



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

Case # 2014.096

Intake #:	██████████	Investigation #:	██████████	Date of Referral:	06/23/2014	
Type: (Please check one)	<input checked="" type="checkbox"/> DEATH	<input type="checkbox"/> NEAR DEATH	Date of Death/Near Death:	06/23/2014		
Child's Name:	██████████	DOB:	██████████	Person ID:	██████████	
Gender:	<input checked="" type="checkbox"/> Male	<input type="checkbox"/> Female	Race/Ethnicity:	White (Non Hispanic)	County/Region:	██████████
Parents' Names:	Mother:	██████████	Father:	██████████		
Alleged Perpetrator's Name:	unknown		Relationship to Victim:	N/A		
Child in custody at time of incident?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	Adjudication:	Juvenile Justice- After Care Program		
If child is in DCS custody, list placement type and name:						
<b>Describe (in detail) circumstances surrounding death/near death:</b>						
<p>On 06/23/14 ██████████ disabled the alarms on the windows and doors of his grandmother's ██████████ home, he got into her purse and took three hydrocodone pills and the spare key to her car. The stolen vehicle was spotted and the ██████████ Sheriff's Department pursued the vehicle with lights and sirens. ██████████ was going approximately 50 mph. The pursuit lasted about 5 minutes and the child did not stop. They were going to put out spike strips and when the child spotted the other deputy he sped up to 80 mph. At approximately 11:50 a.m. ██████████ wrecked the vehicle, he hit a telephone pole. ██████████ was entrapped in the vehicle and when emergency personnel got him out he was deceased. The autopsy revealed cause of death as a skull fracture which led to brain lacerations. Toxicology is pending.</p>						
<b>If this is a near death certified by a physician, identify physician by name and provide contact information:</b>						
Name of Physician:			Telephone #	( ) -		
Street Address:			City/State/Zip:			
<b>Describe (in detail) interview with family:</b>						
Interview with family has not been completed at this time. The grandmother ██████████ refused to speak to SIU on the phone. A home visit will be made at a later date.						
<b>If child was hospitalized, describe (in detail) DCS involvement during hospitalization:</b>						
N/A						
<b>Describe disposition of body (Death):</b>		Body was taken to ██████████ ██████████				
Name of Medical Examiner/Coroner:	Dr. ██████████	Medical Examiner	Was autopsy requested?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes	
Did CPS open an investigation on this Death/Near Death?		<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes			
Was there DCS involvement at the time of Death/Near Death?			<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes		
Type:	Juvenile Justice - After Care		Case #:	██████████		
<b>Describe law enforcement or court involvement, if applicable:</b>						
██████████ Police received report regarding stolen vehicle ██████████ Sheriff's Department pursued the child in the stole vehicle. Tennessee Highway Patrol is working the crash fatality.						
<b>Describe (in detail) action taken to ensure safety of other children (list names and ages of surviving children) and/or victim (Near Death) (attach safety plan, if applicable):</b>						
No other children were involved.						
Name:				Age:		

Check the "Forms" Webpage for the current version and disregard previous versions. This form may not be altered without prior approval.

Distribution: Child's Case File

CS-0635, Rev. 08/13

RDA 2993

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Intake #:	██████████	Investigation #:	██████████	Date of Report:	06/23/2014
Name:				Age:	
Name:				Age:	
Name:				Age:	
Name:				Age:	

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

Date	Case #	Allegations	Victims	Perpetrators	Classification/Adj
04/09/2013	██████████	SEE	██████████	██████████	ASPS
02/20/2009	██████████	PHA	██████████	██████████	Serv. Required
09/24/2008	██████████	PHA & PSY	██████████	██████████	Serv. Required
12/07/2006	██████████	PHA	██████████	██████████	Assessment
07/30/1999	██████████	MDM	██████████	██████████	AUPU
/ /					
/ /					

Any media inquiry or is attention expected?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes	List organizations requesting information: report was on local news at 11:00p.m. on 06/23/2014 ██████████-news channel three)
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Contact Person/Phone Number(s) (include CM, TL, and TC):

Contact Person:	Telephone Number: ( ) -
Case Manager: ██████████	Telephone Number: ██████████
Team Leader: ██████████	Telephone Number: ██████████
Team Coordinator: ██████████	Telephone Number: ██████████

ATTACH a copy of the <u>TFACTS Incident Report</u> or if TFACTS is inoperable, <u>DCS Form CS-0496, Serious Incident Report</u> to this notice.	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
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**Email to: ██████████**  
**within forty-eight (48) hours of notification**  
**Include subject line (in RED): CHILD DEATH [secure email] or**  
**CHILD NEAR DEATH [secure email]**



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

**Intake**

Intake ID: [REDACTED]  
 Intake Taken By: [REDACTED] Intake Date/Time: 06/23/2014 02:12 PM [REDACTED]  
 Track Assigned: Special Investigation Priority Assigned: 1  
 Screened By: [REDACTED]  
 Date Screened: 06/23/2014

**Investigation**

Investigation ID: [REDACTED]  
 First County/Region: [REDACTED]  
 Date/Time Assigned : 06/24/2014 10:58 AM  
 First Team Leader Assigned: [REDACTED] Date/Time 06/24/2014 12:00 AM  
 First Case Manager [REDACTED] Date/Time 06/24/2014 12:00 AM

**Allegations**

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	16 Yrs	Neglect Death	Yes	Unknown Participant [REDACTED] Unknown	Other Non-relative

**Referent(s)**

Referent Name: [REDACTED] Role to Alleged Victim(s): [REDACTED]  
 Referent Address: [REDACTED]  
 Referent Phone Number: [REDACTED]  
 Type of Contact: I-3 Phone  
 Notification: Letter  
 Narrative: \*Child is not in state custody\*  
 TFACTS: Yes  
 Family Case ID: [REDACTED]  
 Open JJ Aftercare- FSW: [REDACTED]  
 Closed Court Custody: Yes, 12-22-13  
 Open CPS: No  
 Substantiated: 06-19-13 # [REDACTED] / SEE / [REDACTED]



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

Child Death: No

Screened out: Yes (2) (# [REDACTED] & # [REDACTED])

History (not listed above):

ASMT - 04-02-09 / # [REDACTED] / PHA / Services Required

ASMT - 02-22-09 / # [REDACTED] / PYA, PHA / Services Required

01-30-07 / # [REDACTED] / PHA / Assessment

INV - 12-21-99 / # [REDACTED] / MDM / Unsubstantiated

County: [REDACTED]

Notification: Letter

School/ Daycare: N/A

Native American Descent: No

Directions: None given

Reporters name/relationship: [REDACTED] [REDACTED]

Reporter states:

[REDACTED] (16) resides with his grandmother [REDACTED].

[REDACTED] has been working with the family since [REDACTED] exited DCS custody in November 2013. [REDACTED] is the [REDACTED] worker. The family currently has an open JJ aftercare case with DCS; [REDACTED] is the DCS case manager.

Today at 9:30am the [REDACTED] worker called the DCS worker and reported that [REDACTED] stole his grandmothers vehicle sometime last night. It was reported that [REDACTED] stole three hundred dollars and three or four Hydrocodone pills from his grandmothers purse. It was reported that the grandmother contacted the police when she found out that her vehicle was taken.

At 11:50am the [REDACTED] worker called the DCS worker and stated that [REDACTED] was in a car wreck. It was reported that [REDACTED] hit a telephone pole and had to be cut out of the car.

At 1:42pm the [REDACTED] worker called the DCS worker and informed the worker that [REDACTED] had passed away. The [REDACTED] worker stated that she received the information of the childs death from the paternal great-aunt [REDACTED].

The court liaison was contacted and it was reported that there was a police chase somewhere around [REDACTED] TN. The reporter has not received the actual police report at this time. No other information is known at this time.

Investigative Track - P1 - Child Death

[REDACTED] TC, on 6/23/14 @ 3:04pm

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

[REDACTED] A - [REDACTED]

Recon by [REDACTED] on 6/23/14:

Please send this to SIU per [REDACTED] [REDACTED] An email from [REDACTED] will be sent to [REDACTED] about this decision. I thanks.

Resubmitted to SIU per recon request.

SIU - P1 - Child Death

[REDACTED] TC, on 6/23/14 @ 3:56pm



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

**Participant(s)**

**Name:** [REDACTED]  
Gender: Male                      Date of Birth: [REDACTED]                      Participant ID: [REDACTED]  
SSN:                                      Race: White                      Age: 16 Yrs  
Address: [REDACTED], [REDACTED], [REDACTED]  
Deceased Date:  
School/ ChildCare Comments:

Alleged Perpetrator: No  
DCS Foster Child: No

**External History Search Results:**

**DCS History Search Results:**

**DCS Intake Search Results:**

**Name:** [REDACTED]  
Gender: Female                      Date of Birth:                      Participant ID: [REDACTED]  
SSN:                                      Race: White                      Age:  
Address:  
Deceased Date:  
School/ ChildCare Comments:

Alleged Perpetrator: No  
DCS Foster Child: No

**External History Search Results:**

**DCS History Search Results:**

**DCS Intake Search Results:**



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

**Name:** Unknown Participant [REDACTED] Unknown

**Gender:**

**Date of Birth:**

**Partipant ID:** [REDACTED]

**SSN:**

**Race:**

**Age:**

**Address:**

**Deceased Date:**

**School/ ChildCare Comments:**

**Alleged Perpetrator:** Yes

**DCS Foster Child:** No

**External History Search Results:**

**DCS History Search Results:**

**DCS Intake Search Results:**



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

**A. Investigation**

Case Name: [REDACTED]  
 Referral Date: 06/23/2014  
 Street Address: [REDACTED]  
 City/State/Zip: [REDACTED]

Investigation ID: [REDACTED]  
 Assignment Date: 06/24/2014

**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]	Lack of Supervision	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	No	[REDACTED] 08/18/2014
2	[REDACTED]	[REDACTED]	Neglect Death	Unknown [REDACTED] Unknown	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[REDACTED] 08/18/2014

**C. Disposition Decision**

Disposition Decision: Assessed and Closed

Comments: The alleged child victim was [REDACTED], the alleged perpetrators are unknown and [REDACTED] (P-grandmother). The allegations are Neglect/ Death and LOS (lack of supervision). [REDACTED] left home and took his grandmother's vehicle w/o permission. [REDACTED] (grandmother) contacted the local authorities and reported the vehicle stolen. The police located the vehicle and there was a high speed chase. [REDACTED] was driving 70 - 80 miles per hour in a residential neighborhood. [REDACTED] lost control of his vehicle and slid off of the road into a telephone pole. [REDACTED] died on impact. There was no written plan with [REDACTED] (grandmother) to keep the keys to her vehicle locked up. [REDACTED] did have alarms on the windows and doors of her home; however [REDACTED] disabled the alarms and left the home w/o permission. This case is being submitted for closure as AUPU (allegation unsubstantiated / perpetrator un

**D. Case Workers**

Case Worker: [REDACTED] Date: 08/18/2014  
 Team Leader: [REDACTED] Date: 08/18/2014

**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:**

ACV was deceased prior to this referral being called in. ACV took his grandmother's vehicle w/o permission, the vehicle was reported stolen, ACV was involved in a high speed chase with local law enforcement. ACV lost



**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]

control of the vehicle, hit a telephone pole and died on impact.

**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 examiner stated ACV died of a Basil Skull Fracture, there were no drugs in ACV's system other than therapeutic levels of anti-depressants.

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

The alleged perpetrator is listed as unknown and therefore no one was interviewed. The maternal grandmother [REDACTED] refused to speak with this worker about the case. Local Law enforcement initially agreed to speak with the department; however after an in-house internal affairs investigation at the [REDACTED] Sheriff's Department the officers involved decided not to speak with the Department.

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

TN Hwy Patrol reconstructed the accident scene and provided this worker with a copy of their report and a reconstruction diagram. TN Hwy Patrol stated the accident was a result of the driver going excessive speeds.

**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: 08/18/2014 Contact Method:  
 Contact Time: 03:00 PM Contact Duration: Less than 01 Hour  
 Entered By: [REDACTED] Recorded For:  
 Location: 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): Case Summary  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/21/2014 10:59 AM Entered By: [REDACTED]

The case was assigned to SI (special investigator [REDACTED]) on 06/23/2014. The alleged child victim was [REDACTED] the alleged perpetrators are unknown and [REDACTED] (P-grandmother). The allegations are Neglect/ Death and LOS (lack of supervision).

DCS policy defines Neglect Death as any child death that is the result of the caretakers failure to meet childcare responsibilities. [REDACTED] left home and took his grandmother's vehicle w/o permission. [REDACTED] (grandmother) contacted the local authorities and reported the vehicle stolen. The police located the vehicle and there was a high speed chase. [REDACTED] was driving 70 - 80 miles per hour in a residential neighborhood. [REDACTED] lost control of his vehicle and slid off of the road into a telephone pole. [REDACTED] died on impact. This case is being submitted for closure as AUPU (allegation unsubstantiated / perpetrator unsubstantiated); this case was presented to the [REDACTED]. CPIT on 08/14/2014 and the team is in agreement with this classification.

DCS policy defines Lack of Supervision as a failure of a parent or caretaker, who is able to do so, to provide adequate supervision. A determination of which means the child has been placed in a situation that requires actions beyond the child's level of maturity, physical or mental ability. This includes when a caregiver is with the child but inadequately supervises because they are unable or unwilling, for instance under the influence of alcohol or drugs, is depressed, sleeps during the day or has inadequate parenting knowledge or skills. This allegation is being classified as AUPU (allegation unsubstantiated / perpetrator unsubstantiated); there was no written plan with [REDACTED] (grandmother) to keep the keys to her vehicle locked up. [REDACTED] did have alarms on the windows and doors of her home; however [REDACTED] disabled the alarms and left the home w/o permission.



**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: 08/15/2014

Contact Method:

Contact Time: 04:00 PM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/18/2014

Completed date: 08/18/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/18/2014 12:50 PM Entered By: [REDACTED]

SI [REDACTED] contacted ADA [REDACTED], Det. [REDACTED], CAC members: [REDACTED], and DCS local CPS lead investigator - [REDACTED], via e-mail to inform everyone of the final case classification.

Everyone was in agreement with this outcome.

Note: LI [REDACTED] was the DCS supervisor that attended the [REDACTED] CPIT meeting and therefore she was notified of the final classification as she signed off of the CPIT form.



**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: 08/15/2014

Contact Method:

Contact Time: 02:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/22/2014

Completed date: 08/22/2014

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: 08/22/2014 02:23 PM Entered By: [REDACTED]

SI [REDACTED] staffed case with LI [REDACTED] All investigative tasks have been completed. CPIT met yesterday and wanted the classification AUPU. SI needs to finish dictation and submit for closure.



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

Case Id: [REDACTED]  
Case Status: Close

Case Name: [REDACTED]  
Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED] Status: Completed  
Contact Date: 08/15/2014 Contact Method:  
Contact Time: 12:30 PM Contact Duration: Less than 15  
Entered By: [REDACTED] Recorded For:  
Location: Created Date: 08/18/2014  
Completed date: 08/18/2014 Completed By: [REDACTED]  
Purpose(s): Permanency, Safety - Child/Community, Service Planning, Well Being  
Contact Type(s): Notation  
Contact Sub Type:

**Children Concerning**

**Participant(s)**

**Narrative Details**

Narrative Type: Original Entry Date/Time: 08/18/2014 12:45 PM Entered By: [REDACTED]

LI [REDACTED] advised this case and the CPIT team disagreement was discussed with IC [REDACTED] and it was decided that the Department would change their recommended classification from unable to complete to AUPU (allegation unsubstantiated / perpetrator unsubstantiated). SI [REDACTED] agreed to contact the members of the CPIT team to let them know.



**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:

Contact Time: 03:30 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/18/2014

Completed date: 08/18/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/18/2014 12:40 PM Entered By: [REDACTED]

SI [REDACTED] contacted LI [REDACTED] and advised of the CPIT disagreement. LI [REDACTED] advised she would discuss this case with IC [REDACTED] for further direction.



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

Case Id: [REDACTED]  
 Case Status: Close

Case Name: [REDACTED]  
 Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED] Status: Completed  
 Contact Date: 08/14/2014 Contact Method: Face To Face  
 Contact Time: 01:00 PM Contact Duration: Less than 45  
 Entered By: [REDACTED] Recorded For:  
 Location: Other Community Site Created Date: 08/18/2014  
 Completed date: 08/18/2014 Completed By: [REDACTED]  
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being  
 Contact Type(s): CPIT (Child Protective Investigative Team)  
 Contact Sub Type:

**Children Concerning**

**Participant(s)**

**Narrative Details**

Narrative Type: Original Entry Date/Time: 08/18/2014 12:29 PM Entered By: [REDACTED]

This case was presented to the [REDACTED] CPIT team. SI briefed the team on the investigative findings of this case and advised the caretaker ([REDACTED]) refused to speak with SI and stated she planned to sue several agencies. SI advised that SI was unable to view the dash cam, and the officers were not able to be interviewed due to an internal affairs investigation via [REDACTED] Sheriff's Department.

ADA [REDACTED] stated the officers could not be interviewed due to the Garrity Law. (Garrity rights protect a police officer from incriminating himself. An officer being questioned concerning actions that might lead to a criminal prosecution can invoke these rights. Once he does so, whatever he says will be used only for an internal investigation or administrative purposes, not for prosecution.) ADA [REDACTED] went on to say she does not feel the officers involved did anything wrong as they were 1) trying to retrieve a stolen vehicle and 2) trying to protect the citizens of [REDACTED] due to the rate of speed [REDACTED] was driving through a residential area.

SI advised the classification per LI [REDACTED] and IC [REDACTED] was Unable to Complete. The CPIT team disagreed with this classification and stated they felt like this case should be classified as AUPU (allegation unsubstantiated / perpetrator unsubstantiated) as this was a tragic accident.

SI agreed to take the teams concerns back to LI and IC.



**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:

Contact Time: 11:00 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/18/2014

Completed date: 08/18/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 08/18/2014 12:36 PM      Entered By: [REDACTED]

This case was discussed with LI [REDACTED] and IC [REDACTED] for classification. Due to SI [REDACTED] not being able to interview law enforcement b/c of an internal affairs investigation via [REDACTED] Sheriff's Department ([REDACTED] TN), and due to the [REDACTED] (caretaker / grandmother) refusing to speak with SI [REDACTED] it was decided this case should be classified as unable to complete.



**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:	08/07/2014	Contact Method:	Correspondence
Contact Time:	01:30 PM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	08/18/2014
Completed date:	08/18/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Collateral Contact		
Contact Sub Type:			

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

Narrative Type: Original      Entry Date/Time: 08/18/2014 12:14 PM      Entered By: [REDACTED]

SI [REDACTED] received a copy of the accident report from TN Highway Patrol. The report has been uploaded into T-Facts, the report states the following:

Vehicle 1, a reported stolen vehicle was unlawfully failing to stop for the [REDACTED] Sheriff's Office while traveling southbound on [REDACTED] just north of [REDACTED]. Vehicle 1 crossed the center line and ran off the roadway to the left. Vehicle 1 struck a ditch and a utility pole. Pole # [REDACTED]. Vehicle 1 came to rest after impact with the utility pole facing north off the roadway to the left.



**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:	08/07/2014	Contact Method:	Correspondence
Contact Time:	01:05 PM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	08/18/2014
Completed date:	08/18/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Collateral Contact		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 08/18/2014 12:02 PM Entered By: [REDACTED]

SI [REDACTED] received a copy of the Autopsy Report via e-mail from [REDACTED] Dept. of Childrens Services Nursing Director.

The report has been uploaded into T-Facts.

The report stated the following:

Cause of Death Blunt force head injury, motor vehicle collision.

Pathological Diagnosis: Blunt force head injury: Basilar skull fracture, hinge-ring type, brain laceration Multipliable abrasions, Blunt force torso injury: fracture of sternum Multipliable abrasions, contusions, and dicing injuries, pattern abraded contusions with seatbelt and shoulder harness, Blunt force extremity injury multipliable abrasions, contusions, incised wounds, and dicing injuries.

Toxicology:

[REDACTED] was negative for all illegal drugs. [REDACTED] was positive for Antidepressants, Anticonvulsants, and Oxcarbazepine - all medications were in the therapeutic range. (This report has been uploaded into T-Facts).



**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: 07/15/2014

Contact Method: Phone Call

Contact Time: 11:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/18/2014

Completed date: 08/18/2014

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 08/18/2014 11:37 AM      Entered By: [REDACTED]

SI contacted Det. [REDACTED] / [REDACTED] Internal Affairs Division and requested permission to speak with the officers involved in this case. Det. [REDACTED] advised the internal affairs investigation was not completed at this time and he could not grant pernicious 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: 07/14/2014 Contact Method: Phone Call  
 Contact Time: 01:00 PM Contact Duration: Less than 15  
 Entered By: [REDACTED] Recorded For:  
 Location: Created Date: 08/18/2014  
 Completed date: 08/18/2014 Completed By: [REDACTED]  
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being  
 Contact Type(s): Collateral Contact  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/18/2014 01:02 PM Entered By: [REDACTED]

SI [REDACTED] contacted [REDACTED]. [REDACTED] stated her son is good friends with [REDACTED] spends a lot of time at her home. [REDACTED] stated when she woke up on 6/23/14 around 7:45a.m. [REDACTED] stated she noticed [REDACTED] was at her home. She stated she did not think anything about it b/c sometimes he comes over late at night or early in the morning. [REDACTED] stated she saw [REDACTED] vehicle in her drive way and she went to wake [REDACTED] up [REDACTED] stated she told [REDACTED] that he needed to take the car home and then he could come back over or she would go and get him later. [REDACTED] said [REDACTED] got up and said he was going home.

[REDACTED] stated she heard the police were at the [REDACTED] home taking information from [REDACTED] as she ([REDACTED]) had reported her vehicle stolen. [REDACTED] stated when [REDACTED] pulled in the driveway he got upset and immediately pulled out and started driving down the street really fast and the police chased him, and [REDACTED] wrecked the car. [REDACTED] added that [REDACTED] told her that she ([REDACTED]) called 911 as she was following the police car that was chasing [REDACTED] and reported to the 911 operator that the police needed to stop chasing [REDACTED] that he was only running b/c he was scared.

[REDACTED] stated [REDACTED] has been through a lot over the past couple of years and he has made some really bad decisions but he meant well. [REDACTED] stated [REDACTED] loved [REDACTED] very much and this situation is very sad and she hopes [REDACTED] can come to some type of closure. [REDACTED] stated that was all the information she 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: 07/07/2014

Contact Method: Phone Call

Contact Time: 01:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/14/2014

Completed date: 08/14/2014

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/14/2014 03:38 PM Entered By: [REDACTED]

SI [REDACTED] contacted [REDACTED] and advised her of the investigation. [REDACTED] became upset and stated "the department has done enough to her and her family." She advised she is in the process of hiring an attorney as there are several "people / agencies" she plans to file a lawsuit against. [REDACTED] told SI to never call her home again and hung up on SI.



**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: 02:20 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/30/2014

Completed date: 06/30/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 06/30/2014 03:03 PM      Entered By: [REDACTED]

Child fatality form emailed to child death notification group. SIU IC [REDACTED] reviewed document prior to being sent. Copy will be uploaded into TFACTS.



**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: 06/25/2014 Contact Method: Attempted Face To Face  
 Contact Time: 10:00 AM Contact Duration: Less than 15  
 Entered By: [REDACTED] Recorded For:  
 Location: Family Home Created Date: 08/14/2014  
 Completed date: 08/14/2014 Completed By: [REDACTED]  
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being  
 Contact Type(s): Parent/Caretaker Interview  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/14/2014 03:29 PM Entered By: [REDACTED]  
 SI [REDACTED] went to the [REDACTED] home and no one was there. SI left a note requesting [REDACTED] to contact SI regarding this investigation.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 06/25/2014

Contact Method: Phone Call

Contact Time: 09:45 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/25/2014

Completed date: 06/25/2014

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: 06/25/2014 08:58 AM      Entered By: [REDACTED]

6/25/14 9:45 am LI [REDACTED] received a call Chief [REDACTED] Sheriff's Dept. He stated that he has spoken with his Sheriff and the District Attorney regarding our request to interview the deputies involved in the chase. He stated that there is an internal investigation going on right now and he will not allow us to speak to them until it is over which could take anywhere from one week to several weeks to complete. He stated that once they are done with their investigation they will hand over all statements and things that they gather. He said to follow up with Capt. [REDACTED] ( [REDACTED] ) next week to get the status of their IA investigation.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 06/24/2014

Contact Method: Phone Call

Contact Time: 03:36 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/24/2014

Completed date: 06/24/2014

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: 06/24/2014 02:51 PM Entered By: [REDACTED]

LI [REDACTED] spoke with Captain [REDACTED] Sheriff's Department. Cpt. [REDACTED] wanted to know why SIU was needing to speak to the deputies involved in yesterday's pursuit. LI explained the open investigation and he stated that he will relay the information to his chief and someone will call to arrange the interviews.



**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: 06/24/2014

Contact Method:

Contact Time: 03:35 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/24/2014

Completed date: 06/24/2014

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: 06/24/2014 02:38 PM      Entered By: [REDACTED]

LI [REDACTED] sent updated information regarding investigation to Director [REDACTED] and SIU IC [REDACTED]

LI [REDACTED] staffed the perpetrators with IC [REDACTED]. The alleged perpetrator for the neglect death will be established as unknown at this time. SI [REDACTED] needs to add the allegation of lack of supervision on the grandmother. SI also needs to obtain a copy of the Aftercare plan from the DCS FSW stating the aftercare rules.



**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: 06/24/2014

Contact Method: Phone Call

Contact Time: 02:50 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/24/2014

Completed date: 06/24/2014

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: 06/24/2014 02:26 PM Entered By: [REDACTED]

6/24/14 2:50 pm LI [REDACTED] contacted the [REDACTED] and spoke with Dr. [REDACTED]. Dr. [REDACTED] stated that he completed the autopsy on [REDACTED]. He stated that [REDACTED] is a white male with [REDACTED] hair. He stated that cause of death is a skull fracture which led to brain lacerations. He stated that he sent off for toxicology and that will take about 4 weeks to get back the results. A copy of the autopsy can be obtained from Dr. [REDACTED] (Medical Examiner).



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	06/24/2014	Contact Method:	Phone Call
Contact Time:	02:20 PM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	06/24/2014
Completed date:	06/24/2014	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: 06/24/2014 02:23 PM Entered By: [REDACTED]

6/24/14 2:20 pm LI [REDACTED] contacted TN Highway Patrol and was put in contact with Trooper [REDACTED] (Phone # [REDACTED]) regarding this fatality. Trooper [REDACTED] stated that it is currently an open investigation and his agency is working the crash. He stated that he was told that the child [REDACTED] took his grandmother car and hydrocodine pills and left during the night. The grandmother reported the car stole to [REDACTED] Police. He stated that he was told the grandmother was out driving with the Aunt when they passed [REDACTED] in the stolen car. They called the police and [REDACTED] Sheriff's Department began pursuit. [REDACTED] would not pull over with the lights and sirens. [REDACTED] was going 50 mph. The [REDACTED] Sheriff's Dept. put another deputy out who was going to lay out spike strips but when [REDACTED] saw that deputy he "gunned it" and was going 80 mph. [REDACTED] crashed the vehicle and hit a tree. According the crash scene investigation he was going 50-60 mph at the time of the impact. [REDACTED] was entrapped in the car and when emergency personnel were able to get him out he was deceased. The pursuit lasted about 5 minutes. Trooper [REDACTED] stated that he has not seen the dash cam video from the deputies car. There was no damage to the deputies car and he stated that the deputy never hit the car that [REDACTED] was driving. The [REDACTED] Medical Examiner (Dr. [REDACTED]) sent [REDACTED] body to the [REDACTED] for autopsy. The child was not taken to the hospital because he could not be saved. He stated that the incident number is [REDACTED] Trooper [REDACTED] Badge # [REDACTED] completed the report.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 06/24/2014

Contact Method: Face To Face

Contact Time: 02:20 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 06/25/2014

Completed date: 06/25/2014

Completed By: [REDACTED]

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

Contact Type(s): Initial ACV Face To Face

Contact Sub Type:

**Children Concerning**

[REDACTED]

**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 06/25/2014 09:20 AM Entered By: [REDACTED]

6/24/14 2:20 pm The initial ACV interview was able to be completed due to the ACV passing away on 6/23/14 and being taken for autopsy prior to SIU receiving the referral. Response was met by CPIT being convened with TN Highway Patrol Trooper [REDACTED]

Narrative Type: Addendum 1 Entry Date/Time: 08/21/2014 01:53 PM Entered By: [REDACTED]

Correction: The ACV interview was unable to be completed due to him passing away.



**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: 06/24/2014 Contact Method: Correspondence  
 Contact Time: 02:00 PM Contact Duration: Less than 30  
 Entered By: [REDACTED] Recorded For:  
 Location: Created Date: 06/24/2014  
 Completed date: 06/24/2014 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: 06/24/2014 04:41 PM Entered By: [REDACTED]

SI received a follow up e-mail from JJ team leader [REDACTED] [REDACTED] TL [REDACTED] stated she spoke with [REDACTED] this morning and [REDACTED] did call the police to report her vehicle stolen; however it is unclear at this time of [REDACTED] or [REDACTED] was dispatched to the home. Per [REDACTED] while the police were at her home taking the information for the report [REDACTED] drove by and when he saw the police car in the driveway he kept driving and actually stated to speed up. The responding officer jumped into his vehicle and started to chase after [REDACTED]

TL [REDACTED] confirmed [REDACTED] did go to the home three times per week and there were window/door alarms installed in the home as well as lock box for medications and vehicle keys. [REDACTED] was on a 24/7 curfew (which meant he had to be with an approved adult at all times). TL [REDACTED] [REDACTED] had a lower IQ but he knew right from wrong, he also had mental health issues.



**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:	06/24/2014	Contact Method:	Phone Call
Contact Time:	11:50 AM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	06/24/2014
Completed date:	06/24/2014	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: 06/24/2014 04:41 PM Entered By: [REDACTED]

TC [REDACTED] / [REDACTED] worker

SI spoke with [REDACTED] about [REDACTED] described [REDACTED] as a difficult child to work with, she stated that he was always pushing the limits and trying to skirt the rules she advised every time he was given any leeway or his restrictions were reduced he would do something to get his restriction level bumped up again.

[REDACTED] stated she was going to the home three times per week and she was spending about 2-3 hours at the home per session. [REDACTED] stated [REDACTED] grandmother [REDACTED] often complained that he rules were too strict and he had nothing to do or look forward too and that is why she thought acted out all the time. [REDACTED] stated due to an incident on 05/28/14 when [REDACTED] left the home w/o permission and stole a debit card from a family member it was decided by the child and family team that alarms would be put on all of the windows and doors leading o outside. [REDACTED] stated [REDACTED] made the statement to [REDACTED] see now I am in jail too. [REDACTED] stated [REDACTED] frequently covered for her grandson in order to keep him out of trouble. In January (2014) [REDACTED] stole [REDACTED] vehicle in order to go to a friends home where he got drunk and then proceeded to drive her vehicle up and down the street blowing the horn and squealing the tires. Per [REDACTED] a neighbor called LE however upon their arrival [REDACTED] did not want to file a report.

[REDACTED] stated she was informed that [REDACTED] did file a report yesterday morning that she stated she went to bed on 06/23/14 at 1:30a.m. & when she woke up at 8:00 a.m. [REDACTED] was not home and the vehicle was missing. [REDACTED] stated she has not been able to verify if a report has been made at this time. [REDACTED] stated she was at the home on Thursday 06/19/14 and she checked to ensure that the alarms on the windows and doors were working properly, and they were. She stated [REDACTED] (grandmother) reported to her that [REDACTED] had disabled them after she left the home on 06/19/14.

SI inquired about the missing medication and [REDACTED] stated [REDACTED] was aware that all medication was to be kept in a lock box as well as the keys to any and all vehicles that were parked in her driveway. [REDACTED] stated [REDACTED] walks with a cane and she has chronic hip and back pain, and she always kept a few (no more than four) hydrocodone pills in her purse in case she needed them when she was out. It was reported that [REDACTED] also kept a spare key to her vehicle in her wallet and that [REDACTED] knew this and when got into her wallet to take cash (approx. \$300.00) he also took the key to her vehicle and left the home. SI asked [REDACTED] if [REDACTED] ever signed a plan stating she would keep all medication and vehicle keys locked up and [REDACTED] stated she thought it was a written



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

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Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

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plan and she would get back with SI as she was not going to be in the office today.

[REDACTED] stated to her knowledge [REDACTED] was wearing a seat belt; however he was driving in a residential area going about 75-80 mph and when he approached a sharp curve in the road he slid into the ditch hitting a telephone pole. Per the family [REDACTED] was dead on impact.

It is unclear at this time if there is going to be an autopsy; [REDACTED] stated she thought there would be; however it was later reported that [REDACTED] stated there was no use b/ the crash is what killed her grandson. [REDACTED] stated yesterday (06/23/14) [REDACTED] was attempting to point blame on DCS and [REDACTED] stating [REDACTED] was depressed b/c he was not allowed to go anywhere or do anything and if everyone could have been more lenient with him then he would not have taken he car and had the wreck.



**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:	06/24/2014	Contact Method:	Phone Call
Contact Time:	11:15 AM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	06/24/2014
Completed date:	06/24/2014	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: 06/24/2014 04:39 PM      Entered By: [REDACTED]

11:15a.m. - TC

SI spoke with JJ (juvenile justice) team leader [REDACTED] as the JJ worker [REDACTED] is currently on FMLA. TL [REDACTED] stated [REDACTED] has been involved with the [REDACTED] Juvenile court System since he was 11-years old and he has had various services in and out of his home. TL [REDACTED] stated [REDACTED] has been under the care of juvenile justice since 11/27/2012, when he was placed in DCS Custody via a bench warrant for disorderly conduct and simple assault.

TL [REDACTED] stated [REDACTED] has been in several residential programs to address mental health needs as well as substance abuse issues. [REDACTED] has been home on after care since November and [REDACTED] was placed in the home to monitor his behaviors. Due to an incident that occurred on 05/28/14 where [REDACTED] stole a debit card from a family member and purchased a cell phone the JJ worker and the YV worker decided there needed to be alarms on all the windows and doors in order for [REDACTED] to be aware if [REDACTED] was leaving the home as he was on house arrest and [REDACTED] was supposed to be monitoring him 24/7.

[REDACTED] had a court review on 06/05/14 and it was decided by the court and the family team that he would be given another chance. [REDACTED] was drug screen in April 2014 and failed for benzodiazepines, he was referred for an A&D assessment however it is unclear at this time if the assessment has been completed and what the recommendations were if any.



**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: 06/24/2014

Contact Method: Phone Call

Contact Time: 10:50 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/24/2014

Completed date: 06/24/2014

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: 06/24/2014 04:37 PM Entered By: [REDACTED]

10:50 a.m. TC [REDACTED]

SI spoke with [REDACTED] (Program Assistant Director). [REDACTED] stated she had limited information about the incident that occurred yesterday (06/23/14) involving [REDACTED] and advised she would forward SIs information to the worker, [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: 06/24/2014

Contact Method:

Contact Time: 10:30 AM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/24/2014

Completed date: 06/24/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 06/24/2014 04:36 PM      Entered By: [REDACTED]

10:30a.m.

Juvenile Judge, [REDACTED] was notified of this SIU (special investigation unit) referrals via fax on 06/24/14. (Note: this is per this counties regional protocol).

10:45a.m.

[REDACTED] ADA was notified of a severe abuse case / neglect death via fax, per regional protocol.



**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: 06/24/2014

Contact Method: Phone Call

Contact Time: 10:00 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/24/2014

Completed date: 06/24/2014

Completed By: [REDACTED]

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

Contact Type(s): Referent Interview

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 06/24/2014 04:35 PM      Entered By: [REDACTED]

The referent was contacted on 06/24/14, and a letter was mailed for their records. The referent had no new information to report; however S was advised there was a brief news report on [REDACTED] out of [REDACTED] TN.



**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: 06/24/2014 Contact Method:  
 Contact Time: 09:30 AM Contact Duration: Less than 02 Hour  
 Entered By: [REDACTED] Recorded For:  
 Location: Created Date: 06/24/2014  
 Completed date: 06/24/2014 Completed By: [REDACTED]  
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being  
 Contact Type(s): Case Summary  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/24/2014 04:30 PM Entered By: [REDACTED]

## Case Summary:

DCS Child Abuse Hotline received the following referral on 06/23/2014 at 2:12p.m. [REDACTED] The case was assigned to SIU Investigator, [REDACTED] on 06/23/2014 at 6:00p.m. [REDACTED] as a priority 1.

Note all future case recordings will be in [REDACTED]

Intake ID: # [REDACTED]  
 Investigation ID: # [REDACTED]  
 ACV: [REDACTED]  
 DOB: [REDACTED]  
 Adjudication: JJ-Juvenile Justice

Prior SIU referrals: 0  
 County of Residence: [REDACTED]

Alleged Perpetrator:  
 Relationship to ACV: (parent, resource parent, teacher, etc)  
 Number of Prior SIU Referrals: (number)  
 County of Incident:

Placement: [REDACTED] (P-grandmother)- juvenile justice aftercare

Place of incident: [REDACTED]

Allegations: NGD- (neglect death)

\*\*\*Referrals are entered verbatim via TFACTS with no spelling or grammatical corrections made to the information\*\*\*

Reporter States: Reporter states:

[REDACTED] (16) resides with his grandmother, [REDACTED]



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

[REDACTED] Intercepted has been working with the family since [REDACTED] exited DCS custody in November 2013. [REDACTED] is the [REDACTED] worker. The family currently has an open JJ aftercare case with DCS; [REDACTED] is the DCS case manager.

Today at 9:30am the [REDACTED] worker called the DCS worker and reported that [REDACTED] stole his grandmothers vehicle sometime last night. It was reported that [REDACTED] stole three hundred dollars and three or four Hydrocodone pills from his grandmothers purse. It was reported that the grandmother contacted the police when she found out that her vehicle was taken.

At 11:50am the [REDACTED] worker called the DCS worker and stated that [REDACTED] was in a car wreck. It was reported that [REDACTED] hit a telephone pole and had to be cut out of the car.

At 1:42pm the [REDACTED] worker called the DCS worker and informed the worker that [REDACTED] had passed away. The [REDACTED] worker stated that she received the information of the childs death from the paternal great-aunt [REDACTED]

The court liaison was contacted and it was reported that there was a police chase somewhere around [REDACTED] in [REDACTED], TN. The reporter has not received the actual police report at this time. No other information is known at this time.

Notice of case assignment sent to appropriate parties by LI (lead investigator) [REDACTED]

SI [REDACTED] conducted a TFACTS History Search on [REDACTED] ACV & the following history was located:

CPS Investigation: # [REDACTED] (07/15/2013)

ACV: [REDACTED]

AP: [REDACTED] (mother)

Allegations: SEA (sexual abuse)

Classification: Allegation Substantiated / Perpetrator Substantiated

CPS Assessment: # [REDACTED] (02/20/2009)

ACV: [REDACTED]

AP: [REDACTED] (P-grandparents)

Allegations: PHA (physical abuse)

Classification: Services Required

CPS Assessment: # [REDACTED] (12/07/2006)

ACV: [REDACTED]

AP: [REDACTED] (P-grandmother)

Allegations: PHA (physical abuse)

Classification: Assessment

CPS Investigation: # [REDACTED] (07/30/1999)

ACV: [REDACTED]

AP: [REDACTED] (parents)

Allegations: MDM (medical maltreatment)

Classification: AUPU (Allegation Unsubstantiated / Perpetrator Unsubstantiated)

Previous SIU history:

There is no previous SIU history regarding this ACV and the Department.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Note: SI [REDACTED] was given permission by LI [REDACTED] and IC [REDACTED] to establish the AP regarding neglect / death as unknown, and was advised to add the allegation of LOS with the AP being [REDACTED] (P-g-mother) as the AP.

SI [REDACTED] conducted a TFACTS History Search on [REDACTED] AP & there is no history involving this AP other than was list already listed for the ACV.

There is no previous SIU history involving this AP.

## ACV Demographics:

[REDACTED] lived in the home with his P-grandmother, [REDACTED]

Name: [REDACTED] / paternal grandmother

DOB: [REDACTED]

Address: [REDACTED], [REDACTED], [REDACTED]

Phone: [REDACTED]

Narrative Type: Addendum 1    Entry Date/Time: 08/14/2014 03:27 PM    Entered By: [REDACTED]

[REDACTED] was on Juvenile Stated Probation, after care program. Release of Information/HIPAA, Native American Heritage Veto Verification, Notice of Equal Access to Services, and Acknowledgement of Receipt of Clients Rights Handbook should be in the FSW file. Copies were not obtained for the SIU 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: 06/23/2014

Contact Method:

Contact Time: 07:30 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/24/2014

Completed date: 06/24/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 06/24/2014 04:33 PM      Entered By: [REDACTED]

SI contacted [REDACTED] 911 center to determine if a police report was made by [REDACTED] regarding the theft of her vehicle. SI was advised by dispatch that THP was handling this and SI would have to get the information from THP.



**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: 06/23/2014

Contact Method: Face To Face

Contact Time: 07:25 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 08/18/2014

Completed date: 08/18/2014

Completed By: [REDACTED]

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

Contact Type(s): Initial ACV Face To Face

Contact Sub Type:

**Children Concerning**

[REDACTED]

**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 08/18/2014 11:27 AM Entered By: [REDACTED]

The initial ACV interview was able to be completed due to the ACV passing away on 6/23/14 and being taken for autopsy prior to SIU receiving the referral. Response was met by convening CPIT with [REDACTED] Abuse Det. [REDACTED] Det. [REDACTED] advised this case was being handled by TN Highway Patrol, due to the accident involving a high speed chase.

Narrative Type: Addendum 1 Entry Date/Time: 08/21/2014 01:50 PM Entered By: [REDACTED]

This should stated that he was "unable" to be interviewed.



**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: 06/23/2014

Contact Method: Phone Call

Contact Time: 07:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/24/2014

Completed date: 06/24/2014

Completed By: [REDACTED]

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

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

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 06/24/2014 04:32 PM      Entered By: [REDACTED]

06/23/2014

7:00p.m. phone call

CPIT was convened with [REDACTED] Child Abuse Detective [REDACTED] Det. [REDACTED] advised this case was being handled by TPH (TN Highway Patrol).

7:15p.m.

SI [REDACTED] called THP dispatch line [REDACTED] and left a message with the answering service.



**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: 06/23/2014

Contact Method:

Contact Time: 06:30 PM

Contact Duration: Less than 05 Hour

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/24/2014

Completed date: 06/24/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/24/2014 04:31 PM Entered By: [REDACTED]

06/23/2014

6:30p.m. 10:30p.m.

SI [REDACTED] made several attempts to contact the [REDACTED] on call worker in order to obtain more information about this case. [REDACTED] the line was busy the entire time and SI was unable to get through.