



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

Intake

Intake ID: [REDACTED]
 Intake Taken By: [REDACTED] Intake Date/Time: 06/27/2014 07:25 AM [REDACTED]
 Track Assigned: Investigation Priority Assigned: 1
 Screened By: [REDACTED]
 Date Screened: 06/27/2014

Investigation

Investigation ID: [REDACTED]
 First County/Region: [REDACTED]
 Date/Time Assigned : 06/27/2014 09:10 AM
 First Team Leader Assigned: [REDACTED] Date/Time 06/27/2014 12:00 AM
 First Case Manager [REDACTED] Date/Time 06/27/2014 12:00 AM

Allegations

| Alleged Victim | Age | Allegation | Severe ? | Alleged Perpetrator | Relationship to Alleged Victim |
|----------------|-------------------|---------------|----------|--|--------------------------------|
| | | | CSEM ? | | |
| [REDACTED] | 2 Yrs 5 Mos (Est) | Neglect Death | Yes | Unknown Participant [REDACTED] [REDACTED] | Birth Mother |

Referent(s)

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

Referent Address: [REDACTED]

Referent Phone Number: [REDACTED]

Type of Contact: I-3 Phone

Notification: Letter

Narrative: TFACTS:

Family Case IDs: # [REDACTED]

Open Court Custody/FSS/FCIP No

Closed Court Custody No

Open CPS - No

Substantiated No

Death No

Screened out No

History (not listed above):

INV - # [REDACTED] /DEI/ 2/17/14 - Unsubstantiated



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

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

Reporter's name/relationship: [REDACTED]

Reporter states:

[REDACTED] (approximately 5-6 months) is not in DCS custody. [REDACTED] was in the custody of his mother, [REDACTED] (last name unknown) [REDACTED] is the father of the child, and it is unknown if he lived in the home with [REDACTED]. It is believed that [REDACTED] has no other children.

On 6/20/14, [REDACTED] [REDACTED] [REDACTED] were in a head on car wreck. [REDACTED] was in the back seat in a car seat, but there are concerns that he was not properly restrained, due to the severity of his injuries, which included spinal and neck injuries. It was reported that [REDACTED] was yelling "just kill me, just kill me" and later "please save my baby".

[REDACTED] was transported to [REDACTED] [REDACTED] and from there he was transported to [REDACTED] [REDACTED] [REDACTED] was on life support, and the decision was made to donate his organs. [REDACTED] died on Tuesday, 6/24/14.

It has been voiced in the community that [REDACTED] was on Subutex, and there are concerns that she was abusing the Subutex. People in the community were also saying that there are concerns that [REDACTED] may have been using other drugs, as empty pill bottles were found in the car. It is unknown if [REDACTED] has a history of drug abuse. The reporter has not seen the family's home.

It is unknown if autopsy was performed.

DCS can contact the Tennessee Highway Patrol for more information on the incident.

Note: According to TFACTS: Mother: [REDACTED] Monday (DOB: [REDACTED] Father: [REDACTED] (DOB: [REDACTED]), and child: [REDACTED] (DOB: [REDACTED]). Last known address according to TFACTS: [REDACTED] [REDACTED] but the reporter believes that the child resides in [REDACTED] [REDACTED]

Note: While the referent is DCS personnel, the referent's knowledge of this situation is not in a professional capacity. The referent was provided this information through people she knows in the community that was aware of the accident and the mother's history.

Investigative Track - P1 - Child Death
 [REDACTED] [REDACTED], on 6/27/14 @ 8:52am

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



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

Participant(s)

Name: [REDACTED]

Gender: Male

Date of Birth:

Participant ID: [REDACTED]

SSN:

Race:

Age:

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: [REDACTED]

Gender: Male

Date of Birth:

Partipant ID: [REDACTED]

SSN:

Race: White

Age: 2 Yrs 5 Mos (Est)

Address: [REDACTED]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: Unknown Participant [REDACTED]

Gender: Female

Date of Birth:

Partipant ID: [REDACTED]

SSN:

Race:

Age:

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

A. Investigation

Case Name: [REDACTED]
 Referral Date: 06/27/2014
 Street Address: [REDACTED]
 City/State/Zip: [REDACTED]

Investigation ID: [REDACTED]
 Assignment Date: 06/27/2014

B. Allegation

| # | Children's Name | DOB | Specific Allegation for Each Child | Alleged Perpetrator's Name | DOB | Classification | Severe Abuse | Classified By |
|---|-----------------|------------|------------------------------------|----------------------------|------------|--|--------------|--------------------------|
| | | SSN | | | SSN | | CSEM | |
| 1 | [REDACTED] | [REDACTED] | Neglect Death | [REDACTED] | [REDACTED] | Allegation Unsubstantiated / Perpetrator Unsubstantiated | Yes | [REDACTED] 05/13/2015 |

C. Disposition Decision

Disposition Decision: Assessed and Closed
 Comments:

D. Case Workers

Case Worker: [REDACTED] Date: 05/13/2015
 Team Leader: [REDACTED] Date: 05/13/2015

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:

Child Protective Services [REDACTED] did not make face to face contact with the child due to DCS finding out about the incident days later. The child had already died by the time a DCS referral was made. [REDACTED] was taken to [REDACTED] and then was flown to [REDACTED] where he later died.

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

[REDACTED]
 6/27/14
 [REDACTED] stated that the mother, [REDACTED] crossed the center line of the road while driving with the baby, [REDACTED] stated that while he was at the wreck scene that he found two empty pill bottles from last year. He stated that he can not recall what the bottles were for at this time due to not being at work. [REDACTED] stated that he did find a prescription on the mother for Suboxone. [REDACTED] stated that [REDACTED] did go to [REDACTED] to speak with the mother, [REDACTED] stated that the mother, [REDACTED] did admit to having an Opiate problem in the past and that this was why [REDACTED] was



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Case Name [REDACTED]

Investigation ID: [REDACTED]

on Suboxone. [REDACTED] stated that there had been an attempt to restrain the car seat in the car. [REDACTED] stated that the seat was rear facing. [REDACTED] stated that the car seat was "super loose". [REDACTED] stated that there were two seatbelts ran through the seat but the seat was not locked down. [REDACTED] stated that an infant seat should only move ½ in or 1 inch from side to side. [REDACTED] stated that the car seat in the mothers car was moving 3 to 4 inches to each side. [REDACTED] stated that the handle to the infant car seat was in the upright position and that it is supposed to be laid back. [REDACTED] stated again that the mother, [REDACTED] did make an attempt to put the seat in. [REDACTED] stated that the other vehicle in the accident belonged to [REDACTED]. [REDACTED] stated that [REDACTED] works at [REDACTED]. [REDACTED] stated that [REDACTED] told THP that he saw the mother coming around the curve and he pulled over off the side of the road almost to a complete stop to try and avoid getting hit. [REDACTED] stated that the mother never hit her breaks and never slowed down. [REDACTED] stated that [REDACTED] was driving a truck and the mother, [REDACTED] was driving a [REDACTED] car. [REDACTED] stated that when [REDACTED] hit [REDACTED] that it knocked his vehicle back in the ditch approximately 16 inches. [REDACTED] stated that there are no tire marks from the mother, [REDACTED] car. [REDACTED] stated that from a witnesses statement that the mother, [REDACTED] gets out of the car and runs back to the side of the car that the baby is on. [REDACTED] stated that witnesses informed them that the mother, [REDACTED] grabbed the baby out of the car seat and was screaming, "help my baby, help my baby". [REDACTED] stated that [REDACTED] grabbed the baby and put the baby in the back seat of his truck and started performing CPR on the infant. [REDACTED] stated that [REDACTED] is involved in this accident. [REDACTED] stated that the [REDACTED] is [REDACTED]. [REDACTED] stated that there is a preliminary report but there will not be a final report for a while. [REDACTED] stated that they are waiting on the Toxicology screen from the mother, [REDACTED] to come back before they move any further.

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

[REDACTED]
3/23/2015 @ 10:00 a.m.

Child Protective Services [REDACTED] met face to face with [REDACTED] on this date at the [REDACTED] DCS office. [REDACTED] stated that on the day of her accident that she and her father had taken [REDACTED] to his WIC appointment at the health department. [REDACTED] stated that she took her father back to his truck at [REDACTED]. [REDACTED] stated that she took her dosage of Subutex at that time after she dropped her father off. [REDACTED] stated that the medication has never made her sleepy. [REDACTED] stated that she had [REDACTED] double strapped in the back seat. [REDACTED] stated that they always double strapped him in the back seat because they felt that it was safer. [REDACTED] stated that she was driving down the road. [REDACTED] stated that the next thing that she remembers is after she hit the truck. [REDACTED] stated that she had to crawl out of the passenger seat because she could not get out her door. [REDACTED] stated that she immediately grabbed [REDACTED] out of the carseat and noticed that he was not breathing. [REDACTED] stated that she gave [REDACTED] to the man that she hit and he immediately layed [REDACTED] in the backseat of her car and started CPR on him. [REDACTED] asked [REDACTED] if the man that she hit moved the car seat out of the way. [REDACTED] stated that she does not remember if he did or not. [REDACTED] stated that it is possible so that he could have more room back there when he layed [REDACTED] down. [REDACTED] stated that she did have a concussion from the accident. [REDACTED] stated that they got [REDACTED] breathing again when they got him to [REDACTED] but then he did not make it. [REDACTED] stated that she has not idea what happened. [REDACTED] stated that she was not using her phone and that law enforcement verified this because they took her phone. [REDACTED] stated that she will never be able to forgive herself for what happened. [REDACTED] stated that she has not heard from the [REDACTED]. [REDACTED] stated that she will take care of whatever she needs to deal with from them. [REDACTED] stated that when she put [REDACTED] in his car seat his seat was very secure. [REDACTED] stated that this was the whole reason why they double strapped him in so that it would be as safe as possible. [REDACTED] did inform [REDACTED] that her toxicology screen did come back and that she was in therapeutic range for her Subutex. [REDACTED] stated that she knew that she would be because she only took it like she was supposed too. [REDACTED] appeared very remorseful in what happened. [REDACTED] did not appear to be under the influence at all and appeared to be extremely appropriate. [REDACTED] will be graduating with her second certificate from beauty school. [REDACTED] stated that she is finishing up beauty school for skin this time. [REDACTED] stated that she already has her certificate to do hair. [REDACTED] was dressed very nice and presented herself very well. [REDACTED] was accompanied on this date by her mother, [REDACTED].



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

Reporter states:

[REDACTED] (approximately 5-6 months) is not in DCS custody. [REDACTED] was in the custody of his mother, [REDACTED] (last name unknown). [REDACTED] is the father of the child, and it is unknown if he lived in the home with [REDACTED]. It is believed that [REDACTED] has no other children.

On 6/20/14, [REDACTED] [REDACTED] [REDACTED] were in a head on car wreck. [REDACTED] was in the back seat in a car seat, but there are concerns that he was not properly restrained, due to the severity of his injuries, which included spinal and neck injuries. It was reported that [REDACTED] was yelling "just kill me, just kill me" and later "please save my baby".

[REDACTED] was transported to [REDACTED] [REDACTED] and from there he was transported to [REDACTED] [REDACTED] [REDACTED] was on life support, and the decision was made to donate his organs. [REDACTED] died on Tuesday, 6/24/14.

It has been voiced in the community that [REDACTED] was on Subutex, and there are concerns that she was abusing the Subutex. People in the community were also saying that there are concerns that [REDACTED] may have been using other drugs, as empty pill bottles were found in the car. It is unknown if [REDACTED] has a history of drug abuse. The reporter has not seen the family's home.

It is unknown if autopsy was performed.

DCS can contact the Tennessee Highway Patrol for more information on the incident.

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

The child is deceased.

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: | 08/12/2015 | Contact Method: | |
| Contact Time: | 01:30 PM | Contact Duration: | |
| Entered By: | [REDACTED] | Recorded For: | [REDACTED] |
| Location: | | Created Date: | 08/20/2015 |
| Completed date: | 08/20/2015 | Completed By: | [REDACTED] |
| Purpose(s): | Safety - Child/Community | | |
| Contact Type(s): | Administrative Review | | |
| Contact Sub Type: | | | |

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

Narrative Type: Original Entry Date/Time: 08/20/2015 02:05 PM Entered By: [REDACTED]
 This case has been reviewed by [REDACTED] and has been approved for closure.

Case Recording Details

| | | | |
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Tennessee Department of Children's Services
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Case Id: [REDACTED]

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Case Id: [REDACTED]

Case Name | [REDACTED]

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Organization | [REDACTED]

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Case Id: [REDACTED]

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Case Status: Close

Organization: [REDACTED]

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Contact Date: 08/12/2015

Contact Method:

Contact Time: 01:30 PM

Contact Duration:

Entered By: [REDACTED]

Recorded For: [REDACTED]

Location:

Created Date: 08/20/2015

Completed date: 08/20/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/20/2015 02:05 PM Entered By: [REDACTED]

This case has been reviewed by [REDACTED] and has been approved for closure.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed

Contact Date: 08/10/2015 Contact Method:

Contact Time: 04:10 PM Contact Duration:

Entered By: [REDACTED] Recorded For:

Location: Created Date: 08/10/2015

Completed date: 08/10/2015 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: 08/10/2015 03:15 PM Entered By: [REDACTED]

This case has been reviewed and approved for closure. Notice of the classification decision to the [REDACTED] Juvenile Court Judge will be provided by [REDACTED]. Notification of the classification to the district attorney will be provided by [REDACTED] when applicable. Notice of the classification to the DCS Legal Attorney will be provided by [REDACTED]. All the appropriate paperwork has been reviewed and signed if applicable by [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: 08/10/2015 Contact Method:

Contact Time: 02:05 PM Contact Duration:

Entered By: [REDACTED] Recorded For:

Location: Created Date: 08/10/2015

Completed date: 08/11/2015 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: 08/10/2015 01:06 PM Entered By: [REDACTED]

Closing Case Summary

Child Protective Services [REDACTED] [REDACTED] [REDACTED] received a Priority 1 referral on 6/27/2014 at 8:25 a.m. with the allegation of Neglect Death on [REDACTED]. On 6/20/2014, [REDACTED] and his mother [REDACTED] were involved in a head on collision. [REDACTED] was immediately taken to [REDACTED] and was then airlifted to [REDACTED] where he was pronounced dead on 6/20/2014. The Tennessee Highway Patrol is over the investigation. [REDACTED] is the investigator. The alleged perpetrator is the mother, [REDACTED]. [REDACTED] spoke with [REDACTED] about the investigation. [REDACTED] reported that the mother had just taken her prescribed Subutex before the accident occurred. [REDACTED] stated that a toxicology on the mother is pending with the Tennessee Bureau of Investigation. The following is DCS policy regarding Child Death:

E. Child Death/Near Death 1. Child death:

Child death is defined as:

- a) Any child death caused by abuse or neglect.
- b) Any unexplained death of a child when the cause of death is unknown or pending an autopsy report.
- c) Any child death caused by abuse or neglect resulting from the parent or caretaker's failure to stop another person's direct action that resulted in the death of the child. Child deaths are always treated as severe abuse.

2. A near death, per Tennessee Code Annotated (TCA) 375-5-107(c)(4) is defined as a serious or critical medical condition resulting from abuse, neglect or child sexual abuse, as reported by a physician who has examined the child subsequent to the abuse or neglect.

NOTE: When an initial referral or a referral on an open case contains information that suggests the child is in a serious or critical medical condition as a result of the allegation(s) or has been determined to meet the criteria for an allegation of near death as defined above, the Child Abuse Hotline will select Preliminary Near Death (PND) Indicator in TFACTS on the participants tab on a new intake or the investigative persons tab on an active case. The information does not have to come from a physician.

NOTE: Preliminary near deaths are always treated as severe child abuse.

Child Protective Investigation Team (CPIT) was convened on 6/28/2014 in [REDACTED]. There was a CPIT meeting on 3/27/2015 in [REDACTED]. It was determined during this meeting that [REDACTED] would be Unsubstantiated for the allegation due to her toxicology screen coming back within normal limits.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

[REDACTED] again spoke with [REDACTED] who reported that he had received the toxicology report from the Tennessee Bureau of Investigation and that [REDACTED] was within normal limits for the Subutex. [REDACTED] stated that he is still unsure at this time if there will be charges against [REDACTED]. There is no evidence at this time to substantiate [REDACTED] for Neglect Death. There was a concern about how the car seat was strapped in the car. Mother reported that they double strap the car seat for extra safety. [REDACTED] stated that the car seat was very loose but according to [REDACTED] there were people in the car before the [REDACTED] got there, that could have loosened the seat. The case will be closed and classified as Unsubstantiated for the allegation of Child Abuse Death.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

| | | | |
|-------------------|--------------------------|-------------------|------------|
| Recording ID: | [REDACTED] | Status: | Completed |
| Contact Date: | 07/30/2015 | Contact Method: | |
| Contact Time: | 02:05 PM | Contact Duration: | |
| Entered By: | [REDACTED] | Recorded For: | [REDACTED] |
| Location: | | Created Date: | 08/10/2015 |
| Completed date: | 08/10/2015 | Completed By: | [REDACTED] |
| Purpose(s): | Safety - Child/Community | | |
| Contact Type(s): | Administrative Review | | |
| Contact Sub Type: | | | |

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 08/10/2015 11:03 AM Entered By: [REDACTED]
 This case has been reviewed by [REDACTED] and feedback has been given to the team via email.

Case Recording Details

| | | | |
|-------------------|--------------------------|-------------------|------------|
| Recording ID: | [REDACTED] | Status: | Completed |
| Contact Date: | 07/30/2015 | Contact Method: | |
| Contact Time: | 02:05 PM | Contact Duration: | |
| Entered By: | [REDACTED] | Recorded For: | [REDACTED] |
| Location: | | Created Date: | 08/10/2015 |
| Completed date: | 08/10/2015 | Completed By: | [REDACTED] |
| Purpose(s): | Safety - Child/Community | | |
| Contact Type(s): | Administrative Review | | |
| Contact Sub Type: | | | |

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 08/10/2015 11:03 AM Entered By: [REDACTED]
 This case has been reviewed by [REDACTED] and feedback has been given to the team via email.



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: | 07/30/2015 | Contact Method: | |
| Contact Time: | 02:05 PM | Contact Duration: | |
| Entered By: | [REDACTED] | Recorded For: | [REDACTED] |
| Location: | | Created Date: | 08/10/2015 |
| Completed date: | 08/10/2015 | Completed By: | [REDACTED] |
| Purpose(s): | Safety - Child/Community | | |
| Contact Type(s): | Administrative Review | | |
| Contact Sub Type: | | | |

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

Narrative Type: Original Entry Date/Time: 08/10/2015 11:03 AM Entered By: [REDACTED]
 This case has been reviewed by [REDACTED] and feedback has been given to the team via email.

Case Recording Details

| | | | |
|-------------------|--------------------------|-------------------|------------|
| Recording ID: | [REDACTED] | Status: | Completed |
| Contact Date: | 07/30/2015 | Contact Method: | |
| Contact Time: | 02:05 PM | Contact Duration: | |
| Entered By: | [REDACTED] | Recorded For: | [REDACTED] |
| Location: | | Created Date: | 08/10/2015 |
| Completed date: | 08/10/2015 | Completed By: | [REDACTED] |
| Purpose(s): | Safety - Child/Community | | |
| Contact Type(s): | Administrative Review | | |
| Contact Sub Type: | | | |

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

Narrative Type: Original Entry Date/Time: 08/10/2015 11:03 AM Entered By: [REDACTED]
 This case has been reviewed by [REDACTED] and feedback has been given to the team via email.



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: | 07/30/2015 | Contact Method: | |
| Contact Time: | 02:05 PM | Contact Duration: | |
| Entered By: | [REDACTED] | Recorded For: | [REDACTED] |
| Location: | | Created Date: | 08/10/2015 |
| Completed date: | 08/10/2015 | Completed By: | [REDACTED] |
| Purpose(s): | Safety - Child/Community | | |
| Contact Type(s): | Administrative Review | | |
| Contact Sub Type: | | | |

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

Narrative Type: Original Entry Date/Time: 08/10/2015 11:03 AM Entered By: [REDACTED]
 This case has been reviewed by [REDACTED] and feedback has been given to the team via email.

Case Recording Details

| | | | |
|-------------------|--------------------------|-------------------|------------|
| Recording ID: | [REDACTED] | Status: | Completed |
| Contact Date: | 07/30/2015 | Contact Method: | |
| Contact Time: | 02:05 PM | Contact Duration: | |
| Entered By: | [REDACTED] | Recorded For: | [REDACTED] |
| Location: | | Created Date: | 08/10/2015 |
| Completed date: | 08/10/2015 | Completed By: | [REDACTED] |
| Purpose(s): | Safety - Child/Community | | |
| Contact Type(s): | Administrative Review | | |
| Contact Sub Type: | | | |

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

Narrative Type: Original Entry Date/Time: 08/10/2015 11:03 AM Entered By: [REDACTED]
 This case has been reviewed by [REDACTED] and feedback has been given to the team via email.



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: 07/30/2015 Contact Method:
 Contact Time: 02:05 PM Contact Duration:
 Entered By: [REDACTED] Recorded For: [REDACTED]
 Location: Created Date: 08/10/2015
 Completed date: 08/10/2015 Completed By: [REDACTED]
 Purpose(s): Safety - Child/Community
 Contact Type(s): Administrative Review
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/10/2015 11:03 AM Entered By: [REDACTED]
 This case has been reviewed by [REDACTED] and feedback has been given to the team via email.

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 07/30/2015 Contact Method:
 Contact Time: 02:05 PM Contact Duration:
 Entered By: [REDACTED] Recorded For: [REDACTED]
 Location: Created Date: 08/10/2015
 Completed date: 08/10/2015 Completed By: [REDACTED]
 Purpose(s): Safety - Child/Community
 Contact Type(s): Administrative Review
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/10/2015 11:03 AM Entered By: [REDACTED]
 This case has been reviewed by [REDACTED] and feedback has been given to the team via email.



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: | 07/30/2015 | Contact Method: | |
| Contact Time: | 02:05 PM | Contact Duration: | |
| Entered By: | [REDACTED] | Recorded For: | [REDACTED] |
| Location: | | Created Date: | 08/10/2015 |
| Completed date: | 08/10/2015 | Completed By: | [REDACTED] |
| Purpose(s): | Safety - Child/Community | | |
| Contact Type(s): | Administrative Review | | |
| Contact Sub Type: | | | |

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

Narrative Type: Original Entry Date/Time: 08/10/2015 11:03 AM Entered By: [REDACTED]
 This case has been reviewed by [REDACTED] and feedback has been given to the team via email.

Case Recording Details

| | | | |
|-------------------|--------------------------|-------------------|------------|
| Recording ID: | [REDACTED] | Status: | Completed |
| Contact Date: | 07/30/2015 | Contact Method: | |
| Contact Time: | 02:05 PM | Contact Duration: | |
| Entered By: | [REDACTED] | Recorded For: | [REDACTED] |
| Location: | | Created Date: | 08/10/2015 |
| Completed date: | 08/10/2015 | Completed By: | [REDACTED] |
| Purpose(s): | Safety - Child/Community | | |
| Contact Type(s): | Administrative Review | | |
| Contact Sub Type: | | | |

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

Narrative Type: Original Entry Date/Time: 08/10/2015 11:03 AM Entered By: [REDACTED]
 This case has been reviewed by [REDACTED] and feedback has been given to the team via email.



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: | 07/30/2015 | Contact Method: | |
| Contact Time: | 02:05 PM | Contact Duration: | |
| Entered By: | [REDACTED] | Recorded For: | [REDACTED] |
| Location: | | Created Date: | 08/10/2015 |
| Completed date: | 08/10/2015 | Completed By: | [REDACTED] |
| Purpose(s): | Safety - Child/Community | | |
| Contact Type(s): | Administrative Review | | |
| Contact Sub Type: | | | |

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

Narrative Type: Original Entry Date/Time: 08/10/2015 11:03 AM Entered By: [REDACTED]
 This case has been reviewed by [REDACTED] and feedback has been given to the team via email.

Case Recording Details

| | | | |
|-------------------|--------------------------|-------------------|------------|
| Recording ID: | [REDACTED] | Status: | Completed |
| Contact Date: | 07/30/2015 | Contact Method: | |
| Contact Time: | 02:05 PM | Contact Duration: | |
| Entered By: | [REDACTED] | Recorded For: | [REDACTED] |
| Location: | | Created Date: | 08/10/2015 |
| Completed date: | 08/10/2015 | Completed By: | [REDACTED] |
| Purpose(s): | Safety - Child/Community | | |
| Contact Type(s): | Administrative Review | | |
| Contact Sub Type: | | | |

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

Narrative Type: Original Entry Date/Time: 08/10/2015 11:03 AM Entered By: [REDACTED]
 This case has been reviewed by [REDACTED] and feedback has been given to the team via email.



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: | 07/30/2015 | Contact Method: | |
| Contact Time: | 02:05 PM | Contact Duration: | |
| Entered By: | [REDACTED] | Recorded For: | [REDACTED] |
| Location: | | Created Date: | 08/10/2015 |
| Completed date: | 08/10/2015 | Completed By: | [REDACTED] |
| Purpose(s): | Safety - Child/Community | | |
| Contact Type(s): | Administrative Review | | |
| Contact Sub Type: | | | |

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

Narrative Type: Original Entry Date/Time: 08/10/2015 11:03 AM Entered By: [REDACTED]
 This case has been reviewed by [REDACTED] and feedback has been given to the team via email.

Case Recording Details

| | | | |
|-------------------|--------------------------|-------------------|------------|
| Recording ID: | [REDACTED] | Status: | Completed |
| Contact Date: | 07/30/2015 | Contact Method: | |
| Contact Time: | 02:05 PM | Contact Duration: | |
| Entered By: | [REDACTED] | Recorded For: | [REDACTED] |
| Location: | | Created Date: | 08/10/2015 |
| Completed date: | 08/10/2015 | Completed By: | [REDACTED] |
| Purpose(s): | Safety - Child/Community | | |
| Contact Type(s): | Administrative Review | | |
| Contact Sub Type: | | | |

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

Narrative Type: Original Entry Date/Time: 08/10/2015 11:03 AM Entered By: [REDACTED]
 This case has been reviewed by [REDACTED] and feedback has been given to the team via email.



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: 07/30/2015

Contact Method:

Contact Time: 02:05 PM

Contact Duration:

Entered By: [REDACTED]

Recorded For: [REDACTED]

Location:

Created Date: 08/10/2015

Completed date: 08/10/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/10/2015 11:03 AM Entered By: [REDACTED]

This case has been reviewed by [REDACTED] and feedback has been given to the team via email.



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: 07/16/2015

Contact Method:

Contact Time: 09:10 AM

Contact Duration:

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/16/2015

Completed date: 07/16/2015

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: 07/16/2015 08:11 AM Entered By: [REDACTED]

All investigative tasks have been completed with this investigation and remains open to be reviewed to be approved for closure.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed

Contact Date: 06/15/2015 Contact Method:

Contact Time: 03:45 PM Contact Duration:

Entered By: [REDACTED] Recorded For:

Location: Created Date: 06/15/2015

Completed date: 06/15/2015 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: 06/15/2015 02:48 PM Entered By: [REDACTED]

[REDACTED] received medical records from the [REDACTED] [REDACTED] via mail on this date regarding the deceased child, [REDACTED]. A copy of the records are in the file and have been scanned into documents 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: 06/15/2015

Contact Method:

Contact Time: 03:00 PM

Contact Duration:

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/16/2015

Completed date: 06/16/2015

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: 06/16/2015 08:04 AM Entered By: [REDACTED]

Medical Records on [REDACTED] were received on 6/15/2015. These records were received from [REDACTED] A copy of the records will be scanned into TFACTS. The records will also be placed in the file.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed

Contact Date: 06/11/2015 Contact Method:

Contact Time: 07:48 PM Contact Duration:

Entered By: [REDACTED] Recorded For:

Location: Created Date: 06/11/2015

Completed date: 06/11/2015 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: 06/11/2015 06:49 PM Entered By [REDACTED]

All investigative tasks have been completed with this investigation and remains open to be reviewed to be approved for closure.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed

Contact Date: 06/11/2015

Contact Method:

Contact Time: 07:37 PM

Contact Duration:

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/11/2015

Completed date: 06/11/2015

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: 06/11/2015 06:39 PM Entered By: [REDACTED]

This case was assigned with the allegation of Neglect Death . The alleged perpetrator is the birth mother, [REDACTED] on her 5-month old son, [REDACTED] (deceased) on 6/27/14.

On 6/20/14 the deceased, [REDACTED] and his mother, [REDACTED] were in a car accident in [REDACTED] in [REDACTED] in which case [REDACTED] was transported to [REDACTED] and then transferred to the [REDACTED] in [REDACTED] where he was put on life support and life support was ended on 6/24/14 when he expired.

On 6/27/17 Child Protective Services [REDACTED] talked to Tennessee Highway Patrol (THP) [REDACTED] [REDACTED] stated that the mother, [REDACTED] crossed the center line of the road while driving with the baby, [REDACTED] stated that while he was at the wreck scene that he found two empty pill bottles from last year. He stated that he cannot recall what the bottles were for at this time due to not being at work. [REDACTED] stated that he did find a prescription on the mother for Suboxone. [REDACTED] stated that [REDACTED] did go to [REDACTED] to speak with the mother, [REDACTED] stated that the mother, [REDACTED] did admit to having an Opiate problem in the past and that this was why [REDACTED] was on Suboxone. [REDACTED] stated that there had been an attempt to restrain the car seat in the car. [REDACTED] stated that the seat was rear facing. [REDACTED] stated that the car seat was "super loose". [REDACTED] stated that there were two seatbelts ran through the seat but the seat was not locked down. [REDACTED] stated that an infant seat should only move 1/2 in or 1 inch from side to side. [REDACTED] stated that the car seat in the mother's car was moving 3 to 4 inches to each side. [REDACTED] stated that the handle to the infant car seat was in the upright position and that it is supposed to be laid back. [REDACTED] stated again that the mother, [REDACTED] did make an attempt to put the seat in. [REDACTED] stated that the other vehicle in the accident belonged to [REDACTED] stated that [REDACTED] works a [REDACTED] [REDACTED] stated that [REDACTED] told THP that he saw the mother coming around the curve and he pulled over off the side of the road almost to a complete stop to try and avoid getting hit. [REDACTED] stated that the mother never hit her breaks and never slowed down. [REDACTED] stated that [REDACTED] was driving a truck and the mother, [REDACTED] was driving a [REDACTED] car. [REDACTED] stated that when [REDACTED] hit [REDACTED] that it knocked his vehicle back in the ditch approximately 16 inches. [REDACTED] stated that there are no tire marks from the mother, [REDACTED] car. [REDACTED] stated that from a witnesses' statement that the mother, [REDACTED] gets out of the car and runs back to the side of the car that the baby is on. [REDACTED] stated that witnesses informed them that the mother, [REDACTED] grabbed the baby out of the car seat and was screaming, help my baby, help



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization [REDACTED]

my baby". [REDACTED] stated that [REDACTED] grabbed the baby and put the baby in the back seat of his truck and started performing CPR on the infant. [REDACTED] stated that [REDACTED] is involved in this accident. [REDACTED] stated that the [REDACTED] is [REDACTED]. [REDACTED] stated that there is a preliminary report but there will not be a final report for a while. [REDACTED] stated that they are waiting on the Toxicology screen from the mother, [REDACTED] to come back before they move any further.

On 6/27/14 CPSI [REDACTED] was unable to conduct a face to face on the alleged child victim [REDACTED] as the child was pronounced dead prior to the referral being made. The death was due to injuries sustained in a car accident while the child was with his mother. Tennessee Highway Patrol is investigating the accident and charges are pending at this time against the mother. Toxicology is pending on the mother at this time.

On 12/1/14 [REDACTED] was able to obtain a copy of the accident report and a copy of the TBI toxicology lab report on this case from [REDACTED] with the Tennessee Highway Patrol on this date via fax and email. The toxicology report showed that the mother, [REDACTED] was negative. [REDACTED] did forward this information to Child Protective Services [REDACTED] to print off for the file. [REDACTED] also stated via email that the TBI doesn't test for Suboxone and it would be left up to THP [REDACTED] and the District Attorney to determine any criminal charges.

On 2/10/15 [REDACTED] mailed the mother [REDACTED] a certified letter asking that she contact myself or Child Protective Services [REDACTED] to multiple addresses that was received on a Lexis Nexis Search.

On 3/23/15 CPSI [REDACTED] met face to face with [REDACTED] on this date at the [REDACTED] DCS office. [REDACTED] stated that on the day of her accident that she and her father had taken [REDACTED] to his WIC appointment at the health department. [REDACTED] stated that she took her father back to his truck at [REDACTED] stated that she took her dosage of Subutex at that time after she dropped her father off. [REDACTED] stated that the medication has never made her [REDACTED] stated that she had [REDACTED] double strapped in the back seat. [REDACTED] stated that they always double strapped him in the back seat because they felt that it was safer. [REDACTED] stated that she was driving down the road. [REDACTED] stated that the next thing that she remembers is after she hit the truck. [REDACTED] stated that she had to crawl out of the passenger seat because she could not get out her door. [REDACTED] stated that she immediately grabbed [REDACTED] out of the car seat and noticed that he was not breathing. [REDACTED] stated that she gave [REDACTED] to the man that she hit and he immediately layed [REDACTED] in the backseat of her car and started CPR on him. [REDACTED] asked [REDACTED] if the man that she hit moved the car seat out of the way. [REDACTED] stated that she does not remember if he did or not. [REDACTED] stated that it is possible so that he could have more room back there when he layed [REDACTED] down. [REDACTED] stated that she did have a concussion from the accident. [REDACTED] stated that they got [REDACTED] breathing again when they got him to [REDACTED] but then he did not make it. [REDACTED] stated that she has not idea what happened. [REDACTED] stated that she was not using her phone and that law enforcement verified this because they took her phone. [REDACTED] stated that she will never be able to forgive herself for what happened. [REDACTED] stated that she has not heard from the [REDACTED] stated that she will take care of whatever she needs to deal with from them. [REDACTED] stated that when she put [REDACTED] in his car seat his seat was very secure. [REDACTED] stated that this was the whole reason why they double strapped him in so that it would be as safe as possible. [REDACTED] did inform [REDACTED] that her toxicology screen did come back and that she was in therapeutic range for her Subutex. [REDACTED] stated that she knew that she would be because she only took it like she was supposed too. [REDACTED] appeared very remorseful in what happened. [REDACTED] did not appear to be under the influence at all and appeared to be extremely appropriate. [REDACTED] will be graduating with her second certificate from beauty school. [REDACTED] stated that she is finishing up beauty school for skin this time. [REDACTED] stated that she already has her certificate to do hair. [REDACTED] was dressed very nice and presented herself very well. [REDACTED] was accompanied on this date by her mother, [REDACTED]

On 4/1/15 [REDACTED] talked to [REDACTED] regarding the levels of Suboxone found in [REDACTED] system at the time of the accident and the levels were found to be within therapeutic range showing that [REDACTED] was not found to be impaired at the time of the accident.

On 4/6/15 CPSI [REDACTED] received medical records received from [REDACTED] regarding the deceased child, [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

This case has been presented to the Child Protective Investigative Team (CPIT). Based on findings by law enforcement and based on the cause of death being injuries obtained during a motor vehicle accident and due to cause of death being ruled as an accident based on the autopsy report, this case is being closed with the classification of allegation unsubstantiated/alleged 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: 05/19/2015

Contact Method:

Contact Time: 04:00 PM

Contact Duration:

Entered By: [REDACTED]

Recorded For: [REDACTED]

Location:

Created Date: 06/11/2015

Completed date: 06/11/2015

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: 06/11/2015 06:45 PM Entered By: [REDACTED]

Child Protective Services [REDACTED] [REDACTED] [REDACTED] scanned the autopsy report, medical records from [REDACTED] and the accident/toxicology report from Tennessee Highway Patrol 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: 05/13/2015

Contact Method:

Contact Time: 02:38 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 05/13/2015

Completed date: 05/13/2015

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: 05/13/2015 01:40 PM Entered By: [REDACTED]

Closing Case Summary

Child Protective Services [REDACTED] is closing this investigation as Unsubstantiated Perpetrator/Unsubstantiated Allegation. A referral was received on 6/27/2014 with the allegation of Neglect Death. The child was [REDACTED]. The alleged perpetrator and mother is [REDACTED]. There was a car accident on 6/20/2014, where the mother was driving. [REDACTED] was in the back seat of the vehicle strapped in with two seatbelts. The mother was traveling on a two lane road when she hit another vehicle head on. The other vehicle had time to see [REDACTED] coming and pull off on the side of the road. [REDACTED] hit the other vehicle after it was stopped and pulled off to the side of the road. A full investigation was completed by Tennessee Highway Patrol [REDACTED]. An autopsy was done on [REDACTED] and showed him to have a broken femur and a broken neck. [REDACTED] was taken to [REDACTED] and was then flown to [REDACTED] where he died. A toxicology screen was taken from [REDACTED] at that time and was sent off for testing. According to [REDACTED] the car seat was not strapped in the vehicle correctly. This is despite him stating that there were multiple seat belts that had the car seat strapped in. [REDACTED] reported that they always strapped [REDACTED] in the car that way because they felt that it was the safest. The toxicology screen came back showing that [REDACTED] was positive for Bupenorphine. Further testing was done to know the exact levels of the Bupenorphine in [REDACTED] system. This was recently received and came back that the Bupenorphine in [REDACTED] blood was within therapeutic range. With this received, [REDACTED] will be Unsubstantiated for Neglect Death of [REDACTED] recently got her second certificate from [REDACTED]. No charges have been filed against [REDACTED] at this time.

Narrative Type: Addendum 1 Entry Date/Time: 06/11/2015 06:41 PM Entered By: [REDACTED]

Per Workaid 1 Work Aid- 1 - CPS Categories and Definitions of Abuse/Neglect

E. Child Death/Near Death 1. Child Death

Child death is defined as:

- Any unexplained death of a child when the cause of death is unknown or pending an autopsy report.
- Any child death caused by abuse or neglect resulting from the parent or caretaker's failure to stop another person's direct action that resulted in the death of the child. Child deaths are always treated as severe child abuse



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/27/2015

Contact Method:

Contact Time: 07:55 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/27/2015

Completed date: 04/27/2015

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: 04/27/2015 07:07 PM Entered By: [REDACTED]

Medical Records and Autopsy has been obtained and will be scanned into TFACTS by Child Protective Services [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: 04/01/2015 Contact Method: Phone Call
 Contact Time: 11:00 AM Contact Duration: Less than 05
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 04/30/2015
 Completed date: 04/30/2015 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: 04/30/2015 09:28 AM Entered By: [REDACTED]

[REDACTED]
04/01/2015

Child Protective Services [REDACTED] contacted [REDACTED] on this date. [REDACTED] stated that he has not yet talked to [REDACTED] about charges on [REDACTED]. He stated that he is unsure if there will be charges against [REDACTED] at this time. He stated that with the toxicology back and good, the only thing that they would be able to charge her with is the fact that the carseat was extremely loose. He stated that he could contact [REDACTED] as soon as he heard back from the DA's office.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 03/23/2015 Contact Method: Face To Face
 Contact Time: 10:00 AM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 04/30/2015
 Completed date: 04/30/2015 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Alleged Perpetrator Interview
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/30/2015 10:08 AM Entered By: [REDACTED]

3/23/2015 @ 10:00 a.m.

Child Protective Services [REDACTED] met face to face with [REDACTED] on this date at the [REDACTED] DCS office. [REDACTED] stated that on the day of her accident that she and her father had taken [REDACTED] to his WIC appointment at the health department. [REDACTED] stated that she took her father back to his truck at [REDACTED] stated that she took her dosage of Subutex at that time after she dropped her father off. [REDACTED] stated that the medication has never made her sleepy. [REDACTED] stated that she had [REDACTED] double strapped in the back seat. [REDACTED] stated that they always double strapped him in the back seat because they felt that it was safer. [REDACTED] stated that she was driving down the road. [REDACTED] stated that the next thing that she remembers is after she hit the truck. [REDACTED] stated that she had to crawl out of the passenger seat because she could not get out her door. [REDACTED] stated that she immediately grabbed [REDACTED] out of the carseat and noticed that he was not breathing. [REDACTED] stated that she gave [REDACTED] to the man that she hit and he immediately layed [REDACTED] in the backseat of her car and started CPR on him. [REDACTED] asked [REDACTED] if the man that she hit moved the car seat out of the way. [REDACTED] stated that she does not remember if he did or not. [REDACTED] stated that it is possible so that he could have more room back there when he layed [REDACTED] down. [REDACTED] stated that she did have a concussion from the accident. [REDACTED] stated that they got [REDACTED] breathing again when they got him to [REDACTED] but then he did not make it. [REDACTED] stated that she has not idea what happened. [REDACTED] stated that she was not using her phone and that law enforcement verified this because they took her phone. [REDACTED] stated that she will never be able to forgive herself for what happened. [REDACTED] stated that she has not heard from the [REDACTED] stated that she will take care of whatever she needs to deal with from them. [REDACTED] stated that when she put [REDACTED] in his car seat his seat was very secure. [REDACTED] stated that this was the whole reason why they double strapped him in so that it would be as safe as possible. [REDACTED] did inform [REDACTED] that her toxicology screen did come back and that she was in therapeutic range for her Subutex. [REDACTED] stated that she knew that she would be because she only took it like she was supposed too. [REDACTED] appeared very remorseful in what happened. [REDACTED] did not appear to be under the influence at all and appeared to be extremely appropriate. [REDACTED] will be graduating with her second certificate from beauty school. [REDACTED] stated that she is finishing up beauty school for skin this time. [REDACTED] stated that she already has her certificate to do hair. [REDACTED] was dressed very nice and presented herself very well. [REDACTED] was accompanied on this date by her mother, [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Narrative Type: Addendum 1 Entry Date/Time: 08/11/2015 12:58 PM Entered By: [REDACTED]

[REDACTED] did complete the initial paperwork (Clients Rights Handbook, HIPAA Policy, Genogram, Releases of Information, Grievance Procedures, Native American Veto) at the [REDACTED] DCS office with the mother.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 03/19/2015 Contact Method:
 Contact Time: 03:07 PM Contact Duration: Less than 15
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 03/19/2015
 Completed date: 03/19/2015 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: 03/19/2015 02:26 PM Entered By: [REDACTED]

[REDACTED] staffed this case with Child Protective Services [REDACTED] on this date. [REDACTED] has talked to the mother, [REDACTED] after [REDACTED] received a certified letter. [REDACTED] reported to [REDACTED] that she has been attending [REDACTED] and was going to be graduating the week of 3/16/15. [REDACTED] did engage the mother and informed her why she had been trying to locate her and a couple of appointments were scheduled for [REDACTED] to meet with [REDACTED] face to face but due to weather those appointments had to be cancelled. [REDACTED] reported that she is scheduled to meet with [REDACTED] on Monday, March 23, 2015. [REDACTED] also talked with [REDACTED] on this date who informed [REDACTED] that he has the results back regarding the levels of Suboxone in [REDACTED] system at the time of the accident was within therapeutic range. [REDACTED] stated that the other issue was the car seat which could be moved 6 to 8 inches either way and stated that the middle seat belt and back passenger seat belt were both hooked to the car seat and the car seat handle was up and according to [REDACTED] the safety pamphlet states that the handle is supposed to be down. [REDACTED] stated that he is unsure whether or not criminal charges will be brought against [REDACTED] but that he would discuss this with [REDACTED] to make a decision and will notify [REDACTED]. [REDACTED] has no other children and this case is justified to remain open and overdue [REDACTED] will be presenting this case to the Child Protective Investigative Team (CPIT) on 3/27/15.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

| | | | |
|-------------------|---|-------------------|----------------|
| Recording ID: | [REDACTED] | Status: | Completed |
| Contact Date: | 02/10/2015 | Contact Method: | Correspondence |
| Contact Time: | 09:30 AM | Contact Duration: | Less than 30 |
| Entered By: | [REDACTED] | Recorded For: | |
| Location: | | Created Date: | 02/10/2015 |
| Completed date: | 02/10/2015 | Completed By: | [REDACTED] |
| Purpose(s): | Permanency,Safety - Child/Community,Service Planning,Well Being | | |
| Contact Type(s): | Alleged Perpetrator Interview,Parent/Caretaker Interview | | |
| Contact Sub Type: | | | |

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

Narrative Type: Original Entry Date/Time: 02/10/2015 09:13 AM Entered By: [REDACTED]

[REDACTED] mailed the mother, [REDACTED] a certified letter asking that she contact myself or Child Protective Services [REDACTED] on this date to following addresses that was received on a Lexis Nexis Search:

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

A copy of the letter along with the certified mail certificate is in the file.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 01/07/2015 Contact Method:
 Contact Time: 05:00 PM Contact Duration: Less than 15
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 01/10/2015
 Completed date: 01/10/2015 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: 01/10/2015 05:24 PM Entered By: [REDACTED]

[REDACTED] staffed this case with Child Protective Services [REDACTED] on this date. The final autopsy was received on this date via email and a copy is in the master file. The cause of death is cervicospinal injuries due to an automobile accident and it was also noted on the report that the car seat may have been improperly locked and secured in it's base and manner of death is found to be as a result of an accident. [REDACTED] advised [REDACTED] to conduct a home visit at each address on the diligent search report and also to mail a certified letter to each of those addresses. [REDACTED] advised that this must be completed by the close of business on 1/15/15. This case remains overdue and is justified due to the allegation being neglect death. [REDACTED] has has had difficulty in locating the mother. [REDACTED] also advised for [REDACTED] to contact [REDACTED] out of [REDACTED] who may have contact information for the maternal grandmother who may be able to provide contact information 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: 12/08/2014

Contact Method:

Contact Time: 04:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 12/09/2014

Completed date: 12/09/2014

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: 12/09/2014 02:21 PM Entered By: [REDACTED]

[REDACTED] did receive Lexus Nexus results on [REDACTED] on this date.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/01/2014

Contact Method:

Contact Time: 01:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 12/07/2014

Completed date: 12/07/2014

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: 12/07/2014 10:18 AM Entered By: [REDACTED]

[REDACTED] staffed this case with Child Protective Services [REDACTED] on this date. [REDACTED] has made several attempts to make contact with the mother and has been unsuccessful at this point in the case. According to the Office of Child Safety [REDACTED], the autopsy report on the minor child [REDACTED] is not ready as of this date. This case continues to be justified to be overdue.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

| | | | |
|-------------------|---|-------------------|----------------|
| Recording ID: | [REDACTED] | Status: | Completed |
| Contact Date: | 12/01/2014 | Contact Method: | Correspondence |
| Contact Time: | 12:36 PM | Contact Duration: | Less than 15 |
| Entered By: | [REDACTED] | Recorded For: | |
| Location: | | Created Date: | 12/07/2014 |
| Completed date: | 12/07/2014 | Completed By: | [REDACTED] |
| Purpose(s): | Permanency,Safety - Child/Community,Service Planning,Well Being | | |
| Contact Type(s): | Collateral Contact | | |
| Contact Sub Type: | | | |

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

Narrative Type: Original Entry Date/Time: 12/07/2014 10:15 AM Entered By: [REDACTED]

[REDACTED] was able to obtain a copy of the accident report and a copy of the TBI toxicology lab report on this case from [REDACTED] with the Tennessee Highway Patrol on this date via fax and email. The toxicology report showed that the mother, [REDACTED] was negative. [REDACTED] did forward this information to Child Protective Services [REDACTED] to print off for the file. [REDACTED] also stated via email that the TBI doesn't test for Suboxone and it would be left up to [REDACTED] and the District Attorney to determine any criminal charges.



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 11/13/2014 Contact Method: Attempted Phone Call
 Contact Time: 10:29 AM Contact Duration: Less than 05
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 11/13/2014
 Completed date: 11/13/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Alleged Perpetrator Interview,Parent/Caretaker Interview
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 11/13/2014 09:36 AM Entered By: [REDACTED]

[REDACTED] attempted to make contact with the mother of [REDACTED] on this date by calling her cell phone located in TFACTS under a case from January of 2014, [REDACTED] and received the message that the wireless caller wasn't receiving new calls at this time and no message could be 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: 11/13/2014

Contact Method: Correspondence

Contact Time: 10:09 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 11/13/2014

Completed date: 11/13/2014

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: 11/13/2014 09:33 AM Entered By: [REDACTED]

[REDACTED] emailed Tennessee Highway Patrol [REDACTED] on this date requesting an update on the mother, [REDACTED] toxicology report and also requested a call along with requesting a copy of the accident report and any all statements regarding this accident to be emailed or faxed to myself at the [REDACTED] DCS office.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 11/12/2014 Contact Method:
 Contact Time: 10:50 AM Contact Duration: Less than 15
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 11/12/2014
 Completed date: 11/12/2014 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: 11/12/2014 09:53 AM Entered By: [REDACTED]

This case is justified to be overdue as Child Protective Services Investigator [REDACTED] [REDACTED] is waiting on Tennessee Highway Patrol [REDACTED] [REDACTED] to provide her with a copy of the toxicology report once it has been received. [REDACTED] [REDACTED] advised [REDACTED] [REDACTED] to talk with the [REDACTED] [REDACTED] to see if the autopsy has been completed and to obtain those results as the Child Protective Investigative Team is scheduled to meet on 11/17/14.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 10/01/2014 Contact Method:
 Contact Time: 10:10 AM Contact Duration: Less than 05
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 10/01/2014
 Completed date: 10/01/2014 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: 10/01/2014 09:12 AM Entered By: [REDACTED]

[REDACTED] staffed this case with Child Protective Services [REDACTED] [REDACTED] on this date. This case is justified to be overdue as this is a child death and [REDACTED] [REDACTED] reported that she is still waiting on the report from Tennessee Highway Patrol [REDACTED] [REDACTED]. Upon receiving this report the case will be presented to the Child Protective Services Investigative Team (CPII). There are no other children in the 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: 09/17/2014 Contact Method: Attempted Face To Face
 Contact Time: 09:45 AM Contact Duration:
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 08/07/2015
 Completed date: 08/07/2015 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Alleged Perpetrator Interview
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/07/2015 09:25 AM Entered By: [REDACTED]

Child Protective Services [REDACTED] attempted a home visit on this date. There were no vehicles in the driveway at the time of this visit. [REDACTED] knocked on the door to the residence. There was no answer. There was no sound coming from inside the residence.



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: 09/09/2014 Contact Method:
 Contact Time: 07:46 PM Contact Duration: Less than 15
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 09/09/2014
 Completed date: 09/09/2014 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: 09/09/2014 06:49 PM Entered By: [REDACTED]

[REDACTED] staffed this case with [REDACTED] [REDACTED] on this date and this case is a child fatality that is justified to be overdue. [REDACTED] reported that she is waiting on the report from Tennessee Highway Patrol and toxicology report on the mother, [REDACTED] advised for [REDACTED] [REDACTED] to enter any and all dictation on this case thus far and upon obtaining the information from Tennessee Highway Patrol to present the case to the Child Protective Investigative Team (CPIT).

Narrative Type: Addendum 1 Entry Date/Time: 11/13/2014 09:21 AM Entered By: [REDACTED]

[REDACTED] reported on this date that she did make contact with Tennessee Highway Patrol [REDACTED] [REDACTED] on this date and [REDACTED] reported that he was on vacation but did report that the preliminary toxicology report showed that the mother, [REDACTED] tested positive for Suboxone and they were waiting on the complete toxicology report to show the levels of Suboxone in [REDACTED] system. [REDACTED] reported that he would provide [REDACTED] [REDACTED] with a copy of all reports once they have been received. [REDACTED] also reported that [REDACTED] had a prescription for Suboxone, that he found a bottle in her vehicle, and that [REDACTED] reported that she took a Suboxone approximately 45 minutes prior to driving the child in the vehicle.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 08/13/2014 Contact Method: Attempted Face To Face
 Contact Time: 09:00 AM Contact Duration:
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 08/07/2015
 Completed date: 08/07/2015 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Alleged Perpetrator Interview
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/07/2015 09:11 AM Entered By: [REDACTED]

Child Protective Services [REDACTED] did attempt another face to face with the mother, [REDACTED] on this date. [REDACTED] did go to the [REDACTED] address that was found in TFACTS. There was again no answer when [REDACTED] knocked on the door to the residence. There were no vehicles in the driveway 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: 07/31/2014 Contact Method: Attempted Face To Face
 Contact Time: 11:00 AM Contact Duration:
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 08/07/2015
 Completed date: 08/07/2015 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Alleged Perpetrator Interview
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/07/2015 09:08 AM Entered By: [REDACTED]

Child Protective Services [REDACTED] did attempt a home visit on this date to the home of [REDACTED]. This was the last address that was listed in TFACTS from an investigation several months ago. [REDACTED] knocked on the door to the residence. This is a single wide trailer at [REDACTED]. There was no sound coming from inside the residence. [REDACTED] did not leave a card at this time.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 06/28/2014 Contact Method: Correspondence
 Contact Time: 02:00 PM Contact Duration:
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 06/12/2015
 Completed date: 06/12/2015 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: 06/12/2015 08:33 AM Entered By: [REDACTED]

Child Protective Services [REDACTED] did convey Child Protective Investigation Team on this date by faxing the referral to the District Attorneys Office, Juvenile Court, [REDACTED] Child Advocacy Center and [REDACTED]

Narrative Type: Addendum 1 Entry Date/Time: 08/07/2015 08:50 AM Entered By: [REDACTED]

Child Protective Services [REDACTED] did speak with [REDACTED] on this date. [REDACTED] stated that he is the officer that is working the investigation along with [REDACTED] [REDACTED] stated that he will send over a copy of his report and any other information that he is able to release to [REDACTED]. [REDACTED] stated that a Toxicology was done on the mother. He stated that it would be several months before those results come back.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

| | | | |
|-------------------|-----------------------|-------------------|--------------|
| Recording ID: | [REDACTED] | Status: | Completed |
| Contact Date: | 06/27/2014 | Contact Method: | |
| Contact Time: | 10:05 AM | Contact Duration: | Less than 15 |
| Entered By: | [REDACTED] | Recorded For: | |
| Location: | | Created Date: | 06/27/2014 |
| Completed date: | 06/27/2014 | Completed By: | [REDACTED] |
| Purpose(s): | Service Planning | | |
| Contact Type(s): | Administrative Review | | |
| Contact Sub Type: | | | |

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

Narrative Type: Original Entry Date/Time: 06/27/2014 09:23 AM Entered By: [REDACTED]

6.27.2014

9:58am [REDACTED]

P1 referral received

This referral was assigned to [REDACTED]

A review of TFACTS history was checked. There is one prior case that was closed 2/17/2014 for allegations of DEI. The case was closed as AUPU. The case was worked by [REDACTED]

Case will be reviewed weekly with an update. CPSI needs to first gather information from the THP patrolman who worked the accident. [REDACTED] was updated to this referral as well.

Reporter states:

[REDACTED] (approximately 5-6 months) is not in DCS custody. [REDACTED] was in the custody of his mother, [REDACTED] (last name unknown). [REDACTED] is the father of the child, and it is unknown if he lived in the home with [REDACTED]. It is believed that [REDACTED] has no other children.

On 6/20/14, [REDACTED] and [REDACTED] were in a head on car wreck. [REDACTED] was in the back seat in a car seat, but there are concerns that he was not properly restrained, due to the severity of his injuries, which included spinal and neck injuries. It was reported that [REDACTED] was yelling "just kill me, just kill me" and later "please save my baby".

[REDACTED] was transported to [REDACTED] and from there he was transported to [REDACTED]. [REDACTED] was on life support, and the decision was made to donate his organs. [REDACTED] died on Tuesday, 6/24/14.

It has been voiced in the community that [REDACTED] was on Subutex, and there are concerns that she was abusing the Subutex. People in the community were also saying that there are concerns that [REDACTED] may have been using other drugs, as empty pill bottles were found in the car. It is unknown if [REDACTED] has a history of drug abuse. The reporter has not seen the family's home. It is unknown if autopsy was performed.

DCS can contact the Tennessee Highway Patrol for more information on the incident.

Note: According to TFACTS: Mother: [REDACTED] (DOB: [REDACTED]), Father: [REDACTED] (DOB: [REDACTED]), and child: [REDACTED] (DOB: [REDACTED]). Last known address according to TFACTS: [REDACTED] but the reporter believes that the child resides in [REDACTED].

Note: While the referent is DCS personnel, the referent's knowledge of this situation is not in a professional capacity. The referent was provided this information through people she knows in the community that was aware of the



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

accident and the mother's history.
Investigative Track - P1 - Child Death

[REDACTED] on 6/27/14 @ 8:52am

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

[REDACTED]

[REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 06/27/2014 Contact Method: Attempted Face To Face
 Contact Time: 10:00 AM Contact Duration: Less than 05
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 09/10/2014
 Completed date: 09/10/2014 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**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 09/10/2014 08:59 AM Entered By: [REDACTED]

[REDACTED] received this case on 6/27/2014. The child was pronounced dead prior to the referral being made. The death was due to injuries sustained in a car accident while the child was with his mother. Tennessee Highway Patrol is investigating the accident and charges are pending at this time against the mother. Toxicology is pending on the mother at this time.



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: 06/27/2014 Contact Method: Phone Call
 Contact Time: 09:30 AM Contact Duration: Less than 15
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 09/10/2014
 Completed date: 09/10/2014 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: 09/10/2014 08:55 AM Entered By: [REDACTED]

[REDACTED] [REDACTED]
 6/27/14
 [REDACTED] stated that the mother, [REDACTED] crossed the center line of the road while driving with the baby, [REDACTED] stated that while he was at the wreck scene that he found two empty pill bottles from last year. He stated that he can not recall what the bottles were for at this time due to not being at work. [REDACTED] stated that he did find a prescription on the mother for Suboxone. [REDACTED] stated that [REDACTED] did go to [REDACTED] to speak with the mother, [REDACTED] stated that the mother, [REDACTED] did admit to having an Opiate problem in the past and that this was why [REDACTED] was on Suboxone. [REDACTED] stated that there had been an attempt to restrain the car seat in the car. [REDACTED] stated that the seat was rear facing. [REDACTED] stated that the car seat was "super loose". [REDACTED] stated that there were two seatbelts ran through the seat but the seat was not locked down. [REDACTED] stated that an infant seat should only move 1/2 in or 1 inch from side to side. [REDACTED] stated that the car seat in the mothers car was moving 3 to 4 inches to each side. [REDACTED] stated that the handle to the infant car seat was in the upright position and that it is supposed to be laid back. [REDACTED] stated again that the mother, [REDACTED] did make an attempt to put the seat in. [REDACTED] stated that the other vehicle in the accident belonged to [REDACTED] stated that [REDACTED] works at [REDACTED] stated that [REDACTED] told THP that he saw the mother coming around the curve and he pulled over off he side of the road almost to a complete stop to try and avoid getting hit. [REDACTED] stated that the mother never hit her breaks and never slowed down. [REDACTED] stated that [REDACTED] was driving a truck and the mother, [REDACTED] was driving a [REDACTED] car. [REDACTED] stated that when [REDACTED] hit [REDACTED] that it knocked his vehicle back in the ditch approximately 16 inches. [REDACTED] stated that there are no tire marks from the mother, [REDACTED] car. [REDACTED] stated that from a witnesses statement that the mother, [REDACTED] gets out of the car and runs back to the side of the car that the baby is on. [REDACTED] stated that witnesses informed them that the mother, [REDACTED] grabbed the baby out of the car seat and was screaming, "help my baby, help my baby". [REDACTED] stated that [REDACTED] grabbed the baby and put the baby in the back seat of his truck and started performing CPR on the infant. [REDACTED] stated that [REDACTED] is involved in this accident. [REDACTED] stated that the [REDACTED] is [REDACTED] [REDACTED] stated that there is a preliminary report but there will not be a final report for a while. [REDACTED] stated that they are waiting on the Toxicology screen from the mother, [REDACTED] to come back before they move any further.



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: 06/27/2014 Contact Method:
 Contact Time: 07:23 AM Contact Duration: Less than 05
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 05/13/2015
 Completed date: 05/13/2015 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: 05/13/2015 01:38 PM Entered By: [REDACTED]

On June 27, 2014 at 723 AM [REDACTED] a referral was called into Child Abuse Hotline. The referral was screened into [REDACTED] as P1 with the allegation of Neglect Death. The alleged child victim is [REDACTED]. The alleged perpetrator is mother, [REDACTED]. Response is due on June 28, 2014 by 1159 PM [REDACTED]. The case is assigned to [REDACTED]. It is not known if this child is of Native American descent. This information will need to be obtained when response is met.

Family Composition:

[REDACTED] child/victim
 [REDACTED] : mother
 [REDACTED] : father

Child Protective Service [REDACTED] explained Multiple Response System (MRS) process and provided [REDACTED] with a brochure of such. This Investigator provided [REDACTED] with a copy of the Notice of Privacy Practices, and Native American Veto Heritage on this date. [REDACTED] obtained signed acknowledgements of such and copies have been placed in the CPS hard file.

Narrative Type: Addendum 1 Entry Date/Time: 08/10/2015 03:17 PM Entered By: [REDACTED]

Juvenile Court was notified per local protocol on this date. (6/28/14)