



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

Intake

Intake ID: [REDACTED]
 Intake Taken By: [REDACTED] Intake Date/Time: 06/11/2014 08:21 AM [REDACTED]
 Track Assigned: Investigation Priority Assigned: 1
 Screened By: [REDACTED]
 Date Screened: 06/11/2014

Investigation

Investigation ID: [REDACTED]
 First County/Region: [REDACTED]
 Date/Time Assigned : 06/11/2014 09:47 AM
 First Team Leader Assigned: [REDACTED] Date/Time 06/11/2014 12:00 AM
 First Case Manager [REDACTED] Date/Time 06/11/2014 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
Unknown Participant [REDACTED] Unknown	4 Mos	Neglect Death	Yes	[REDACTED]	Birth Mother

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: Yes

Associated Family Case ID: # [REDACTED] (no direct involvement with [REDACTED])

Family Case ID: # [REDACTED]

Open Court Custody/FSS/FCIP No

Closed Court Custody No

Open CPS - No

Substantiated No

Child Death No

Screened out Yes - 1 (# [REDACTED])

Additional History (not listed above):



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INV - # [REDACTED] (DEC) 3/17/06 - Unsubstantiated

County: [REDACTED]
 Notification: None
 School/ Daycare: N/A
 Native American Descent: Unknown
 Directions: N/A

Reporters name/relationship: [REDACTED]

Reporter states:

Baby boy [REDACTED] ([REDACTED]) was in the custody of his mother [REDACTED] in [REDACTED] reportedly has given birth to two other children but their information is unknown at this time.

The mother had no prenatal care. It is estimated that the baby was born around 24-26 weeks gestation. When baby boy [REDACTED] was born, he was sent to [REDACTED] immediately after birth but later died on the same day he was born ([REDACTED]). At the time of birth, there was no urine test done on the baby. The mother had to have an emergency c-section due to bleeding and a placental abruption. There was a cord sample tested that came back today on 6/11/14 as positive for amphetamines, methamphetamines and marijuana. The reporter states that one of the risks of using amphetamines during pregnancy is placental abruption. The reporter states it is usual practice for pregnant mothers to be cautioned by their physician that using meth or amphetamines can cause placental abruption. The reporter states the baby was intubated and was considered a live birth. The mothers prenatal history with her other children is unknown. The mother discharged from the hospital that same day she gave birth to the baby.

The reporter has not notified law enforcement and it is unknown if [REDACTED] has notified them. It is unknown if there is an autopsy pending.

This is the mother's third delivery, but it is unknown if the mother's two other children are currently in her care at this time.

The reporter has not interviewed the mother to get an explanation on the drug usage. The reporter is unaware of any other instance of there being a previous child death in relation to this mother.

It is unknown if the mother has any law enforcement history.

Special Needs or Disabilities: None.
 Childs current location/is the child safe at this time: Deceased
 Perpetrators location at this time: Unknown.
 Any other safety concerns for the child(ren) or worker who may respond: None.

Note: According to TFACTS S/O report # [REDACTED] [REDACTED] children are [REDACTED] and [REDACTED] (1 years old).

Investigative Track - P1 - Child Death
 [REDACTED], TC, on 6/11/14 @ 9:31am

Notified Child Death/Child Near Death Notification Group via Email:
 [REDACTED]



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Tennessee Child Abuse Hotline Summary**

[REDACTED]





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

Participant(s)**Name:** Unknown Participant [REDACTED] Unknown

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED]

Race: [REDACTED]

Age: 4 Mos

Address: [REDACTED]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:**DCS History Search Results:****DCS Intake Search Results:****Name:** [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED]

Race: [REDACTED]

Age: 24 Yrs

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:**



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: 06/11/2014

Assignment Date: 06/11/2014

Street Address: [REDACTED]

City/State/Zip: [REDACTED]

B. Allegation

#	Children's Name	DOB	Specific Allegation for Each Child	Alleged Perpetrator's Name	DOB	Classification	Severe Abuse	Classified By
		SSN			SSN			
1	[REDACTED]	[REDACTED]	Drug Exposed Infant	[REDACTED]	[REDACTED]	Allegation Substantiated / Perpetrator Substantiated	Yes	[REDACTED] 08/18/2014
2	[REDACTED]	[REDACTED]	Neglect Death	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[REDACTED] 08/18/2014

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: Due to medical reports case is being close with the following classifications: Drug Exposed Infant: Allegation Substantiated, perpetrator Substantiated; Neglect Death: Allegation unsubstantiated, perpetrator unsubstantiated.

D. Case Workers

Case Worker: [REDACTED]

Date: 08/18/2014

Team Leader: [REDACTED]

Date: 08/19/2014

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:

Unable to Complete. [REDACTED] was born on [REDACTED] and died the same day. CPSI received the case on 6/11/14 and the baby was already sent off to the morgue.

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

Medical Records in the file- [REDACTED] was born on [REDACTED] and died the same day due to his lungs not being fully developed. Cord blood results showed that there was amphetamines, methamphetamines, and marijuana in [REDACTED] cord blood.



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]

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

On 7/3/14 CPSI [REDACTED] received notation of Courtesy interview with [REDACTED] done by [REDACTED] DSS on 7/1/14, conducted by [REDACTED] is currently staying at the [REDACTED] at Exit 10 in our locality. I met with her yesterday (7/1) at 11:30am. [REDACTED] admitted that she used Marijuana (only) until 6 weeks into her pregnancy. She denied use of any other substances in the past or present. [REDACTED] reported that on the day she went to the hospital, she had felt really bad. She began bleeding and broke into a cold sweat all over. Her parents took her to the hospital. Since that time, she has had difficulty regulating her blood pressure. The baby was named [REDACTED]. His father is [REDACTED], who is reported to be an alcoholic. [REDACTED] and [REDACTED] separated just days before she went into preterm labor. She feels that the stress from his behavior caused this.

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

CPSI [REDACTED] received allegations of Drug Exposed Infant and Neglect Death for [REDACTED] by mother, [REDACTED] on 6/11/14.

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

N/A

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: 01:00 PM Contact Duration: Less than 15
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office 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 12:17 PM Entered By: [REDACTED]

Purpose: Case Review for Closure

LI [REDACTED] reviewed this case for closure. The following tasks were completed.
 LI received confirmation that case can be closed per RID approval.

Date of Referral: 6/11/14

Initial Notification to Juvenile Court: 6/11/14

Notification to DA: 6/11/14

Law Enforcement Notification: 6/11/14

[REDACTED] Notification: 6/11/14

SDM Safety Assessment: 6/12/14

FAST: n/a FAST approval: n/a

Administrative Review(s): 6/12/14, 6/20/14, 7/10/14, 8/18/14, 9/12/14

CS-0740 Sent to [REDACTED] County Juvenile Court: 9/12/14

Case Closure Date: 9/12/14

This case will be filed under: [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: 09/10/2014

Contact Method:

Contact Time: 12:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/10/2014

Completed date: 09/10/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/10/2014 03:26 PM Entered By: [REDACTED]

Medical records ruled out infant death due to drug use. Records show that infant died due to premature birth and lungs not being fully developed.



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: 08/18/2014 Contact Method:
 Contact Time: 03:00 PM Contact Duration: Less than 15
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 08/21/2014
 Completed date: 08/21/2014 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: 08/21/2014 01:53 PM Entered By: [REDACTED]
 LI sent notification to IC [REDACTED] that case is ready for RID review as CPSI has turned case in for 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: 08/18/2014

Contact Method:

Contact Time: 12:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/18/2014

Completed date: 08/18/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Case Summary

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/18/2014 03:29 PM Entered By: [REDACTED]

Due to medical reports case is being close with the following classifications: Drug Exposed Infant: Allegation Substantiated, perpetrator Substantiated; Neglect Death: Allegation unsubstantiated, perpetrator unsubstantiated. Classification Letter A is being mailed to last given mailing address 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: 08/14/2014

Contact Method: Face To Face

Contact Time: 08:30 AM

Contact Duration: Less than 03 Hour

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 08/18/2014

Completed date: 08/18/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

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

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/18/2014 03:07 PM Entered By: [REDACTED]

CPSI [REDACTED] re-presented the case at CPIT and the team changed the allegation of neglect death, to allegation unsubstantiated, perpetrator unsubstantiated.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/16/2014

Contact Method: Correspondence

Contact Time: 01:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/22/2014

Completed date: 07/22/2014

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: 07/22/2014 04:14 PM Entered By: [REDACTED]

LI received email correspondence from [REDACTED], Child Safety Nurse requesting the case file to be taken to the [REDACTED] as she and [REDACTED] will be conducting a Child Death Review of the file. It was determined CPSI [REDACTED] would drop the file off at the Regional Office for the review.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/14/2014

Contact Method: Phone Call

Contact Time: 12:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/18/2014

Completed date: 07/18/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/18/2014 12:04 PM Entered By: [REDACTED]

CPSI [REDACTED] called and spoke with [REDACTED]. He stated that she does know [REDACTED] and that he has had a relationship with her in the past 4-6 months. He stated that he did find out that she was pregnant and that she was alleging that he was the father, but he didn't find out until the baby was already dead and buried. CPSI notified [REDACTED] that she was the case worker on the neglect death case and that CPSI had not received the case until after the child had died and that she needed to follow up with him and notify him about the case since he was the alleged father. He stated that he understood. He told CPSI that [REDACTED] was probably doing meth and marijuana again. He said that he's tried to get her help, and that her parents are part of her problem. he said that [REDACTED] can't control her drug use, the drug control her.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/14/2014

Contact Method: Phone Call

Contact Time: 10:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/18/2014

Completed date: 07/18/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/18/2014 11:58 AM Entered By: [REDACTED]

CPSI [REDACTED] called [REDACTED] and spoke to foster care worker, [REDACTED]. She gave CPSI contact information for the alleged father, [REDACTED]. He lives with his sisiter at [REDACTED]. She had just spoke to him at [REDACTED]. Other contact numbers she has are: [REDACTED].



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/10/2014

Contact Method: Phone Call

Contact Time: 02:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/10/2014

Completed date: 07/10/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/10/2014 02:04 PM Entered By: [REDACTED]

CPSI attempted to call alleged father, [REDACTED] at the following numbers: [REDACTED]: unavailable- try again later (also sent a text to this number); [REDACTED]: number disconnected [REDACTED]: no answer, unable to leave message (also sent a text to this 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:	07/10/2014	Contact Method:	
Contact Time:	09:00 AM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	07/18/2014
Completed date:	07/18/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 07/18/2014 01:10 PM Entered By: [REDACTED]

LI phoned IC [REDACTED] to discuss case progress and to seek guidance. LI ask if CPSI [REDACTED] could not get the alleged father of the deceased ACV on the phone (as there were multiple phone numbers listed for him) what information did the letter need to contain. IC advised there was a form letter that needed to be used on the server. Also LI stated at CPIT the previous day the team wanted to substantiate for the Neglect Death allegation but questioned this. The cord blood confirmed the substantiation for DEI, however, unless medical personnel and/or records confirm that the drug use caused the infant's death then this could not be substantiated per IC. CPSI [REDACTED] will take this case back to CPIT in August to represent and recommend AUPU for the allegation of Neglect Death. The allegations of DEI will remain classified as AIP1.



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: 07/09/2014

Contact Method:

Contact Time: 12:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/10/2014

Completed date: 07/10/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/10/2014 02:00 PM Entered By: [REDACTED]

CPSI [REDACTED] did a diligent search request on alleged father: [REDACTED] - results returned and 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: 07/09/2014

Contact Method: Face To Face

Contact Time: 08:30 AM

Contact Duration: Less than 03 Hour

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 07/10/2014

Completed date: 07/10/2014

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: 07/10/2014 01:59 PM Entered By: [REDACTED]

CPIT: Allegation Substantiated, Perpetrator Substantiated



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/03/2014

Contact Method:

Contact Time: 12:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/03/2014

Completed date: 07/03/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/03/2014 11:57 AM Entered By: [REDACTED]

CPSI [REDACTED] recieved medical records from [REDACTED] - 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: 07/03/2014

Contact Method:

Contact Time: 10:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/03/2014

Completed date: 07/03/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/03/2014 10:21 AM Entered By: [REDACTED]

CPSI [REDACTED] forwarded Courtesy interview information to Detective [REDACTED] with [REDACTED] Police Department.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	07/03/2014	Contact Method:	Correspondence
Contact Time:	09:00 AM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	07/03/2014
Completed date:	07/03/2014	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Alleged Perpetrator Interview, Parent/Caretaker Interview, Notation		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 07/03/2014 10:20 AM Entered By: [REDACTED]

CPSI [REDACTED] received notation of Courtesy interview with [REDACTED] done by [REDACTED] DSS on 7/1/14, conducted by [REDACTED], which stated the following: The information you had emailed to [REDACTED] at [REDACTED] DSS requesting a courtesy interview was forwarded to us at [REDACTED] DSS. [REDACTED] is currently staying at the [REDACTED] at Exit 10 in our locality. I met with her yesterday (7/1) at 11:30am. She would not let us inside the room and asked to talk with us outside. She is staying with her parents, [REDACTED], in room # [REDACTED]. After talking with her, it does seem that she is depressed regarding the loss of her baby. She agreed that she is having difficulty dealing with the grief and I provided her with contact information to [REDACTED] for counseling. [REDACTED] admitted that she used Marijuana (only) until 6 weeks into her pregnancy. She denied use of any other substances in the past or present. [REDACTED] reported that on the day she went to the hospital, she had felt really bad. She began bleeding and broke into a cold sweat all over. Her parents took her to the hospital. Since that time, she has had difficulty regulating her blood pressure. The baby was named [REDACTED]. His father is [REDACTED], who is reported to be an alcoholic. [REDACTED] and [REDACTED] separated just days before she went into preterm labor. She feels that the stress from his behavior caused this. [REDACTED] other children are currently in the care of their fathers in [REDACTED]. [REDACTED] has a follow-up appointment with [REDACTED] in one week. I left my business card with [REDACTED] if she should need anything. I hope this is helpful. Please let me know if you need additional information/assistance.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/02/2014

Contact Method:

Contact Time: 12:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/03/2014

Completed date: 07/03/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/03/2014 10:19 AM Entered By: [REDACTED]

CPSI [REDACTED] re-requested medical records from [REDACTED]

CPSI [REDACTED] called [REDACTED] with [REDACTED] DSS at [REDACTED] no answer, left message. She returned call and stated that a worker did make contact with [REDACTED] and sent CPSI and e-mail this morning. CPSI did not received e-mail, gave correct e-mail address and asked that it be re-sent.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 06/30/2014

Contact Method:

Contact Time: 12:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/03/2014

Completed date: 07/03/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/03/2014 10:18 AM Entered By: [REDACTED]

CPSI [REDACTED] picked up birth records on [REDACTED] - in file- Baby Boys name was [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: 06/26/2014

Contact Method: Correspondence

Contact Time: 12:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/03/2014

Completed date: 07/03/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/03/2014 10:17 AM Entered By: [REDACTED]

CPSI [REDACTED] received an e-mail from [REDACTED] with [REDACTED] with the court order showing that [REDACTED] is in the custody of [REDACTED] - copy 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: 06/26/2014

Contact Method:

Contact Time: 12:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/03/2014

Completed date: 07/03/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/03/2014 10:18 AM Entered By: [REDACTED]

CPSI [REDACTED] sent a letter via fax to [REDACTED] and [REDACTED] requesting records on [REDACTED].



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	06/20/2014	Contact Method:	
Contact Time:	01:00 PM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	06/20/2014
Completed date:	07/18/2014	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: 06/20/2014 01:43 PM Entered By: [REDACTED]

Case staffed with CPSI [REDACTED]. Mom failed to show for a scheduled appointment with CPSI [REDACTED] on 6/17 at the [REDACTED] DCS office. CPSI has contacted [REDACTED] to request a courtesy visit to the mother's current location at [REDACTED] (off exit 10) as well as the juvenile court's information for verification of a court order regarding the custody of [REDACTED]. CPSI will consult with DCS legal on how to obtain medical records without a ROI from the mother or if this is even an option. Case to remain open. Case will be presented to CPIT in July and recommendations will be ASPS for DEI. Classification for Neglect Death is unknown until medical records can be received and reviewed.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 06/20/2014

Contact Method:

Contact Time: 12:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/03/2014

Completed date: 07/03/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/03/2014 10:17 AM Entered By: [REDACTED]

CPSI [REDACTED] received an e-mail from [REDACTED] with [REDACTED] stating that she had forwarded on the courtesy request to [REDACTED], as [REDACTED] was staying in the county's jurisdiction and not the cities. She stated she would work on getting the court order that CPSI had requested.



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: 06/19/2014

Contact Method:

Contact Time: 12:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/03/2014

Completed date: 07/03/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/03/2014 10:16 AM Entered By: [REDACTED]

CPSI [REDACTED] sent an e-mail to [REDACTED] with [REDACTED], requesting a copy of the court order which placed [REDACTED] in the custody of [REDACTED]. CPSI also asked for a courtesy interview with mother, [REDACTED]. CPSI gave the contact information that CPSI had.



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: 06/16/2014

Contact Method: Correspondence

Contact Time: 09:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 06/16/2014

Completed date: 06/16/2014

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: 06/16/2014 11:37 AM Entered By: [REDACTED]

LI received correspondence from [REDACTED] from the [REDACTED] program through [REDACTED]. She stated they can serve [REDACTED] individually for A&D recovery support and relapse prevention. LI was also provided a referral form. LI relayed this information to CPSI [REDACTED] so that she can provide this information to [REDACTED] during their meeting tomorrow.



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: 06/13/2014

Contact Method: Attempted Phone Call

Contact Time: 02:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 06/13/2014

Completed date: 06/13/2014

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: 06/13/2014 01:40 PM Entered By: [REDACTED]

LI phoned [REDACTED] which offers an A&D program called [REDACTED] for new mothers to inquire if they could provide services for [REDACTED]. A message was left requesting a return call as nobody answered.



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: 06/13/2014

Contact Method: Correspondence

Contact Time: 10:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 06/13/2014

Completed date: 06/13/2014

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: 06/13/2014 09:39 AM Entered By: [REDACTED]

LI [REDACTED] received the request on letterhead from [REDACTED] from [REDACTED] of Social Services. (hard copy of request in case file)



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 06/12/2014

Contact Method: Phone Call

Contact Time: 04:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/16/2014

Completed date: 06/16/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/16/2014 03:08 PM Entered By: [REDACTED]

CPSI [REDACTED] called [REDACTED] at [REDACTED] no answer, unable to leave message. She returned the call and agreed to meet with CPSI at the DCS office on Tuesday afternoon.



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: Face To Face

Contact Time: 02:15 PM

Contact Duration: Less than 02 Hour

Entered By: [REDACTED]

Recorded For:

Location: Other Caretaker Home

Created Date: 06/16/2014

Completed date: 06/16/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/16/2014 03:08 PM Entered By: [REDACTED]

CPSI [REDACTED] went with Detective [REDACTED] Police Dept. We attempted a home visit [REDACTED] at approximately 2:15pm. A boy answered the door and stated that [REDACTED] was staying in a motel and was not there. He said that [REDACTED] was not their either. [REDACTED] is [REDACTED] grandmother who owns the home. Detective [REDACTED] and CPSI went to 3 nearby hotels within walking distance of the home. Not of the staff had a room rented to a [REDACTED] or recognized her photo. CPSI and Detective returned to [REDACTED] home and found her there at approximately 3:30pm. [REDACTED] stated that [REDACTED] had lost the baby because its intestines were underdeveloped. It lived about 4 hours then quit breathing. It was taken to [REDACTED] [REDACTED] is staying with her parents at the [REDACTED] at [REDACTED] in [REDACTED]. She stated that the father to the deceased baby is [REDACTED] and he lives somewhere on [REDACTED] street and works at the Walmart on the [REDACTED] number is [REDACTED] and she gave a cell number for [REDACTED] as [REDACTED].



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 06/12/2014

Contact Method: Correspondence

Contact Time: 01:30 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 06/13/2014

Completed date: 06/13/2014

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: 06/13/2014 09:37 AM Entered By: [REDACTED]

LI emailed [REDACTED] (supervisor) with CPS at [REDACTED] of Social Services and ask that her request for information be sent on their letter head.



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: 11:30 AM Contact Duration: Less than 30
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 06/12/2014
 Completed date: 06/12/2014 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)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 06/12/2014 11:17 AM Entered By: [REDACTED]

A review was held via polycom today with the following participants: [REDACTED] (CPSI), [REDACTED] (Lead Investigator), [REDACTED] (Investigations Coordinator) and [REDACTED] (Deputy Director of Investigations).

The next steps are as follows:

CPSI to obtain copies of medical records from both [REDACTED] and [REDACTED].
 CPSI to obtain copies of court order to verify custody of [REDACTED] other child, [REDACTED] (age 4). [REDACTED]
 Social Services has already provided information to verify that [REDACTED] other child, [REDACTED] (age 1) is in their custody.
 CPSI to address allegations within the referral regarding [REDACTED] A&D issues and provide her information for A&D treatment.
 Also provide resources to [REDACTED] for grief counseling that is offered within the community.
 CPSI to find out information about the father of the child.
 LI to contact [REDACTED] of Social Services and ask them to provide the information they requested from TN DCS on letterhead. Once this has been received LI will provide them the information they requested as approved by RGC [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: Attempted Face To Face

Contact Time: 04:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 06/16/2014

Completed date: 06/16/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Initial ACV Face To Face

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 06/16/2014 03:12 PM Entered By: [REDACTED]

CPSI [REDACTED] was unable to meet response by seeing [REDACTED] as CPSI was able to confirm with medical staff that he was already sent to the funeral home.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 06/11/2014

Contact Method: Correspondence

Contact Time: 12:00 PM

Contact Duration: Less than 02 Hour

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/16/2014

Completed date: 06/16/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/16/2014 03:06 PM Entered By: [REDACTED]

CPSI [REDACTED] found contact information in TFACTS for [REDACTED] in TFACTS. CPSI called and spoke to [REDACTED] at [REDACTED]. She stated that she and [REDACTED] last names are [REDACTED]. She is [REDACTED] pat-Grandmother. She stated that she and [REDACTED] have permanent custody of [REDACTED] and that was granted by [REDACTED]. She stated that [REDACTED] doesn't really visit either of her children. She did see [REDACTED] on his birthday. They still live at [REDACTED].

CPSI [REDACTED] called the referent and notified them of open case assignment. CPSI mailed referent letter.

CPSI [REDACTED] received a faxed copy of the cord blood results (in file) showing that the baby was positive for amphetamines, methamphetamines and cannabinoids.

CPSI [REDACTED] contact [REDACTED] with [REDACTED] Police Department and notified her of the case. She stated that she had a deposition today, but could go out on the case tomorrow afternoon.

CPSI [REDACTED] sent Notification of Harm to [REDACTED] Police Department, [REDACTED] Juvenile Court, [REDACTED] and District Attorneys Office.

CPSI [REDACTED] called [REDACTED] Case Manager at [REDACTED]. She stated that [REDACTED] was transfer to their hospital from [REDACTED]. Her understanding was that the baby didn't live but about 30 minutes after being intubated. There was no autopsy requested and the funeral home would have already picked the baby up at this point. She tried to transfer CPSI to the NICU nurse, but they were busy and could not speak to CPSI at the 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: Phone Call

Contact Time: 11:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 06/13/2014

Completed date: 06/13/2014

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: 06/13/2014 01:18 PM Entered By: [REDACTED]

LI [REDACTED] phoned [REDACTED] (CPS supervisor) with the [REDACTED] of Social Services to inquire of any history in regards to the AP (mother), [REDACTED] with their department as a screened out referral/request (intake ID: [REDACTED] for a border agreement from [REDACTED] was located. She reported that their dept received a referral sometime last year in which the mother had a meth lab and that one of [REDACTED] children named [REDACTED] (approximately age 1) was currently in their custody due to that particular incident. [REDACTED] also stated the mother's other child, [REDACTED] was in the custody of grandparents which reside in [REDACTED] due to the same incident as well. She stated their department was in the process of terminating [REDACTED] parental rights to [REDACTED] and that she would find out from their foster care unit their plans for permanency.

LI [REDACTED] requested the above information and any other beneficial information to be placed on their letterhead and emailed to this LI at her earliest convenience.



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:

Contact Time: 08:30 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/16/2014

Completed date: 06/16/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Case Summary

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/16/2014 02:38 PM Entered By: [REDACTED]

TFACTS: Yes

Associated Family Case ID: # [REDACTED] (no direct involvement with [REDACTED])

Family Case ID: # [REDACTED]

Open Court Custody/FSS/FCIP No

Closed Court Custody No

Open CPS - No

Substantiated No

Child Death No

Screened out Yes - 1 (# [REDACTED])

Additional History (not listed above):

INV - # [REDACTED] (DEC) 3/17/06 - Unsubstantiated

County: [REDACTED]

Notification: None

School/ Daycare: N/A

Native American Descent: Unknown

Directions: N/A

Reporter states:

[REDACTED] was in the custody of his mother [REDACTED] reportedly has given birth to two other children but their information is unknown at this time.

The mother had no prenatal care. It is estimated that the baby was born around 24-26 weeks gestation. When baby boy [REDACTED] was born, he was sent to [REDACTED] immediately after birth but later died on the same



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

day he was born [REDACTED]. At the time of birth, there was no urine test done on the baby. The mother had to have an emergency c-section due to bleeding and a placental abruption. There was a cord sample tested that came back today on 6/11/14 as positive for amphetamines, methamphetamines and marijuana. The reporter states that one of the risks of using amphetamines during pregnancy is placental abruption. The reporter states it is usual practice for pregnant mothers to be cautioned by their physician that using meth or amphetamines can cause placental abruption. The reporter states the baby was intubated and was considered a live birth. The mothers prenatal history with her other children is unknown. The mother discharged from the hospital that same day she gave birth to the baby.

The reporter has not notified law enforcement and it is unknown if [REDACTED] has notified them. It is unknown if there is an autopsy pending.

This is the mother's third delivery, but it is unknown if the mother's two other children are currently in her care at this time.

The reporter has not interviewed the mother to get an explanation on the drug usage. The reporter is unaware of any other instance of there being a previous child death in relation to this mother.

It is unknown if the mother has any law enforcement history.

Special Needs or Disabilities: None.

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

Perpetrators location at this time: Unknown.

Any other safety concerns for the child(ren) or worker who may respond: None.

Note: According to TFACTS S/O report # [REDACTED] [REDACTED] children are [REDACTED], and [REDACTED] (1 years old).

Investigative Track - P1 - Child Death

[REDACTED] TC, on 6/11/14 @ 9:31am

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

[REDACTED]
[REDACTED]