing. [REDACTED] reported that she told [REDACTED] to call 911 and when she returned home [REDACTED] was in the living room with [REDACTED] with 911 on speaker phone trying to administer CPR.

[REDACTED] reported that when [REDACTED] had left the home she was in the living room and about 10 to 15 minutes later she got up to check on [REDACTED] reported that she observed that [REDACTED] was not lying on his back and the bed sheets under the child's head were wet. [REDACTED] reported that she watched [REDACTED] chest for a moment to see if he was breathing and could not see his chest rise but heard him gargle. [REDACTED] reported that she had her phone in her hand and started to call [REDACTED] while she put her other hand on the child's chest to see if she could feel his chest raise. [REDACTED] reported that when [REDACTED] answered the phone she [REDACTED] picked [REDACTED] up and he appeared to be limp but felt warm. [REDACTED] reported that at this point she began to panic. [REDACTED] reported that all the children (her children and [REDACTED] children) were home because it was Christmas break for the schools in [REDACTED]. [REDACTED] reported that the boys were asking what was wrong and when [REDACTED] arrived the children were screaming. [REDACTED] reported that she is credited in CPR and First Aid so she took over applying CPR until the EMT arrived. [REDACTED] reported that when she began to apply CPR but when she picked [REDACTED] up to do chest compressions he stopped gargling. [REDACTED] reported that it was about 2 minutes from the time she arrived at the home that EMS arrived to the home. [REDACTED] reported that each time she did a chest compression water would come out of [REDACTED] mouth.

[REDACTED] reported that EMS took [REDACTED] to the ambulance and worked on him and got him back. [REDACTED] reported that [REDACTED] was still alive when they got to the hospital and Dr. [REDACTED] reported that he would do what he could. [REDACTED] reported that Dr. [REDACTED] reported that [REDACTED] had spit up and vomited. [REDACTED] reported that she was not on any type of medication when [REDACTED] passed away and had actually gone to the doctor just last month for back pain and was prescribed Lortab. [REDACTED] reported that she was not on any type of medication and was actually considered as placement for a family members children prior to the fathers of the children being granted custody. [REDACTED] reported that law enforcement came to her home after the incident took place and took pictures but they did not gather any evidence from the scene. [REDACTED] reported that [REDACTED] also came to their home after and they gave her [REDACTED] diaper bag, formula, and his last bottle and clothes. [REDACTED] reported that [REDACTED] and the child's father had a difficult relationship and they understood that they were both upset when their son passed away. [REDACTED] reported that she had been friends with [REDACTED] for some time and had always kept [REDACTED] for her. [REDACTED] reported that she did not have any concerns for the mother caring for the child and she and [REDACTED] had actually taken [REDACTED] to the doctor two weeks prior to his death because they assumed that he had a cold. [REDACTED] reported that the infant was not given any medication and the doctor reported that the child appeared to be doing well with no sign of a cold or congestion.

[REDACTED] reported that he had DCS involvement in the past with CPSI [REDACTED] as her case worker. The case was not against [REDACTED]. [REDACTED] reported that they have never been arrested.

The three bedroom home appeared to be very clean and well furnished. [REDACTED] reported that the room in which [REDACTED] was found was not set up the way it was in January when he passed away. [REDACTED] reported that she was expecting a baby and had arranged the room for her unborn child. [REDACTED] gave CPIS [REDACTED] permission to take pictures of the home which can be found in the hard copy file.

Plan: CPIS [REDACTED] will met with LI [REDACTED] to determine who to gather a copy of the autopsy report for the child.



Tennessee Department of Children's Services
Case Recording Summary

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



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: 05/15/2014

Contact Method: Correspondence

Contact Time: 02:46 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/29/2014

Completed date: 06/29/2014

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: 06/29/2014 11:57 AM Entered By: [REDACTED]

5/15/2014 2:46pm CPIS [REDACTED] complete the child death or near fatality form and emailed the form to LI [REDACTED] with the request to forward on to all parties that needed to be notified of the form and current open case involving a child death from January 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: 05/15/2014

Contact Method:

Contact Time: 02:30 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/11/2014

Completed date: 08/11/2014

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: 08/11/2014 03:45 PM Entered By: [REDACTED]

Child Death Notification form was distributed to the appropriate parties 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:	05/14/2014	Contact Method:	Face To Face
Contact Time:	03:30 PM	Contact Duration:	Less than 45
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	05/15/2014
Completed date:	05/15/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Parent/Caretaker Interview		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 05/15/2014 02:11 PM Entered By: [REDACTED]

Date: 5/14/2014

Location of Contact: DHS [REDACTED]

Time: 3:30pm

Type of Contact: Birth Father

Primary Person(s) to be interviewed: [REDACTED]

Documentation of the Contact:

Summary of interaction and discussion of purpose of visitation

CPSI [REDACTED] met with [REDACTED] privately in the small conference room of the DHS office to discuss the report that was received by DCS in regard to his son, [REDACTED]. In order to engage the family, CPSI explained the current report made to the Tennessee Department of Children's Services and the MRS/Assessment process. CPSI also provided the family with a brochure describing the Multiple Response Approach. CPSI explained all forms and engaged the family during the paperwork process. The custodian signed the Clients Rights Handbook Signature Page, Native American Heritage Veto Verification, Health Insurance Portability and Accountability Act (HIPAA) Acknowledgement form, Notice of Equal Access to Programs and Services. CPSI obtained signed acknowledgements of such and copies have been placed into the file.

[REDACTED] reported that [REDACTED] was the baby sitter of [REDACTED] when he passed away. [REDACTED] reported that he did not know a lot about [REDACTED] but he understood her to be odd. [REDACTED] reported that she cared for [REDACTED] for two months prior to him passing away. [REDACTED] reported that he was very up se the day his son passed away and became very upset with law enforcement and [REDACTED]. [REDACTED] reported that he later apologized to LE. [REDACTED] reported that he had asked [REDACTED] several times what had happened and she would state that she did not know. [REDACTED] reported that it was said that [REDACTED] was given a bottle and then laid down. [REDACTED] reported that he did not understand if he was laid down directly after taken a bottle because he was congested the day he passed away. [REDACTED] reported that [REDACTED] usually fell asleep while he was eating and would not completely finish his bottles.

[REDACTED] reported that prior to the death of his child he and [REDACTED] did not live together but he was present during [REDACTED] birth and did sign the birth certificated. [REDACTED] reported that [REDACTED] followed up with all appointment for [REDACTED] with his PCP, Dr. [REDACTED] of [REDACTED] and had also taken him to the doctor two weeks prior to his death for what she though with an ear infection. [REDACTED] reported that on New Years Day he and [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

[REDACTED] hung out at a friend house and then he did not see her for two to three days but did give her \$100 dollars and six things of milk. [REDACTED] reported that the day [REDACTED] passed away he was getting up for the day when [REDACTED] grandmother had called him and was screaming and crying that [REDACTED] was at the hospital and he was not breathing. [REDACTED] reported that he made it to the hospital before the EMT arrived. [REDACTED] reported that when he seen his son he was still alive and still had his color. [REDACTED] reported that Dr. [REDACTED] told him he would do everything he could. [REDACTED] reported that that his son later died. [REDACTED] reported that he asked [REDACTED] what happened and she could not answer his questions [REDACTED] reported that the most the police had said to him was that he was going to have to calm down and that they understood he was upset. [REDACTED] reported that she was very up-set because there was nothing he could do to bring his son back. Mr. [REDACTED] stated that he never wanted kids in the first place but he was so happy to have [REDACTED] in his life and did not believe it was fair that he was taken from him. [REDACTED] reported that LE was [REDACTED], [REDACTED] and [REDACTED]. [REDACTED] reported that [REDACTED] moved away three week ago because they just could not take one another anymore. [REDACTED] reported that [REDACTED] would sleep with [REDACTED] in the bed and the bassinet beside her bed at her mothers home. [REDACTED] reported that [REDACTED] had what he believed as a normal pregnancy but she did have a car accident at 37 weeks prior to delivery and was trapped in her car [REDACTED] reported that even after she gave birth to [REDACTED] she had a difficult time because she had been so banged up. [REDACTED] reported that he hoped that CPSI [REDACTED] would speak with [REDACTED] about the case and that he would be informed of any additional news about his son. CPSI [REDACTED] explained that she would contact him if anything came up. [REDACTED] asked if [REDACTED] would ever be charged. CPSI [REDACTED] explained that DCS could not arrest, charge, or prosecute people or cases and as to DCS knowledge the LE case been closed for some time. [REDACTED] reported that he understood. CPSI [REDACTED] discussed the autopsy report with [REDACTED] and CPSI [REDACTED] next steps in the investigation. [REDACTED] reported that he did not know of anyone that had a history of seizure disorders in his family but was aware that [REDACTED] use to have seizure when she was younger.

Observation: [REDACTED] appeared to be cooperative and upset that he did not know what happened to his son and the cause of death.

Plan: CPSI [REDACTED] will follow through with meeting with [REDACTED] and gathering more information on the situation.



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: 05/09/2014

Contact Method: Phone Call

Contact Time: 01:15 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 05/15/2014

Completed date: 05/15/2014

Completed By: [REDACTED]

Purpose(s): Permanency

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 05/15/2014 01:18 PM Entered By: [REDACTED]

5/9/2014 1:15pm TC [REDACTED] called CPSI [REDACTED]. [REDACTED] reported that she had gotten in touch everyone involved and let them know that CPSI [REDACTED] needed to speak with everyone. CPSI [REDACTED] explained that she had spoken with everyone and set up visits to discuss the situation. [REDACTED] reported that she did not know what the death certificate said and wanted to know. CPSI [REDACTED] explained what was discussed during the child fatality board in regard to the autopsy results. [REDACTED] reported that she did not know of anyone in her family other than a first cousin that had any type of seizure disorder.

[REDACTED] address:
[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:	05/09/2014	Contact Method:	Phone Call
Contact Time:	12:56 PM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	05/15/2014
Completed date:	05/15/2014	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Parent/Caretaker Interview		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 05/15/2014 01:10 PM Entered By: [REDACTED]

5/9/2014 12:56pm [REDACTED] called CPSI [REDACTED]. [REDACTED] reported that he had heard from his prior renter that CPSI [REDACTED] was looking for him and needed to speak with him about a report that had been made. CPSI [REDACTED] explained that the report involved his son that passed away in January 2014. [REDACTED] reported that he understood and wanted to know why DCS was just now involved with his sons death. CPSI [REDACTED] explained that DCS was never called when the incident took place. CPSI [REDACTED] explained that the Child Fatality Board received a copy of his sons death certificate and from that point more information was gathered and a case was opened. [REDACTED] stated Thank [REDACTED]. [REDACTED] reported that he had several questions that were never answered because he did not know what happened or why law enforcement never investigated the case. CPIS [REDACTED] explained that she could not speak for Law enforcement but explained that now that DCS had been made aware of the situation CPSI [REDACTED] would go back and go through the steps that should have been taken and request all necessary records.

An office visit was set with [REDACTED] for 5/14/2014 at 330pm at the DHS office in [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:	05/09/2014	Contact Method:	Phone Call
Contact Time:	09:30 AM	Contact Duration:	Less than 45
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	05/15/2014
Completed date:	05/15/2014	Completed By:	[REDACTED]
Purpose(s):	Well Being		
Contact Type(s):	Collateral Contact		
Contact Sub Type:			

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 05/15/2014 12:59 PM Entered By: [REDACTED]

5/9/2014 9:30am Child Facility Review Board:

Speaker: [REDACTED], MD, FAAP
Regional Pediatrician[REDACTED]
Tennessee Department of Health

[REDACTED] autopsy was reviewed at this time along with the few details of the case that CPS [REDACTED] had gathered from the mother prior to the conference call.

The Autopsy stated that the cause of death with (unable to be determined). The medical records from the hospital stated that the child was found unresponsive but gurgling. Dr. [REDACTED] reported that she found that this was a concerns because I child would either by unresponsive or gurgling because they could not be both. Dr. [REDACTED] reported that also if a child is gurgling they just dont fall over death. Dr. [REDACTED] reported that the child was said to be placed in a crib and propped on his side which would be consider as an unsafe sleep environment according to the AAP (American Associates of Pediatrics) and DOHA (Department of Health Authorities). Dr. [REDACTED] reported that the child was also said to be fed and was laid down in the crib and approximately 20 minutes later he was found. Dr. [REDACTED] reported that it was just reported to her that EMS suctioned 4oz of fluid out of the childs airway. Dr. [REDACTED] reported that she also found the 4 oz to be a concern also. Dr. [REDACTED] reported that but the most concerning part of the autopsy reported was the Brain analysis that note as possible gelastic. (A gelastic seizure, also known as "gelastic epilepsy" is a rare type of seizure that involves a sudden burst of energy, usually in the form of laughing or crying.[1] This syndrome usually occurs for no obvious reason and is uncontrollable. It is slightly more common in males than females. The term Gelastic originates from the Greek word "Gelos" which means laughter. This syndrome can go for very long periods of time without a diagnosis, as it may appear to be much like normal laughing or crying, if it occurs infrequently. It has been associated with several different conditions such as temporal and frontal lobe lesions, tumors, atrophy, tuberous sclerosis, hemangiomas, and post infectious foci, but mainly hypothalamic hamartomas.). Dr. [REDACTED] reported that there would be no way to actually determine if the child a seizure disorder now but she was concerns about the 4 oz of fluid being suctioned from the infants air way.

The board agreed to leave the case open for discussion once CPSI [REDACTED] gathers more information. Dr. [REDACTED] requested to know why DCS did not investigate the case when it first occurred. CPSI [REDACTED] explained that DCS was not



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

called. CPSI [REDACTED] that DCS has had issues with [REDACTED] failing to contact DCS one child death because they assume the incident are accident and feel that DCS should not be contacted.

Narrative Type: Addendum 1 Entry Date/Time: 05/15/2014 01:07 PM Entered By: [REDACTED]

Child Fatality Board call



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:	05/09/2014	Contact Method:	Phone Call
Contact Time:	08:45 AM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	05/15/2014
Completed date:	05/15/2014	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Alleged Perpetrator Interview, Collateral Contact		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 05/15/2014 10:39 AM Entered By: [REDACTED]

5/9/2014 TC 8:45am [REDACTED] called CPSI [REDACTED]. [REDACTED] reported that she had found the note on her door that CPSI [REDACTED] had left the prior day. [REDACTED] reported that she had spoken with [REDACTED] and she was informed that CPSI [REDACTED] had been looking for [REDACTED] as well. [REDACTED] reported that she understood why CPSI [REDACTED] was calling but did not understand why DCS had waited so long to speak with her and [REDACTED] about the situation with the passing of [REDACTED]. CPSI [REDACTED] explained that DCS was never called and did not have knowledge of the situation when it occurred. CPSI [REDACTED] explained that she was trying to get in touch with [REDACTED]. [REDACTED] reported that [REDACTED] lived in her home when the incident took place but had moved out of the home shortly after the incident occurred. [REDACTED] passed the phone to another lady that reported to be [REDACTED]. CPSI [REDACTED] that she needed to set up at time to speak with her about the report that was made. [REDACTED] reported that she works and would not know her schedule until Sunday. [REDACTED] reported that she would call CPSI [REDACTED] on Monday to report when would be a proper time to meet with her. It was agreed that CPSI [REDACTED] would meet with [REDACTED] at [REDACTED] home which was the site of the child's 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: 05/09/2014 Contact Method: Phone Call
 Contact Time: 08:15 AM Contact Duration: Less than 30
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 05/14/2014
 Completed date: 05/14/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Parent/Caretaker Interview
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 05/14/2014 06:16 PM Entered By: [REDACTED]

5/9/2014 8:15am TC [REDACTED] called CPSI [REDACTED] reported that she heard that CPSI [REDACTED] was looking for her [REDACTED] reported that she moved out of stated to [REDACTED] three week prior to CPSI [REDACTED] home visit. [REDACTED] requested to know why DCS was looking for her. CPSI [REDACTED] explained that a report had been made in regard to her child passing away in January [REDACTED] explained that she did not understand. CPSI [REDACTED] explained that DCS process and how DCS should have been called the day her son passed away to begin an investigated alongside of law enforcement. [REDACTED] reported that law enforcement never investigated the case. CPSI [REDACTED] explained that she understood. CPSI [REDACTED] explained that process of backtracking to complete their investigation to ensure protocol was followed and all measures were taken to prevent the death from occurring and from ever happening again. [REDACTED] reported that she understood.

CPSI [REDACTED] explained that she needed to know about the situation and details surrounding the childs death. [REDACTED] reported that she and the childs father did not live together and she worked at sonic drive-in in [REDACTED] [REDACTED] reported that [REDACTED] cared for her son while she worked from the time he was born until the day he passed away. [REDACTED] reported that she had to go in early to work the day [REDACTED] passed away. [REDACTED] reported that she usually gives [REDACTED] his first bottle of the morning prior to taking him to the baby sitters but the morning he was dropped off she stated that she did not give him his bottle because he did not want it. [REDACTED] reported that [REDACTED] had been congested and had not been eating as he should for several days. [REDACTED] reported that she had taken [REDACTED] to the doctor two weeks prior to him passing away with a suspected ear infection but the doctor reported that his ears were clear. [REDACTED] reported that she was at work that morning when [REDACTED] came to Sonic and told her that she needed to go to the hospital because something was wrong with [REDACTED] [REDACTED] reported that when she got to the hospital her son was deceased. [REDACTED] reported that she was told that [REDACTED] had given [REDACTED] an ounce of milk and then laid him down in the crib at her home on his side. [REDACTED] reported that [REDACTED] did state that [REDACTED] had been crying and fuzzy prior to being laid down. [REDACTED] reported that [REDACTED] stated that she laid [REDACTED] down and then gone into the living room of the home and about 15 minutes later she went to check on him and he was not responsive.

[REDACTED] reported that [REDACTED] was born at [REDACTED] in [REDACTED] at 7lb 7oz. [REDACTED] reported that she lived in Tennessee for four years prior to moving away. [REDACTED] reported that she and [REDACTED] have never lived together and he would visit with [REDACTED] at her mothers house [REDACTED]. [REDACTED] reporter that she did have issues when she was pregnant with [REDACTED] as she started bleeding at 19 weeks and at 37 weeks [REDACTED] reported that she totaled out her car on [REDACTED] and was trapped in



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

her car for two hours [REDACTED] reported that her OB, Dr. [REDACTED] of [REDACTED] prescribed her Loratab for pain due to the accident. [REDACTED] reported that neither she nor her son was positive for any drugs at birth or during labor. [REDACTED] reported that she gave birth at 39 weeks and there were no complications during labor or delivery. [REDACTED] reported that she followed up with all of her sons doctors appointment as recommended by the hospital and doctors office.

[REDACTED] reported that she believed that [REDACTED] still lived in [REDACTED] with family and she could try to get in touch with him to have him call CPSI [REDACTED]

CPSI [REDACTED] explained the extent of the innervation and CPSI [REDACTED] explained that she would call [REDACTED] back with further question once CPSI [REDACTED] spoke with more people. [REDACTED] reported that she understood and would be willing to speak with CPSI [REDACTED] any time.



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: 05/08/2014 Contact Method: Attempted Face To Face
 Contact Time: 02:40 PM Contact Duration: Less than 15
 Entered By: [REDACTED] Recorded For:
 Location: Other Caretaker Home Created Date: 05/08/2014
 Completed date: 05/08/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Alleged Perpetrator Interview
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 05/08/2014 05:36 PM Entered By: [REDACTED]

5/8/2014 2:40pm Home visit to [REDACTED] TN [REDACTED] home of [REDACTED] AP
 CPSI [REDACTED] arrived at the home to observe that no one appeared to be home because all lights were off and there were no cars in the drive way of the home however CSPI [REDACTED] knocked on the door several times with no response. CPSI [REDACTED] left a note and a request to call CSPI [REDACTED] upon arrival back to the home. CSPI [REDACTED] also knocked on the neighbors door several times and no one came to the door.



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: 05/08/2014 Contact Method: Attempted Face To Face
 Contact Time: 02:20 PM Contact Duration: Less than 30
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 05/08/2014
 Completed date: 05/08/2014 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: 05/08/2014 05:32 PM Entered By: [REDACTED]

5/8/2014 Home Visit to [REDACTED] to teh home of [REDACTED]
 CPSI [REDACTED] and CPSI [REDACTED] made a home visit on this date and time to speak with the family about the incident that took place with their son on 1/3/2014. There was no home with the numerical of [REDACTED] CPSI [REDACTED] visited another home on the same road that CPSI [REDACTED] knew to be the familys old home from several years ago. CPSI [REDACTED] observed that no one was home at the address of [REDACTED] but did observe a home nearby [REDACTED] to have their door and windows opened. CPSI [REDACTED] walked to the home and speaks with a gentleman about the possible whereabouts of [REDACTED] and [REDACTED]. The male reported that CPSI [REDACTED] was at the right home but the family moved out three weeks ago. The gentleman reported that when the family moved out he moved in. The male reported that he did not know where the family was living now, nor a phone number to reach the family. CPSI [REDACTED] gave the gentleman a card with the office number on it and told him if he saw or heard from [REDACTED] or [REDACTED] to have them contact CPSI [REDACTED] as soon as possible. The gentleman reported that he may not know where the family was but the people that live in [REDACTED] would know where they are.



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:	05/07/2014	Contact Method:	Face To Face
Contact Time:	09:00 AM	Contact Duration:	Less than 45
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	05/07/2014
Completed date:	05/07/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency,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: 05/07/2014 04:56 PM Entered By: [REDACTED]

5/7/2014 9:00am CPIT in [REDACTED]
 CPSI [REDACTED] did not present the [REDACTED] case to the CPIT team however CPSI [REDACTED] discussed with Chef [REDACTED] the details of his investigation with the child death of [REDACTED]. Chef [REDACTED] stated What do you mean the child died later at the hospital. That was it. CPSI [REDACTED] asked about the police report, statement of the people involved, pictures of the crime scene. Chef [REDACTED] stated I gave you what I had. There were no pictures or statement. The child choked on his spit up. There was nothing to investigate. CPSI [REDACTED] explained that all child deaths must be called into DCS with suspected child abuse or neglect. Chef [REDACTED] stated Why would we call you the child died at the hospital and it was believed that he choked on formula. The Chef reported that he did not speak to anyone and did not go to the home that the incident reportedly took place at. CPIS [REDACTED] explained that the child's death certificate stated on cause of death pending further studies. CPSI [REDACTED] explained that she will not have to be an investigation on the situation and would request the autopsy as well. Chef [REDACTED] reported that he did not know if an autopsy had been completed because the medical examiner lost the SUIDI form.

Chef [REDACTED] did not appear to be concerned about the open investigation and he did continue to state he did not understand why DCS had to know about something like that.



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:	Correspondence
Contact Time:	04:00 PM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	08/04/2014
Completed date:	08/04/2014	Completed By:	[REDACTED]
Purpose(s):	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: 08/04/2014 03:59 PM Entered By: [REDACTED]
 CPSI [REDACTED] faxed a copy of the report to [REDACTED] ADA [REDACTED] CAC in [REDACTED] and [REDACTED] Detectives Office.



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:
 Contact Time: 01:00 PM Contact Duration: Less than 45
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 05/07/2014
 Completed date: 05/07/2014 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: 05/07/2014 04:19 PM Entered By: [REDACTED]

Family Composition:

[REDACTED] DOE [REDACTED] DOD [REDACTED] ACV
 [REDACTED] birth mother
 [REDACTED] Birth father
 [REDACTED] DOE [REDACTED] caregiver, AP

Home address: [REDACTED] TN [REDACTED]

Incident Occurred: [REDACTED] TN [REDACTED]

P2 5/6/2014 Investigation, assigned to CM [REDACTED]

Reporter states:

[REDACTED] (7 months) lived with his mother, [REDACTED] and father [REDACTED]. It is unknown if there are other children in the home. It is unknown if the family still lives at this address.

The address listed under [REDACTED] is the location of [REDACTED] death.

DCS was notified of [REDACTED] death today, 5-6-2014. They received a death certificate that said the cause of death was pending further studies. In the police report, it is reported that [REDACTED] died on January 3rd, 2014. DCS was never notified about [REDACTED] death.

The report stated that [REDACTED] was fed by [REDACTED], his babysitter, prior to being placed in his crib. It was reported that [REDACTED] was placed on his left side, propped with a pillow. When [REDACTED] was found, he was lying on his back and he was blue. There appeared to be a white substance around his mouth. It appeared to be formula. It is believed that [REDACTED] spit up and aspirated formula. He was in the care of the babysitter, [REDACTED] when this occurred. [REDACTED] appeared to be congested prior to being laid down.

It is unknown if [REDACTED] had an autopsy completed. There is no information on parents statements regarding [REDACTED] death at this time.

DCS was never notified of this death. There has been no contact with the family at this point. The police chief, [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

[REDACTED] investigated this incident but did not report it to DCS.

It was reported that [REDACTED] is a housing authority. It is unknown if [REDACTED] still lives at the address listed.

It is reported that this information came from a death certificate and police report. There is no other information known at this time

History and Notations:

CPS Central Intake received this report on 5/6/2014 and assigned as P2 response.

The case was assigned to this CM [REDACTED] on 5/6/2014 with the response due on 5/8/2014

The Face to Face will be unable to be met due to DCS not being notified by law enforcement or [REDACTED] at the date of death for the child. DCS was notified as part of the (Child Death Review Board) as a death certificated was issued and sent to the team board members.

This CM verified the familys history of involvement with DCS through a search on this date the following history was noted: No history has parents for [REDACTED]

Referent notification was made by mail on this date. A copy of such notification is contained within the file.

Notification is made monthly to the Juvenile Court Judge (by DCS secretarial staff/or Supervisors) as requested per Juvenile Court Judge

CM did a search of the Tennessee Bureau Of Investigation sex offender registry

http://www.tbi.tn.gov/sex_ofender_reg/sex_ofender_reg.shtml as to [REDACTED] and no matches and no results were found

CM did a search of the Tennessee Bureau of Investigation Meth Offender Registry as to

<http://www.tennesseeanytime.org/methor/>) as to [REDACTED] and no matches and no results were found

CM did a Tennessee felony offender search for _(<https://www.tennesseeanytime.org/foil/search.jsp>) as to [REDACTED]

[REDACTED] and no matches and no results were found

National Sexual Offender Registry: <http://www.nsopr.gov/> as to [REDACTED] and no matches and no results were found

Tennessee Department of Health Vulnerable Person (abuse registry):

<http://health.state.tn.us/abuseregistry/index.html> as to [REDACTED] and no matches and no results were found

Background forms were completed and can be found in the hard copy 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:	05/06/2014	Contact Method:	Face To Face
Contact Time:	10:00 AM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	05/07/2014
Completed date:	05/07/2014	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: 05/07/2014 04:40 PM Entered By: [REDACTED]

5/6/2014 10:00am CPSI [REDACTED] was notified by LI [REDACTED] that a child death had occurred in [REDACTED] On January 3, 2014 and DCS was not notified by the hospital or law enforcement. LI [REDACTED] requested that CPSI [REDACTED] get a copy of everything that law enforcement has from the case and call in a report to the intake center.

CPSI [REDACTED] called [REDACTED] Police Department and requested all information involving the child death of [REDACTED] on 1/3/2014. [REDACTED] reported that he had worked the case and he would send DCs everything he had.

CPSI [REDACTED] received 8 pages of the SUIDI (Sudden unexpected infant death investigation) form.

CPSI [REDACTED] called a report into Central Office.



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:

Contact Time: 10:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/11/2014

Completed date: 08/11/2014

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: 08/11/2014 03:44 PM Entered By: [REDACTED]

Lead Investigator became aware of a child death that occurred in January. I consulted with Investigator [REDACTED] regarding this information and instructed her to investigate the death immediately.