



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

**Intake**

Intake ID: [REDACTED]  
Intake Taken By: [REDACTED] Intake Date/Time: 05/16/2014 02:14 AM CT  
Track Assigned: Investigation Priority Assigned: 1  
Screened By: [REDACTED]  
Date Screened: 05/16/2014

**Investigation**

Investigation ID: [REDACTED]  
First County/Region: [REDACTED]  
Date/Time Assigned : 05/16/2014 02:53 PM  
First Team Leader Assigned: [REDACTED] Date/Time 05/16/2014 12:00 AM  
First Case Manager [REDACTED] Date/Time 05/16/2014 12:00 AM

**Allegations**

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	2 Yrs 2 Mos	Neglect Death	Yes	Unknown Participant [REDACTED], Unknown	Other Non-relative

**Referent(s)**

Referent Name: [REDACTED] Role to Alleged Victim(s): [REDACTED]  
Referent Address:  
Referent Phone Number: [REDACTED]  
Type of Contact: I-3 Phone  
Notification: None  
Narrative: TFACTS:  
Family Case IDs: N/A  
Open Court Custody/FSS/FCIP: No  
Closed Court Custody: No  
Open CPS: No  
Substantiated: No  
Death: No



**Tennessee Department of Children's Services  
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Screened out: No

History (not listed above): None

DUPLICATE REFERRAL: No

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

Reporter's name/relationship: [REDACTED] [REDACTED]

Reporter states: [REDACTED] (1) lives in [REDACTED] with her mother and stepfather, [REDACTED]. [REDACTED] The police were called to the home and told that the child was unresponsive at 10:10pm on May 15, 2014. The child was transported by ambulance to [REDACTED] and pronounced dead. The reporter was told that [REDACTED] called the police. He was at home alone with the child. He said that [REDACTED] was sitting on an ottoman and fell off the ottoman and landed on one of her toys. He said the toy hit her in the chest. [REDACTED] said she started to cry and he consoled her. He said that he laid her down in bed an hour later and gave her a bottle. [REDACTED] said he went back to her room about fifteen minutes after that and she hadn't drunk very much of the bottle. He took the bottle and returned it to the refrigerator. He said he checked on her fifteen minutes later and [REDACTED] had thrown up in her bed. He picked her up and said she felt lifeless, she had no pulse and wasn't breathing. [REDACTED] said he began CPR on her. At that time, he called the police and continued CPR until EMS arrived at the home. When the police entered the child's room, [REDACTED] was on the floor with the child and was continuing CPR. There were small, approximately marble size bruises on the child's chest and abdomen from the nipple area to about her waistline. She was unresponsive, with no pulse and was not breathing the entire time the police were in the home. EMS arrived approximately thirty seconds after the police and they immediately grabbed her and took her to the ambulance. The child's mother, [REDACTED], was at work at the time of the incident. [REDACTED] may have called her at some point during the incident and [REDACTED] arrived at the home just as the ambulance was leaving the home. [REDACTED] is a [REDACTED] with the child. [REDACTED] is being interviewed by the police. [REDACTED] said that the child had some kind of condition that caused [REDACTED] to bruise easily, but that has not been confirmed. There are no other children in the home. There is no report of any problems with the condition of the home [REDACTED] did not appear to be under the influence at the time of the incident.

Special Needs or Disabilities: None reported

Child's current location/is the child safe at this time: at [REDACTED]

Perpetrator's location at this time: Unknown

Any other safety concerns for the child(ren) or worker who may respond: [REDACTED] has a firearm in his bedroom and there was a pocketknife in the kitchen. These items were not in the child's reach.

Per SDM: Investigative Track, P1, The child is deceased. // [REDACTED] CM3 //05/16/2014 @ 3:15AM

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

[REDACTED]

Recipients	Time Issued	Response Received	Devices	Responses
[REDACTED]	05-16-14 03:33:40 AM CDT	03:33:40 AM CDT	05-16-14 03:34:31 AM CDT	[REDACTED]
Received				
	05-16-14 03:33:40 AM CDT	---	[REDACTED]	Answering Machine
	05-16-14 03:33:41 AM CDT	---	[REDACTED]	
Email Sent				



**Tennessee Department of Children's Services  
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**Participant(s)**

**Name:** [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] Race: White Age: 22 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: Female

Date of Birth [REDACTED]

Partipant ID: [REDACTED]

SSN: Race: White Age: 23 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: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN:

Race: White

Age: 2 Yrs 2 Mos

Address: [REDACTED]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact: [REDACTED]

Contact Type: CELL

Contact Comments: Mother's cell

**External History Search Results:**

**DCS History Search Results:**

**DCS Intake Search Results:**



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

**Name:** Unknown Participant [redacted] Unknown

**Gender:** Male

**Date of Birth:**

**Participant ID:** [redacted]

**SSN:**

**Race:** Unable to

**Age:** 36 Yrs (Est)

**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**  
**Child Protective Service Investigation Summary**  
**and Classification Decision of Child Abuse/Neglect Referral**

**A. Investigation**

Case Name: [REDACTED]

Investigation ID: [REDACTED]

Referral Date: 05/16/2014

Assignment Date: 05/16/2014

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 Substantiated / Perpetrator Substantiated	Yes	[REDACTED] 05/20/2014
2	[REDACTED]	[REDACTED]	Neglect Death	[REDACTED]	[REDACTED]	Allegation Substantiated / Perpetrator Substantiated	Yes	[REDACTED] 06/05/2014

**C. Disposition Decision**

Disposition Decision: Assessed and Closed

Comments: Per a 05/16/2014 CPS intake, ID [REDACTED], the referral stated that [REDACTED] (1) lives in [REDACTED] with her mother and stepfather, [REDACTED]. The police were called to the home and told that the child was unresponsive at 10:10pm on May 15, 2014. The child was transported by ambulance to [REDACTED] and pronounced dead." Based on: (a) the interview with [REDACTED] and his confession; and b) the medical findings completed at the autopsy (internal hemorrhaging on organs; and c) the inconsistency of the initial report and final statement which coincides with the injuries. According to Policy 14.7, e.g. the allegation occurred, and the alleged perpetrator, [REDACTED], classified in the report was found to be responsible for the child's condition is being indicated (ASPS) for Neglect Death of a Child.

**D. Case Workers**

Case Worker: [REDACTED]

Date: 06/05/2014

Team Leader: [REDACTED]

Date: 06/06/2014

**E. Investigation Summary**

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

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

The child is deceased.



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

Case Name : ██████████

Investigation ID: ██████████

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

██████████ received the autopsy report from the ██████████

██████████ received the 10 page report outlining all exams completed. The report outlines the autopsy, histologic examination report and the certificate of analysis.

The autopsy reports pathologic diagnosis stated:

1. Blunt force injuries to head:

a) Contusions of the head and face

b) Subgaleal hematomas

c) Healing laceration of gingival surface of lower lip.

2. Blunt force injuries to torso:

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

The AP stated that ██████████ was taken to the babysitter by ██████████ (friend of family) at approx.. 4.15 pm on 5/15/14. The mother ██████████ reported to work at approx. 5 pm that evening. The child was left with ██████████ (last name unknown at this time) the babysitter. The step-father ██████████ picked up ██████████ from the babysitter at approx. 5 pm and took her to the home. At approx. 8.30 pm ██████████ was placed on the Ottoman in the livingroom and was given ██████████ cellphone. The child had been fuzzing due to her teething and ██████████ gave her the phone to calm her down. ██████████ threw the phone on the ground according to the AP and when he went to get the phone she leaned over the side of the Ottoman and fell on top of some toys that were located on the side of the Ottoman. (Detective noted that the toys were neatly stacked on the side of the Ottoman when LE arrived at the scene). ██████████ snatched ██████████ up by one leg and as he was pulling her up in the air to lift her off the ground she hit her head against the wooden floor. He confessed to the Detective that he squeezed the child (fingers on the center of the back and thumbs on front of the child's body) due to him becoming frustrated with ██████████. He also confessed to hitting ██████████ in the abdomen twice with an open hand and placing her back on the Ottoman. A text message was located in the cellphone of ██████████ to his wife ██████████ stating "I hit her" and ██████████ responded "Calm down". LE has cellphone and records of all messages and phone calls made.

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

No witnesses were present

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

None at this time.

Distribution Copies:



**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]

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:	07/21/2015	Contact Method:	
Contact Time:	04:51 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	07/21/2015
Completed date:	07/21/2015	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: 07/21/2015 04:54 PM      Entered By: [REDACTED]

P1 referral was assigned by [REDACTED] to CPSI [REDACTED] on 5/16/2014 with allegations of neglect death (NGD). The alleged perpetrator (AP) was [REDACTED]; step-father and the alleged child victim (ACV) was [REDACTED], age 1.

The family has no previous history with the Department of Children Service's.

5/16/14 CPSI [REDACTED] spoke with [REDACTED] at 530 am on 5/16/14. [REDACTED] had just returned from booking [REDACTED] the step-father (AP) of [REDACTED] (ACV) 1 year old victim. [REDACTED] stated that there were no other children in the home and that both parents did not have any other children. [REDACTED] (mother) and [REDACTED] had been dating since December 2013 and got married in February 2014. [REDACTED] is currently serving in the [REDACTED] on [REDACTED] works at the [REDACTED] in [REDACTED]. The family resides at [REDACTED]. The AP stated that [REDACTED] was taken to the babysitter by [REDACTED] (friend of family) at approx.. 4.15 pm on 5/15/14. The mother [REDACTED] reported to work at approx. 5 pm that evening. The child was left with [REDACTED] (last name unknown at this time) the babysitter. The step-father [REDACTED] picked up [REDACTED] from the babysitter at approx. 5 pm and took her to the home. At approx. 8.30 pm [REDACTED] was placed on the Ottoman in the livingroom and was given [REDACTED] cellphone. The child had been fuzzing due to her teething and [REDACTED] gave her the phone to calm her down. [REDACTED] threw the phone on the ground according to the AP and when he went to get the phone she leaned over the side of the Ottoman and fell on top of some toys that were located on the side of the Ottoman. (Detective noted that the toys were neatly stacked on the side of the Ottoman when LE arrived at the scene). [REDACTED] snatched [REDACTED] up by one leg and as he was pulling her up in the air to lift her off the ground she hit her head against the wooden floor. He confessed to the Detective that he squeezed the child (fingers on the center of the back and thumbs on front of the child's body) due to him becoming frustrated with [REDACTED]. He also confessed to hitting [REDACTED] in the abdomen twice with an open hand and placing her back on the Ottoman. A text message was located in the cellphone of [REDACTED] to his wife [REDACTED] stating "I hit her" and [REDACTED] responded "Calm down". LE has cellphone and records of all messages and phone calls made.

Between 8.30 pm and 10.30 pm (when [REDACTED] called 911) the child was taken to the bedroom, placed into the bed and given a bottle. [REDACTED] stated that he returned to the room when [REDACTED] continued to be fuzzy and lifted her out the bed after noticing that she had difficulties breathing. When the child was lifted out the bed she felt limp and head



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Case Id: ██████████

Case Name: ██████████

Case Status: Close

Organization: ██████████

fell back. ██████████ placed ██████████ on the ground next to the bed and she vomited up mucus. ██████████ picked up the child and attempted to do a Heimlich maneuver as he took her to the bathroom sink to help her clear her throat. No vomit was found in the sink. Vomit was noticed on the floor next to the bed and on the pillow of the child. ██████████ called the mother first and then called 911. He was witnessed performing CPR on the child when LE arrived at the scene.

██████████ provided CPSI ██████████ with a copy of the photographs with visible bruising on ██████████ on the torso and abdomen area as well as the bruising on the center of the spine. ██████████ also had a large cut in the inside of her mouth. ██████████ was taken to ██████████ for this injury prior to this incident (date unknown). ██████████ also had bruising on her forehead close to her hairline area which mom knew about and stated that these bruises came from ██████████ running into things. No bruises were noted on the legs of the ACV. An autopsy will be conducted.

██████████ stated that the AP was cooperative and devastated during the interview process. ██████████ came to the police station after leaving the hospital (██████████) to speak with her husband ██████████. The two were witnessed speaking calmly with one another and ██████████ expressed being sorry and stating "please don't leave me, I love you". ██████████ responded with "we need to pray" and never accusing him of causing any harm to her child. The Detective stated that ██████████ knew that ██████████ caused the injuries which ultimately could have led to the child's death but never accused him of anything during the time she spoke with him. ██████████ did overhear the parents of ██████████ saying that she needed to change her last name.

CPSI ██████████ inquired if the Detective knew who the biological father of ██████████ is and ██████████ stated that he only knew that the father was in prison and was abusive to the mother in the past. CPSI ██████████ inquired if there were any calls to LE in the past from this family / residence; ██████████ stated that he did not know and he had not looked into that at this time. CPSI ██████████ inquired if the child had any illnesses or cold; ██████████ stated that ██████████ reported that she had problems with her sinuses but no cold and that she did not have any illness causing bruising. CPSI ██████████ asked ██████████ if dad was asked if the child was shaken at any point in time; ██████████ stated that he did ask ██████████ but he stated that he did not shake ██████████. CPSI ██████████ obtained the contact information for both ██████████ and concluded her interview with ██████████ at 7.30 am. CPSI ██████████ staffed the case with ██████████.

██████████ was pronounced dead on 05/15/2014 at 10:56pm at ██████████

The following parties were involved during the course of this investigation:

CPSI ██████████; Child Protective Service's Investigator; ██████████; Child Protective Service's Lead Investigator; ██████████.

The alleged perpetrator named in the referral was ██████████, step-father of ██████████ (ACV).

The alleged perpetrator interview was conducted by ██████████. CPSI ██████████ was not present for the interview and did not arrive at the police station until after ██████████ had already been taken to the ██████████ jail for booking.

██████████ conducted the interview with the AP ██████████ provided the Detective with a timeline of events which is outlined in Section 2 of this report. CPSI ██████████ was never provided with the written statement or a copy of the video from the AP interview.

CPSI ██████████ contacted ██████████ on 5/16/2014 at 1155 am to inquire about services that the Department may be able to put in place to assist the family and arrange for a possible interview with the mother of ██████████. ██████████ stated that she cannot talk to DCS right now and gave the telephone to her mother ██████████. ██████████ stated that the family is not able to come to DCS or meet with the CPS Investigator at this time and they have left ██████████ to go to ██████████ to take ██████████ to her sister. CPSI ██████████ asked the mother if there is anything that the Department can do for ██████████ at this time to assist her. ██████████ stated that ██████████ attempted to get medicine to help her sleep from ██████████ on 5/15/14 but the staff at the medical center directed her to the primary care physician and refused to provide the mother with anything to assist with sleep or anxiety. CPSI ██████████ inquired about the insurance and ██████████ is insured under ██████████. CPSI ██████████ assure the mother that ██████████ would be able to see ██████████ and she would not have to try and schedule an appointment with her primary care physician to get short term assistance in the mean time until she is capable of



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Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

coming back to [REDACTED] to see her physician [REDACTED] thanked the Investigator and CPSI [REDACTED] provided the grandmother with the contact information for the investigator [REDACTED] stated they would need a couple of days before attempting to speak with the investigator.

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

1. Any unexplained death of a child when the cause of death is unknown or pending an autopsy report.
2. Any child death caused by abuse resulting from direct action of the child's caretaker or the consequence of the child's caretaker's failure to stop another person's direct action that resulted in the death of a child. Child deaths are always treated as severe child abuse.
3. Any child death that is the result of the caretaker's failure to meet childcare responsibilities. Neglect death is always treated as severe child abuse.

The case was presented to the [REDACTED] Child Protective Investigation Team on 6/11/2014. Team members were in agreement that there was sufficient evidence to substantiate the allegation of Child Neglect Death.

There is preponderance of evidence to substantiate the allegation of Child Neglect Death.

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

Upon consultation with out CPIT partners we are moving the case to closure at this time.

Juvenile Court and the District Attorney are notified of the referrals and classification per local protocol and policy.

**Household Composition:**

[REDACTED] (Mother)  
 [REDACTED] (Alleged Perp; Step-Father)  
 [REDACTED] (ACV)



**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: 07/21/2015

Contact Method:

Contact Time: 04:48 PM

Contact Duration:

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/21/2015

Completed date: 07/21/2015

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: 07/21/2015 04:50 PM      Entered By: [REDACTED]

Consultation

Upon consultation with out CPIT partners we are moving the case to 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: 06/11/2015

Contact Method:

Contact Time: 08:00 AM

Contact Duration:

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 06/11/2015

Completed date: 06/11/2015

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 06/11/2015 09:14 AM

Entered By: [REDACTED]

Investigation remains open at this time pending completion of all investigative tasks.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 05/22/2015

Contact Method:

Contact Time: 08:00 AM

Contact Duration:

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 06/11/2015

Completed date: 06/11/2015

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 06/11/2015 09:13 AM      Entered By: [REDACTED]

Investigation remains open at this time pending completion of all investigative tasks.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	04/22/2015	Contact Method:	
Contact Time:	03:30 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	04/22/2015
Completed date:	04/22/2015	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Notation		
Contact Sub Type:			

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

Narrative Type: Original    Entry Date/Time: 04/22/2015 03:31 PM    Entered By: [REDACTED]

Case has been submitted for closure and no new information has been obtained at this time. This entry serves as the monthly entry.

Narrative Type: Addendum 1    Entry Date/Time: 04/22/2015 03:31 PM    Entered By: [REDACTED]

Investigation remains open at this time pending completion of all investigative tasks.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 03/26/2015

Contact Method:

Contact Time: 03:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/26/2015

Completed date: 03/26/2015

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 03/26/2015 03:12 PM      Entered By: [REDACTED]

LI [REDACTED] contacted [REDACTED] to explain why she was requesting to interview [REDACTED] and what agency was requesting the interview at this time. [REDACTED] declined authorization to interview [REDACTED] at this time due to the pending legal actions against his client. The contact number for [REDACTED] is [REDACTED] [REDACTED] thanked LI [REDACTED] for her call and stated if further assistance is required to please contact 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: 03/25/2015

Contact Method:

Contact Time: 09:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 03/26/2015

Completed date: 03/26/2015

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 03/26/2015 01:52 PM      Entered By: [REDACTED]

LI [REDACTED] received correspondence via voicemail and email from [REDACTED] [REDACTED] stating that no permission is granted to conduct an interview with [REDACTED] 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: 03/24/2015

Contact Method: Phone Call

Contact Time: 03:30 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/25/2015

Completed date: 03/25/2015

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 03/25/2015 12:08 PM      Entered By: [REDACTED]

LI [REDACTED] contacted the Law Office of [REDACTED] in [REDACTED] (Attorney for [REDACTED]; AP) to obtain authorization to interview [REDACTED] was with a client and could not speak with the LI but LI [REDACTED] provided the secretary with contact information and requested a call back.



**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: 03/12/2015

Contact Method:

Contact Time: 03:30 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/12/2015

Completed date: 03/12/2015

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/12/2015 03:38 PM Entered By: [REDACTED]

[REDACTED] emailed LI [REDACTED] concerning an interview that was requested with the mother, [REDACTED]. [REDACTED] stated that [REDACTED] is not willing to conduct an interview with DCS and does not wish for her contact information to be released to the Department. At this time LI [REDACTED] does not have an address or telephone number for [REDACTED].

[REDACTED] also stated that if an interview is requested with [REDACTED], contact would have to be made with [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: 03/02/2015

Contact Method:

Contact Time: 08:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/02/2015

Completed date: 03/02/2015

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 03/02/2015 09:40 AM

Entered By: [REDACTED]

Investigation remains open at this time pending completion of all investigative tasks.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/18/2015

Contact Method:

Contact Time: 03:08 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 02/18/2015

Completed date: 02/18/2015

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/18/2015 03:10 PM Entered By: [REDACTED]

Case has been submitted for closure and no new information has been obtained at this time. This entry serves as the monthly entry.

Narrative Type: Addendum 1 Entry Date/Time: 02/19/2015 10:52 AM Entered By: [REDACTED]

[REDACTED] is still incarcerated at [REDACTED] jail and is still awaiting his grand jury trial.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 01/16/2015

Contact Method:

Contact Time: 11:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 01/16/2015

Completed date: 01/16/2015

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 01/16/2015 11:11 AM      Entered By: [REDACTED]

[REDACTED] provided LI [REDACTED] with a letter from the District Attorney Office stating that no investigative documentation will be provided from the ADA, [REDACTED] Police Department or [REDACTED] Sheriff's Office as it pertains to a child death investigation due to the Department of Children's Services placing the case files online for public access. The letter will be placed in the case file.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 01/07/2015

Contact Method:

Contact Time: 01:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 01/07/2015

Completed date: 01/07/2015

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 01/07/2015 02:18 PM      Entered By: [REDACTED]

LI [REDACTED] spoke with [REDACTED] concerning the medical records, interview notes for the mother and the interviews of the babysitter as well as the AP, [REDACTED] stated that she could not provide the investigator with the requested information at this time due to the pending criminal charges on [REDACTED] but she would provide the Department with a letter concerning the missing documents.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/08/2014

Contact Method:

Contact Time: 08:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/02/2015

Completed date: 03/02/2015

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/02/2015 09:41 AM

Entered By: [REDACTED]

Investigation remains open at this time pending completion of all investigative tasks.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 11/08/2014

Contact Method:

Contact Time: 08:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/02/2015

Completed date: 03/02/2015

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/02/2015 09:40 AM

Entered By: [REDACTED]

Investigation remains open at this time pending completion of all investigative tasks.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID:	[REDACTED]	Status:	System Completed
Contact Date:	10/17/2014	Contact Method:	
Contact Time:	02:40 PM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	10/17/2014
Completed date:	11/17/2014	Completed By:	System Completed
Purpose(s):			
Contact Type(s):	Case Summary		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 10/17/2014 02:40 PM Entered By: [REDACTED]

P1 referral was assigned by LI [REDACTED] to CPSI [REDACTED] on 5/16/2014 with allegations of neglect death (NGD). The alleged perpetrator (AP) was [REDACTED]; step-father and the alleged child victim (ACV) was [REDACTED], age 1.

The family has no previous history with the Department of Children Service's.

5/16/14 CPSI [REDACTED] spoke with [REDACTED] at 530 am on 5/16/14. [REDACTED] had just returned from booking [REDACTED] the step-father (AP) of [REDACTED] (ACV) 1 year old victim. [REDACTED] stated that there were no other children in the home and that both parents did not have any other children. [REDACTED] (mother) and [REDACTED] had been dating since December 2013 and got married in February 2014. [REDACTED] is currently serving in the [REDACTED] works at the [REDACTED] in [REDACTED]. The family resides at [REDACTED]. The AP stated that [REDACTED] was taken to the babysitter by [REDACTED] (friend of family) at approx.. 4.15 pm on 5/15/14. The mother [REDACTED] reported to work at approx. 5 pm that evening. The child was left with [REDACTED] (last name unknown at this time) the babysitter. The step-father [REDACTED] picked up [REDACTED] from the babysitter at approx. 5 pm and took her to the home. At approx. 8.30 pm [REDACTED] was placed on the Ottoman in the livingroom and was given [REDACTED] cellphone. The child had been fuzzing due to her teething and [REDACTED] gave her the phone to calm her down. [REDACTED] threw the phone on the ground according to the AP and when he went to get the phone she leaned over the side of the Ottoman and fell on top of some toys that were located on the side of the Ottoman. (Detective noted that the toys were neatly stacked on the side of the Ottoman when LE arrived at the scene). [REDACTED] snatched [REDACTED] up by one leg and as he was pulling her up in the air to lift her off the ground she hit her head against the wooden floor. He confessed to the Detective that he squeezed the child (fingers on the center of the back and thumbs on front of the child's body) due to him becoming frustrated with [REDACTED]. He also confessed to hitting [REDACTED] in the abdomen twice with an open hand and placing her back on the Ottoman. A text message was located in the cellphone of [REDACTED] to his wife [REDACTED] stating "I hit her" and [REDACTED] responded "Calm down". LE has cellphone and records of all messages and phone calls made.

Between 8.30 pm and 10.30 pm (when [REDACTED] called 911) the child was taken to the bedroom, placed into the bed and given a bottle. [REDACTED] stated that he returned to the room when [REDACTED] continued to be fuzzy and lifted her out



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

the bed after noticing that she had difficulties breathing. When the child was lifted out the bed she felt limp and head fell back. [REDACTED] placed [REDACTED] on the ground next to the bed and she vomited up mucus. [REDACTED] picked up the child and attempted to do a Heimlich maneuver as he took her to the bathroom sink to help her clear her throat. No vomit was found in the sink. Vomit was noticed on the floor next to the bed and on the pillow of the child. [REDACTED] called the mother first and then called 911. He was witnessed performing CPR on the child when LE arrived at the scene.

[REDACTED] provided CPSI [REDACTED] with a copy of the photographs with visible bruising on [REDACTED] on the torso and abdomen area as well as the bruising on the center of the spine [REDACTED] also had a large cut in the inside of her mouth. [REDACTED] was taken to [REDACTED] for this injury prior to this incident (date unknown). [REDACTED] also had bruising on her forehead close to her hairline area which mom knew about and stated that these bruises came from [REDACTED] running into things. No bruises were noted on the legs of the ACV. An autopsy will be conducted.

[REDACTED] stated that the AP was cooperative and devastated during the interview process. [REDACTED] came to the police station after leaving the hospital ([REDACTED]) to speak with her husband [REDACTED]. The two were witnessed speaking calmly with one another and [REDACTED] expressed being sorry and stating "please don't leave me, I love you". [REDACTED] responded with "we need to pray" and never accusing him of causing any harm to her child. The Detective stated that [REDACTED] knew that [REDACTED] caused the injuries which ultimately could have led to the child's death but never accused him of anything during the time she spoke with him. [REDACTED] did overhear the parents of [REDACTED] saying that she needed to change her last name.

CPSI [REDACTED] inquired if the Detective knew who the biological father of [REDACTED] is and [REDACTED] stated that he only knew that the father was in prison and was abusive to the mother in the past. CPSI [REDACTED] inquired if there were any calls to LE in the past from this family / residence; [REDACTED] stated that he did not know and he had not looked into that at this time. CPSI [REDACTED] inquired if the child had any illnesses or cold; [REDACTED] stated that [REDACTED] reported that she had problems with her sinuses but no cold and that she did not have any illness causing bruising. CPSI [REDACTED] asked [REDACTED] if dad was asked if the child was shaken at any point in time; [REDACTED] stated that he did ask [REDACTED] but he stated that he did not shake [REDACTED]. CPSI [REDACTED] obtained the contact information for both [REDACTED] and concluded her interview with [REDACTED] at 7.30 am. CPSI [REDACTED] staffed the case with LI [REDACTED].

[REDACTED] was pronounced dead on 05/15/2014 at 10:56pm at [REDACTED]

The following parties were involved during the course of this investigation:

CPSI [REDACTED] Child Protective Service's Investigator; LI [REDACTED] Child Protective Service's Lead Investigator;

The alleged perpetrator named in the referral was [REDACTED], step-father of [REDACTED] (ACV).

The alleged perpetrator interview was conducted by [REDACTED]. CPSI [REDACTED] was not present for the interview and did not arrive at the police station until after [REDACTED] had already been taken to the [REDACTED] jail for booking.

[REDACTED] conducted the interview with the AP [REDACTED] provided the Detective with a timeline of events which is outlined in Section 2 of this report. CPSI [REDACTED] was never provided with the written statement or a copy of the video from the AP interview.

CPSI [REDACTED] contacted [REDACTED] on 5/16/2014 at 1155 am to inquire about services that the Department may be able to put in place to assist the family and arrange for a possible interview with the mother of [REDACTED] stated that she cannot talk to DCS right now and gave the telephone to her mother [REDACTED] stated that the family is not able to come to DCS or meet with the CPS Investigator at this time and they have left [REDACTED] to go to [REDACTED] to take [REDACTED] to her sister. CPSI [REDACTED] asked the mother if there is anything that the Department can do for [REDACTED] at this time to assist her. [REDACTED] stated that [REDACTED] attempted to get medicine to help her sleep from [REDACTED] on 5/15/14 but the staff at the medical center directed her to the primary care physician and refused to provide the mother with anything to assist with sleep or anxiety. CPSI [REDACTED] inquired about the insurance and [REDACTED] is insured under [REDACTED]. CPSI [REDACTED] assure the mother that [REDACTED] would be able to see [REDACTED] and she would not have to try and schedule an



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

appointment with her primary care physician to get short term assistance in the mean time until she is capable of coming back to [REDACTED] to see her physician. [REDACTED] thanked the Investigator and CPSI [REDACTED] provided the grandmother with the contact information for the investigator. [REDACTED] stated they would need a couple of days before attempting to speak with the investigator.

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

1. Any unexplained death of a child when the cause of death is unknown or pending an autopsy report.
2. Any child death caused by abuse resulting from direct action of the child's caretaker or the consequence of the child's caretaker's failure to stop another person's direct action that resulted in the death of a child. Child deaths are always treated as severe child abuse.
3. Any child death that is the result of the caretaker's failure to meet childcare responsibilities. Neglect death is always treated as severe child abuse.

The case was presented to the [REDACTED] Child Protective Investigation Team on 6/11/2014. Team members were in agreement that there was sufficient evidence to substantiate the allegation of Child Neglect Death.

There is preponderance of evidence to substantiate the allegation of Child Neglect Death.

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

Narrative Type: Addendum 3 Entry Date/Time: 03/09/2015 11:54 AM Entered By: [REDACTED]

Juvenile Court and the District Attorney are notified of the referrals and classification per local protocol and policy.

Narrative Type: Addendum 2 Entry Date/Time: 01/05/2015 02:34 PM Entered By: [REDACTED]

Correction to the classification:

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

Narrative Type: Addendum 1 Entry Date/Time: 12/01/2014 12:18 PM Entered By: [REDACTED]

Household Composition:

[REDACTED] (Mother)  
 [REDACTED] (Alleged Perp; Step-Father)  
 [REDACTED] (ACV)



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	10/17/2014	Contact Method:	
Contact Time:	11:00 AM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	10/17/2014
Completed date:	10/17/2014	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Notation		
Contact Sub Type:			

**Children Concerning****Participant(s)**

[REDACTED]

**Narrative Details**

Narrative Type: Original      Entry Date/Time: 10/17/2014 01:47 PM      Entered By: [REDACTED]

LI [REDACTED] received the autopsy report from the Office of the Medical Examiner, [REDACTED]. LI [REDACTED] received the 10 page report outlining all exams completed. The report outlines the autopsy, histologic examination report and the certificate of analysis.

The autopsy reports pathologic diagnosis stated:

1. Blunt force injuries to head:
  - a) Contusions of the head and face
  - b) Subgaleal hematomas
  - c) Healing laceration of gingival surface of lower lip.
2. Blunt force injuries to torso:
  - a) Contusions of chest, abdomen, and back.
  - b) Injuries of lungs, pancreas, liver, intestine, stomach, and diaphragm.
  - c) Intercostal muscle hemorrhages, bilateral.
  - d) Hemoperitoneum (approximately 10 mL).
3. Blunt force injuries to the extremities"
  - a) Contusions of the right leg
4. Anthropometric parameters and organ weights appropriate for age.
5. No congenital anomalies.

Cause of Death: Multiple blunt force injuries

Manner of Death: Homicide

Circumstances of Death: Assaulted by other(s)

Autopsy report will be placed in 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: 09/02/2014

Contact Method:

Contact Time: 08:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/02/2015

Completed date: 03/02/2015

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 03/02/2015 09:42 AM

Entered By: [REDACTED]

Investigation remains open at this time pending completion of all investigative tasks.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/01/2014

Contact Method: Correspondence

Contact Time: 09:15 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 08/01/2014

Completed date: 08/01/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Collateral Contact, Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 08/01/2014 11:08 AM      Entered By: [REDACTED]

LI [REDACTED] received a follow up email from [REDACTED]. Email stated that no medical records have been obtained and she does have the crime scene photos, however she is not able to present them to the LI at this time due to the pending criminal charges. [REDACTED] case will be going to the August Grand Jury on felony murder.



**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: 07/31/2014

Contact Method:

Contact Time: 10:12 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 07/31/2014

Completed date: 07/31/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

**Children Concerning****Participant(s)**

[REDACTED]

**Narrative Details**

Narrative Type: Original      Entry Date/Time: 07/31/2014 10:25 AM      Entered By: [REDACTED]

LI [REDACTED] contacted [REDACTED] via email to inquire concerning the autopsy report.

LI [REDACTED] also contacted [REDACTED] to obtain information about the criminal court hearing, photos of the crime scene and medical reports for this case.



**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: 06/26/2014

Contact Method: Phone Call

Contact Time: 09:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 06/26/2014

Completed date: 06/26/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Collateral Contact, Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/26/2014 01:45 PM Entered By: [REDACTED]

[REDACTED], from [REDACTED] contacted the CPSI to confirm the process of a file review for [REDACTED] and informed the CPSI that the cover letter (Letter A) had the correct address but the letter did not have the correct name in the title for [REDACTED]. CPSI [REDACTED] informed the Defense Attorney that she would type a new letter with today's date and fax it to their office immediately. The fax was sent to [REDACTED].

The address for the Defense Attorney is:

[REDACTED]  
[REDACTED]  
[REDACTED]

[REDACTED] also reported to the investigator that another Attorney within the State of TN was working with [REDACTED] and would probably be making contact with the investigator as well. The Attorney inquired how DCS was notified about this case and why there was DCS involvement and CPSI [REDACTED] stated that it is procedure for Law Enforcement to make contact with DCS when there is a Child Death or Near Death if Child Abuse or Neglect is suspected or could not be ruled out. The Attorney inquired about the proper ways to make a report in the State of TN and how to call in a referral. She stated this was unrelated to this case. CPSI [REDACTED] provided the Attorney with the Child Abuse Hotline telephone number.



**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: 06/12/2014

Contact Method:

Contact Time: 01:45 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 06/12/2014

Completed date: 06/12/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/12/2014 02:45 PM Entered By: [REDACTED]

CPSI requested a copy of the autopsy from [REDACTED] on this date.

Narrative Type: Addendum 1 Entry Date/Time: 01/05/2015 02:41 PM Entered By: [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: 06/12/2014

Contact Method: Phone Call

Contact Time: 01:07 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 06/12/2014

Completed date: 06/12/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 06/12/2014 01:35 PM      Entered By: [REDACTED]

CPSI [REDACTED] received a call from [REDACTED], Clinical Supervisor for [REDACTED] stated that she has not been able to reach [REDACTED] and she has left several messages for her. [REDACTED] stated that [REDACTED] has been seen by the PCP on [REDACTED] and a consult for grief counseling through the [REDACTED] has been put into the system. Information for a grief group was also provided to [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: 06/11/2014

Contact Method: Face To Face

Contact Time: 08:00 AM

Contact Duration: Less than 04 Hour

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 06/11/2014

Completed date: 06/11/2014

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: 06/11/2014 03:54 PM      Entered By: [REDACTED]

CPIT was convened on this date and the case was classified as ASPS due to the disclosure to LE by [REDACTED]. Autopsy has not yet been received and was not taken into consideration 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: 06/11/2014

Contact Method: Face To Face

Contact Time: 08:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 06/11/2014

Completed date: 06/11/2014

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: 06/11/2014 03:57 PM      Entered By: [REDACTED]

CPSI [REDACTED] spoke with [REDACTED] concerning the [REDACTED] criminal court and [REDACTED] informed the investigator that the Preliminary court hearing for [REDACTED] was held and his charges to the Grand Jury are Felony Murder. CPSI [REDACTED] requested medical records and police records from [REDACTED] [REDACTED]. No autopsy report has been received as of this date.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 05/20/2014

Contact Method: Phone Call

Contact Time: 12:15 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 05/20/2014

Completed date: 05/20/2014

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: 05/20/2014 12:30 PM      Entered By: [REDACTED]

CPSI [REDACTED] contacted [REDACTED] from the [REDACTED] to inquire about services that will be provided to the family. [REDACTED] stated that the child was not enrolled in DEERS due to the Step-Father never completing the enrollment but [REDACTED] will be enrolled retroactively and therefore all her medical expenses will be covered. [REDACTED] also informed the investigator that the [REDACTED] has been contacted to explore providing the family with an AER grant to help the family with the funeral expenses. CPSI [REDACTED] informed [REDACTED] that the Department could also be of assistance if a need arises and to let the mother know or for [REDACTED] to make contact directly. [REDACTED] agreed to keep the investigator informed concerning the needs of 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:	05/20/2014	Contact Method:	
Contact Time:	08:00 AM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	03/09/2015
Completed date:	03/09/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community, Service Planning		
Contact Type(s):	Notation		
Contact Sub Type:			

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

Narrative Type: Original    Entry Date/Time: 03/09/2015 11:59 AM    Entered By: [REDACTED]

Initial SDM was completed. Risk factor was #1 Death of a child due to abuse or neglect. The SDM was conditionally safe due to the father being arrested, no other children being in the home and the mother not being involved in the incident.

Narrative Type: Addendum 1    Entry Date/Time: 03/20/2015 10:08 AM    Entered By: [REDACTED]

Entry above should actually read " The SDM was conditionally safe due to the stepfather being arrested, no other children being in the home and the mother not being involved in the incident".



**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: 02:30 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 05/19/2014

Completed date: 05/19/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 05/19/2014 03:34 PM      Entered By: [REDACTED]

CPSI [REDACTED] faxed the request for the autopsy report to the medical examiners office. Copy of fax was placed into the 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: 05/16/2014

Contact Method: Phone Call

Contact Time: 03:10 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 05/17/2014

Completed date: 05/17/2014

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: 05/17/2014 06:01 PM      Entered By: [REDACTED]

CPSI [REDACTED] spoke with [REDACTED] on 5/16/14 at 3.10 pm concerning the babysitter interview. [REDACTED] the babysitter stated that [REDACTED] had no bruising on her when she was at her home the afternoon of the incident. She also stated that [REDACTED] has had some bruising in the past that she asked [REDACTED] about but the stories seemed to not be consistent. [REDACTED] stated that he will further explore this.



**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: 05/16/2014

Contact Method: Phone Call

Contact Time: 12:30 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 05/17/2014

Completed date: 05/17/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 05/17/2014 06:00 PM      Entered By: [REDACTED]

CPSI [REDACTED] contacted [REDACTED] at 1230 pm on 5/16/14 to inform them of the incident and involvement of [REDACTED] CPS. [REDACTED], on call social worker spoke with the investigator. [REDACTED] was aware of the incident and was working it. The family had no prior incidents [REDACTED]. [REDACTED] was given the investigators contact information to allow for further communication if questions should arise.



**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: 05/16/2014

Contact Method: Phone Call

Contact Time: 12:25 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 05/17/2014

Completed date: 05/17/2014

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: 05/17/2014 05:58 PM      Entered By: [REDACTED]

CPSI [REDACTED] requested medical records from [REDACTED] (phone # [REDACTED]) on 5/16/14 at 1225 pm. Records department is not able to release the medical records to the investigator due to the mother not signing a release at this time. CPSI [REDACTED] inquired if law enforcement would be able to obtain the records and [REDACTED] at the records department stated that they would be able to obtain the record. CPSI [REDACTED] contacted [REDACTED] to inform him that the records can only be released to law enforcement at this time until a release is obtained from the mother, [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: 05/16/2014 Contact Method: Attempted Phone Call  
 Contact Time: 12:05 PM Contact Duration: Less than 05  
 Entered By: [REDACTED] Recorded For:  
 Location: DCS Office Created Date: 05/17/2014  
 Completed date: 05/17/2014 Completed By: [REDACTED]  
 Purpose(s): Service Planning  
 Contact Type(s): Collateral Contact  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 05/17/2014 05:57 PM Entered By: [REDACTED]

CPSI [REDACTED] attempted to contact [REDACTED] 05/16/14 at 1205 pm to obtain any additional information acquired in the meantime. [REDACTED] was not reached and a detailed message was left for him to return the investigators 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:	System Completed
Contact Date:	05/16/2014	Contact Method:	Phone Call
Contact Time:	11:55 AM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	05/17/2014
Completed date:	06/16/2014	Completed By:	System Completed
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: 05/17/2014 05:54 PM Entered By: [REDACTED]

CPSI [REDACTED] contacted [REDACTED] (phone [REDACTED]) on 5/16/2014 at 1155 am to inquire about services that the Department may be able to put in place to assist the family and arrange for a possible interview with the mother of [REDACTED]. [REDACTED] stated that she cannot talk to DCS right now and gave the telephone to her mother [REDACTED] stated that the family is not able to come to DCS or meet with the CPS Investigator at this time and they have left [REDACTED] to go to [REDACTED] to take [REDACTED] to her sister. CPSI [REDACTED] asked the mother if there is anything that the Department can do for [REDACTED] at this time to assist her. [REDACTED] stated that [REDACTED] attempted to get medicine to help her sleep from [REDACTED] on 5/15/14 but the staff at the medical center directed her to the primary care physician and refused to provide the mother with anything to assist with sleep or anxiety. CPSI [REDACTED] inquired about the insurance and [REDACTED] is insured under [REDACTED]. CPSI [REDACTED] assure the mother that [REDACTED] would be able to see [REDACTED] and she would not have to try and schedule an appointment with her primary care physician to get short term assistance in the mean time until she is capable of coming back to [REDACTED] to see her physician [REDACTED] thanked the Investigator and CPSI [REDACTED] provided the grandmother with the contact information for the investigator. [REDACTED] stated they would need a couple of days before attempting to speak with the investigator.

Narrative Type: Addendum 1 Entry Date/Time: 02/19/2015 10:54 AM Entered By: [REDACTED]

A home visit could not be completed as the mother left [REDACTED] immediately following the interview with LE. LE did not release photos of the home to the investigator though they were requested by the 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: 05/16/2014 Contact Method: Face To Face  
 Contact Time: 05:30 AM Contact Duration: Less than 02 Hour  
 Entered By: [REDACTED] Recorded For:  
 Location: Other Community Site Created Date: 05/17/2014  
 Completed date: 05/20/2014 Completed By: [REDACTED]  
 Purpose(s): Service Planning  
 Contact Type(s): Alleged Perpetrator Interview, Collateral Contact, Initial ACV Face To Face  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 05/17/2014 05:52 PM Entered By: [REDACTED]

CPSI [REDACTED] spoke with [REDACTED] at 530 am on 5/16/14. [REDACTED] had just returned from booking [REDACTED] the step-father (AP) of [REDACTED] (ACV) 1 year old victim. [REDACTED] stated that there were no other children in the home and that both parents did not have any other children. [REDACTED] (mother) and [REDACTED] had been dating since December 2013 and got married in February 2014. [REDACTED] is currently serving in the [REDACTED] works at the [REDACTED] in [REDACTED]. The family resides at [REDACTED]. The AP stated that [REDACTED] was taken to the babysitter by [REDACTED] (friend of family) at approx. 4.15 pm on 5/15/14. The mother [REDACTED] reported to work at approx. 5 pm that evening. The child was left with [REDACTED] (last name unknown at this time) the babysitter. The step-father [REDACTED] picked up [REDACTED] from the babysitter at approx. 5 pm and took her to the home. At approx. 8.30 pm [REDACTED] was placed on the Ottoman in the livingroom and was given [REDACTED] cellphone. The child had been fuzzing due to her teething and [REDACTED] gave her the phone to calm her down. [REDACTED] threw the phone on the ground according to the AP and when he went to get the phone she leaned over the side of the Ottoman and fell on top of some toys that were located on the side of the Ottoman. (Detective noted that the toys were neatly stacked on the side of the Ottoman when LE arrived at the scene). [REDACTED] snatched [REDACTED] up by one leg and as he was pulling her up in the air to lift her off the ground she hit her head against the wooden floor. He confessed to the Detective that he squeezed the child (fingers on the center of the back and thumbs on front of the child's body) due to him becoming frustrated with [REDACTED]. He also confessed to hitting [REDACTED] in the abdomen twice with an open hand and placing her back on the Ottoman. A text message was located in the cellphone of [REDACTED] to his wife [REDACTED] stating "I hit her" and [REDACTED] responded "Calm down". LE has cellphone and records of all messages and phone calls made. Between 8.30 pm and 10.30 pm (when [REDACTED] called 911) the child was taken to the bedroom, placed into the bed and given a bottle. [REDACTED] stated that he returned to the room when [REDACTED] continued to be fuzzy and lifted her out the bed after noticing that she had difficulties breathing. When the child was lifted out the bed she felt limp and head fell back. [REDACTED] placed [REDACTED] on the ground next to the bed and she vomited up mucus. [REDACTED] picked up the child and attempted to do a heimlich maneuver as he took her to the bathroom sink to help her clear her throat. No vomit was found in the sink. Vomit was noticed on the floor next to the bed and on the pillow of the child. [REDACTED] called the mother first and then called 911. He was witnessed performing CPR on the child when LE arrived at the



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

scene.

[REDACTED] provided CPSI [REDACTED] with a copy of the photographs with visible bruising on [REDACTED] on the torso and abdomen area as well as the bruising on the center of the spine. [REDACTED] also had a large cut in the inside of her mouth. [REDACTED] was taken to [REDACTED] for this injury prior to this incident (date unknown). [REDACTED] also had bruising on her forehead close to her hairline area which mom knew about and stated that these bruises came from [REDACTED] running into things. No bruises were noted on the legs of the ACV. An autopsy will be conducted.

[REDACTED] stated that the AP was cooperative and devastated during the interview process. [REDACTED] came to the police station after leaving the hospital ([REDACTED]) to speak with her husband [REDACTED]. The two were witnessed speaking calmly with one another and [REDACTED] expressed being sorry and stating "please don't leave me, I love you". [REDACTED] responded with "we need to pray" and never accusing him of causing any harm to her child. The Detective stated that [REDACTED] knew that [REDACTED] caused the injuries which ultimately could have led to the child's death but never accused him of anything during the time she spoke with him. [REDACTED] did overhear the parents of [REDACTED] saying that she needed to change her last name.

CPSI [REDACTED] inquired if the Detective knew who the biological father of [REDACTED] is and [REDACTED] stated that he only knew that the father was in prison and was abusive to the mother in the past. CPSI [REDACTED] inquired if there were any calls to LE in the past from this family / residence; [REDACTED] stated that he did not know and he had not looked into that at this time. CPSI [REDACTED] inquired if the child had any illnesses or cold; [REDACTED] stated that [REDACTED] reported that she had problems with her sinuses but no cold and that she did not have any illness causing bruising. CPSI [REDACTED] asked [REDACTED] if dad was asked if the child was shaken at any point in time; [REDACTED] stated that he did ask [REDACTED] but he stated that he did not shake [REDACTED]. CPSI [REDACTED] obtained the contact information for both [REDACTED] and concluded her interview with [REDACTED] at 7.30 am. CPSI [REDACTED] staffed the case with L [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: 05/16/2014

Contact Method: Face To Face

Contact Time: 04:45 AM

Contact Duration: Less than 01 Hour

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 05/17/2014

Completed date: 05/17/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 05/17/2014 06:06 PM      Entered By: [REDACTED]

CPSI [REDACTED] arrived at [REDACTED] after speaking with LI [REDACTED] concerning the P1. The staff at the ER informed the investigator that the family had left a while ago and that the mother [REDACTED] had family members with her and left with them. CPSI [REDACTED] spoke with the charge nurse and inquired about the injuries and the medical records and the charge nurse would not release information to the investigator. The nurse did state that the injuries were the cause of death and an autopsy would take place later in the day. CPSI inquired if the family had any additional children and the nurse reported that the mother had no other children.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED] Status: Completed  
 Contact Date: 05/16/2014 Contact Method:  
 Contact Time: 04:40 AM Contact Duration: Less than 05  
 Entered By: [REDACTED] Recorded For:  
 Location: DCS Office Created Date: 03/09/2015  
 Completed date: 03/09/2015 Completed By: [REDACTED]  
 Purpose(s): Permanency, Safety - Child/Community, Well Being  
 Contact Type(s): Case Summary  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/09/2015 11:53 AM Entered By: [REDACTED]

## INITIAL CASE SUMMARY

CPS received this case on 5/16/14 as a P1 with allegations of neglect death. The victim is listed as [REDACTED], and the perpetrator listed is [REDACTED]. The referral was assessed and assigned by Central Intake on to CPSI [REDACTED] Response is due immediate. It is unknown if the child was of Native American decent.

Juvenile Court and the District Attorney are notified of the referrals and classification per local protocol and policy.

Family Case IDs: N/A

Open Court Custody/FSS/FCIP: No

Closed Court Custody: No

Open CPS: No

Substantiated: No

Death: No

Screened out: No

History (not listed above): None

DUPLICATE REFERRAL: No

County: [REDACTED]

Notification: None

School/ Daycare: Unknown

Native American Descent: No

Directions: None given



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Reporter states: [REDACTED] (1) lives in [REDACTED] with her mother and stepfather, [REDACTED]. The police were called to the home and told that the child was unresponsive at 10:10pm on May 15, 2014. The child was transported by ambulance to [REDACTED] and pronounced dead. The reporter was told that [REDACTED] called the police. He was at home alone with the child. He said that [REDACTED] was sitting on an ottoman and fell off the ottoman and landed on one of her toys. He said the toy hit her in the chest. [REDACTED] said she started to cry and he consoled her. He said that he laid her down in bed an hour later and gave her a bottle. [REDACTED] said he went back to her room about fifteen minutes after that and she hadn't drunk very much of the bottle. He took the bottle and returned it to the refrigerator. He said he checked on her fifteen minutes later and [REDACTED] had thrown up in her bed. He picked her up and said she felt lifeless, she had no pulse and wasn't breathing. [REDACTED] said he began CPR on her. At that time, he called the police and continued CPR until EMS arrived at the home. When the police entered the child's room, [REDACTED] was on the floor with the child and was continuing CPR. There were small, approximately marble size bruises on the child's chest and abdomen from the nipple area to about her waistline. She was unresponsive, with no pulse and was not breathing the entire time the police were in the home. EMS arrived approximately thirty seconds after the police and they immediately grabbed her and took her to the ambulance. The child's mother, [REDACTED], was at work at the time of the incident. [REDACTED] may have called her at some point during the incident and [REDACTED] arrived at the home just as the ambulance was leaving the home. [REDACTED] is a [REDACTED] with the child. [REDACTED] is being interviewed by the police. [REDACTED] said that the child had some kind of condition that caused [REDACTED] to bruise easily, but that has not been confirmed. There are no other children in the home. There is no report of any problems with the condition of the home. [REDACTED] did not appear to be under the influence at the time of the incident.



**Tennessee Department of Children's Services**  
**SDM™ Safety Assessment**

**Assessment**

Family Name: [REDACTED] TN DCS Intake ID #: [REDACTED]  
 County: [REDACTED] Worker: [REDACTED]  
 Date of Referral: 5/16/14 2:14 AM Date of Assessment: 5/20/14 12:00 AM  
 Assessment Type: Initial Number of Children in the Household: 1

**Section 1: Immediate Harm Factors**

Directions: The following factors are behaviors or conditions that may be associated with a child being in immediate danger of serious harm. Identify the presence of absence of each factor by making either "yes" or "no". Note: The vulnerability of each child needs to be considered throughout the assessment. Children ages zero through six cannot protect themselves. For older children, inability to protect themselves could result from diminished mental or physical capacity or repeated victimization.

Yes No

1. Caretaker caused serious physical harm to the child, or made a plausible threat to cause serious physical harm in the current investigation indicated by (check all that apply):
- Serious injury or abuse to child other than accidental.
  - Death of a child due to abuse or neglect.
  - Care taker fears that s/he will maltreat the child.
  - Threat to cause harm or retaliate against the child.
  - Excessive discipline or physical force.
  - Drug-affected infant/child.
  - Methamphetamine lab exposure.
2. Child sexual abuse is suspected, and circumstances suggest that the child's safety may be of immediate concern.
3. Caretaker fails to protect the child from serious harm or threatened harm by others. This may include physical abuse, sexual abuse, or neglect.
4. Caretaker's explanation for the injury to the child is questionable or inconsistent with the type of injury, and the nature of the injury suggests that the child's safety may be of immediate concern.
5. The family refuses access to the child, or there is reason to believe that the family is about to flee.
6. Caretaker does not meet the child's immediate needs for supervision, food, clothing, and/or medical or mental health care.
7. The physical living conditions are hazardous and immediately threatening to the health and/or safety of the child.
8. Caretaker's current substance abuse seriously impairs his/her ability to supervise, protect, or care for the child.
9. Domestic violence exists in the home and poses a risk of serious physical and/or emotional harm to the child.



## Tennessee Department of Children's Services

### SDM™ Safety Assessment

10. Caretaker describes the child in predominantly negative terms or acts toward the child in negative ways that result in the child being a danger to self or others, acting out aggressively, or being severely withdrawn and/or suicidal.
11. Caretaker's emotional stability, developmental status, or cognitive deficiency seriously impairs his/her current ability to supervise, protect, or care for the child.
12. There is a pattern of prior investigations and/or behavior that suggests an escalating threat to child safety.
13. Other (specify)

**If no immediate harm factors are observed, proceed to Section 3**

#### Section 2: Safety Interventions

If no immediate harm factors are present, go to Section 3. If one or more immediate harm factors are present, consider whether safety interventions one through eight will allow the child to remain in the home for the present time. Check the item number for all safety interventions that will be implemented. If there are no available safety interventions that would allow the child to remain in the home, indicate by checking item nine or ten, and follow procedures for initiating a voluntary agreement or taking the child into protective custody. Mark all that apply:

#### Non-Protective Custody Interventions:

1. Intervention or direct services by worker as part of a safety plan.
2. Use of family, neighbors, or other individuals in the community as safety resources.
3. Use of community agencies or services as immediate safety resources.
4. Have caretaker appropriately protect the victim from the alleged perpetrator.
5. Have the alleged perpetrator leave the home, either voluntarily or in response to legal action.
6. Have the non-offending caretaker move to a safe environment with the child.
7. Legal action planned or initiated - child remains in the home.
8. Other (Specify): No other children are in the home. AP was arrested

#### Protective Custody Interventions:

9. Caretaker signs a voluntary placement agreement that places the child in Department of Children Services (DCS) custody.
10. Child placed in protective custody pursuant to 37-1-113 and 37-1-117 because no interventions are available to adequately ensure the child's safety.



**Tennessee Department of Children's Services**  
**SDM™ Safety Assessment**

**Section 3: Safety Decision**

Identify the safety decision. This decision should be based on the assessment of all immediate harm factors, safety interventions, and any other information known about the family. Mark only one.

- 1. **Safe.** No immediate harm factors were identified at this time. Based on currently available information, there are no children likely to be in immediate danger of serious harm.
- 2. **Conditionally Safe.** One or more immediate harm factors are present, and one or more protecting interventions #1-8 have been planned or taken. Based on protecting interventions, no protective custody action is necessary at this time.
- 3. **Unsafe.** One or more immediate harm factors are present, and placement is the only protecting intervention (#9 or #10) possible for one or more children. Without placement, one or more children will likely be in danger of immediate or serious harm.
  - All children placed.
  - One or more children being placed in protective custody, but others remain in the home. Complete the status of each child below only when one or more children are being removed, but others remain in the home:

**Children Removed**

**Children Not Removed**

**Case Manager:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Team Leader:** \_\_\_\_\_

**Date:** \_\_\_\_\_