



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

Case # 2014.118

Intake #:	██████████	Investigation #:	██████████	Date of Referral:	07/20/2014	
Type: (Please check one)	<input checked="" type="checkbox"/> DEATH	<input type="checkbox"/> NEAR DEATH	Date of Death/Near Death:	07/22/2014		
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:	██████████ and unknown participant		Relationship to Victim:	parents		
Child in custody at time of incident?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	Adjudication:	n/a		
If child is in DCS custody, list placement type and name:	N/A					

**Describe (in detail) circumstances surrounding death/near death:**

On 07/20/2014, the family was vacationing in ██████████ County at address ██████████. It was reported that the family had been in the swimming pool, and the parents ██████████ and child, ██████████ got out of the swimming pool, and they were headed to the cabin to take showers. The child, ██████████, was observed by grandfather, ██████████ walking up the sidewalk headed to the cabin away from the pool. It was reported to law enforcement that the grandfather, ██████████ lost sight of the child for 3 to 4 minutes. Mr. ██████████ reported to law enforcement that a family friend ██████████ spotted the child at the bottom of the pool, and pulled the child out of the pool. It was reported that the child was blue and non-responsive. The grandfather, ██████████ performed CPR until EMTs and law enforcement arrived, and EMTs took over CPR. The child, ██████████, started breathing, and was transported by ambulance to ██████████ where he was life flighted to ██████████. The child, ██████████, died at at 9:54a.m. at ██████████.

**If this is a near death certified by a physician, identify physician by name and provide contact information:**

Name of Physician:	██████████	Telephone #	██████████
Street Address:	██████████	City/State/Zip:	██████████

**Describe (in detail) interview with family:**

On 07/20/2014, CPSI ██████████ arrived at ██████████, and was not allowed by ██████████ to interview and/or see the parents or child due to the level of anxiety of the parents, and critical nature of the child's condition. On 07/21/2014, CPSI ██████████ spoke with the maternal grandmother ██████████ and paternal grandmother, ██████████ at ██████████. They reported that everyone has went into the cabin to take showers, and the child, ██████████ was walking up the sidewalk to take his bath. It was reported that he must have went through the side gate and jumped and/or fell into the pool. They reported that there wasn't anyone left in the pool, however there were people at the clubhouse area beside the pool preparing food for a get together. They reported that ██████████ noticed the child at the bottom of the pool, and pulled him out. They reported that the grandfather, ██████████, gave him CPR until EMTs arrived. They reported that EMTs gave him CPR for 20 minutes, and they got a faint pulse. When they arrived a ██████████ they life flighted the child, ██████████ to ██████████. The grandmothers reported that the parents were not interviewed by law enforcement because by the time law enforcement arrived they were already gone in the ambulance to ██████████. CPSI ██████████ attempted to speak with the parents again, however the parents were not willing to speak with CPSI ██████████ at this time.

**If child was hospitalized, describe (in detail) DCS involvement during hospitalization:**

On 07/20/2014, the child, ██████████, was transported by ambulance to ██████████ and life flighted to ██████████. When CPSI ██████████ received the referral the child, ██████████ was already located at ██████████. CPSI ██████████ immediately went to the hospital to speak with the parents, ██████████ and ██████████, and see the child, ██████████. CPSI ██████████ was not allowed to speak to the parents or see the child due to the high level of anxiety by the parents, and the critical condition of the child. On 07/21/2014, CPSI ██████████ arrived at ██████████ hospital again to check on the condition of the child, and speak with the parents. CPSI

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

RD A 2993

Page 1

[redacted] was advised by [redacted] staff that the parents were not willing to speak with her at this time. [redacted] staff advised CPSI [redacted] that the child, [redacted], had a brain scan at approximately 6:00p.m. to get a baseline of brain activity, and then complete another brain scan 12 hours later to see if the child was making progress or if he was getting worse. CPSI [redacted] has not received the results of the brain scans. The hospital has implied that more than likely the child, [redacted], is already brain dead. The child, [redacted], is still located at [redacted] at this time. The child, [redacted] died at 9:54a.m. at [redacted] and is being transferred to the [redacted]

**Describe disposition of body (Death):** [redacted]  
**Name of Medical Examiner/Coroner:** [redacted] **Was autopsy requested?**  No  Yes

**Did CPS open an investigation on this Death/Near Death?**  No  Yes  
**Was there DCS involvement at the time of Death/Near Death?**  No  Yes

**Type:** [redacted] **Case #:** [redacted]

**Describe law enforcement or court involvement, if applicable:**  
 [redacted] County Deputy [redacted] responded with the EMTs to the 911 call. Officer [redacted] reported that he responded to a report of a possible child drowning. [redacted] County Officers were on scene prior to [redacted] County thoughh it ended up in the jurisdiction of [redacted] County. When [redacted] county officers arrived the child was non-responsive and blue. [redacted] grandfather of the victim, was giving CPR to the child, but EMTs took over as soon as they arrived. The child was transported by ambulance to [redacted] and then life-flighted to [redacted] and put in the Pediatric Intensive Care Unit. Law enforcement interviewed a few of the relatives, but were unable to interview the parents due to the fact that they went with the child in the ambulance. Mr. [redacted] reported that the last time he saw the child, he was walking up the sidewalk toward the cabin and away from the pool. Mr. [redacted] reported that the child was only out of the family's sight for 3-4 minutes. He did not see the child again until a friend of the family, [redacted], spotted the child at the bottom of the pool and pulled him out. The parents were reportedly in the cabin packing to go home. No one appeared to be aware that the child was near the pool. The parents were not interviewed because they left in the ambulance with the child. [redacted] (uncle) and [redacted] (friend of family) were interviewed and they gave similar statements. It is unknown whether or not there will be further investigation by law enforcement. [redacted] County Sheriff's Department case # is [redacted]

**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):**

The victim and his siblings have been in the hospital at [redacted] since the incident, surrounded by family members and church family. The sisters and brother have already been involved in sibling therapy provided by [redacted]

<b>Name:</b> [redacted]	<b>Age:</b> 4
<b>Name:</b> [redacted]	<b>Age:</b> 10
<b>Name:</b> [redacted]	<b>Age:</b> 13
<b>Name:</b>	<b>Age:</b>
<b>Name:</b>	<b>Age:</b>

**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
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

**Any media inquiry or is attention expected?**  No  Yes **List organizations requesting information:**





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

**Intake**

Intake ID: [REDACTED]  
 Intake Taken By: [REDACTED] Intake Date/Time: 07/20/2014 10:11 PM [REDACTED]  
 Track Assigned: Investigation Priority Assigned: 1  
 Screened By: [REDACTED]  
 Date Screened: 07/20/2014

**Investigation**

Investigation ID: [REDACTED]  
 First County/Region: [REDACTED]  
 Date/Time Assigned : 07/21/2014 02:38 PM  
 First Team Leader Assigned: [REDACTED] Date/Time 07/20/2014 12:00 AM  
 First Case Manager [REDACTED] Date/Time 07/20/2014 12:00 AM

**Allegations**

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	5 Yrs	Lack of Supervision	Yes	Unknown Participant [REDACTED] Unknown	Other Relative
[REDACTED]	5 Yrs	Lack of Supervision	Yes	[REDACTED]	Birth Mother
[REDACTED]	5 Yrs	Lack of Supervision	Yes	[REDACTED]	Birth Father

**Preliminary Near Death:** [REDACTED]

**Referent(s)**

Referent Name: [REDACTED] Role to Alleged Victim(s): [REDACTED]  
 Referent Address:  
 Referent Phone Number: [REDACTED]  
 Type of Contact: I-3 Phone  
 Notification: E-mail

Narrative: \*\*\*\*\*CHILD IS NOT IN DCS CUSTODY\*\*\*\*\*

TFACTS: None found based on the information given

Open Court Custody/FSS/FCIP None

Closed Court Custody None



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

Open CPS None

Substantiated None

Fatality None

Screened out None

History (not listed above): None

County: [REDACTED]

Notification: Email

School/ Daycare: Unknown

Native American Descent: None

Directions: Incident took place at the family owned Cabin in [REDACTED]

Reporter's name/relationship: [REDACTED]

Reporter states:

[REDACTED] (4) is in the custody of his parents, [REDACTED] and [REDACTED]. [REDACTED] has no known special needs or disabilities. It is unknown if the family has history with the Tennessee Department of Children Services. There are no known safety concerns for a case worker going out to the home. [REDACTED] and [REDACTED] have three other children, names and information is unknown.

On July 20, 2014 law enforcement responded to the cabin in [REDACTED] due to a child possibly drowning. [REDACTED] County officers responded prior to [REDACTED] County officers though it ended up being [REDACTED] County Jurisdiction. When [REDACTED] County officers arrived, it was discovered that [REDACTED] was nonresponsive and blue. The grandfather, [REDACTED] was performing CPR on [REDACTED]. First responder's and then EMTs both took over the CPR. [REDACTED] was transported to the hospital in [REDACTED] and was going to be life flighted to [REDACTED]. At last report, [REDACTED] appeared to be breathing; however, it is unknown what condition he is in at this time.

A few family members were interviewed. [REDACTED] stated that the last time he saw [REDACTED] he was walking up towards the cabin away from the pool. The pool is about 20 to 30 yards away from the family's cabin. [REDACTED] stated that [REDACTED] was only out of the family's site for about three to four minutes. [REDACTED] did not see [REDACTED] again until a friend of the family; [REDACTED] spotted [REDACTED] at the bottom of the pool. [REDACTED] was the one the pulled [REDACTED] out of the pool. [REDACTED] and [REDACTED] were inside the home packing. It is unknown who was supposed to be watching the child. No one appeared to be aware that [REDACTED] was near the pool. It is unknown how long [REDACTED] had been at the bottom of the pool.

The parents were not interviewed due to the fact that they were in the ambulance by the time the interviews began. [REDACTED] and another relative, [REDACTED] was interview and gave similar statements. [REDACTED] is the uncle to [REDACTED]. [REDACTED] was interviewed as well. It is unknown if anyone has a criminal history with abuse or drug related charges. There had been drinking at the cabin, but no one appeared to be intoxicated.

A report was taken by the [REDACTED] County Sheriff's Department and the number is [REDACTED]. It is unknown if there is going to be further investigation by law enforcement at this time.

This is all the information given by the reporter.

Per SDM: Investigation Track P 1-near fatality- [REDACTED] CM 3 @ 11:04pm on 7-20-14

Recipients      Time Issued      Response Received      Devices      Responses



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

Received [redacted] 07-20-14 11:09:56 PM [redacted] 07-20-14 11:10:52 PM [redacted]  
07-20-14 11:09:57 PM [redacted] --- [redacted]  
Automated Email Response

DCS Child Death or Preliminary Near Death was notified

Also notified Regional Administrator, [redacted]



**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: [REDACTED] Race: White Age: 5 Yrs

Address: [REDACTED]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact: [REDACTED]

Contact Type: CELL

Contact Comments: mother: [REDACTED]

**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: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] Race: [REDACTED] Age: 38 Yrs

Address: [REDACTED]

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  
Tennessee Child Abuse Hotline Summary**

**Name:** [REDACTED]

Gender: Female

Date of Birth:

Participant ID: [REDACTED]

SSN:

Race:

Age:

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: 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  
Tennessee Child Abuse Hotline Summary**

**Name:** Unknown Participant [REDACTED]

**Gender:** [REDACTED]      **Date of Birth:** [REDACTED]      **Partipant ID:** [REDACTED]

**SSN:** [REDACTED]      **Race:** [REDACTED]      **Age:** [REDACTED]

**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: 07/20/2014  
 Street Address: [REDACTED]  
 City/State/Zip: [REDACTED]

Investigation ID: [REDACTED]  
 Assignment Date: 07/20/2014

**B. Allegation**

#	Children's Name	DOB	Specific Allegation for Each Child	Alleged Perpetrator's Name	DOB	Classification	Severe Abuse	Classified By
		SSN			SSN			
1	[REDACTED]	[REDACTED]	Lack of Supervision	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[REDACTED] 08/05/2014
2	[REDACTED]	[REDACTED]	Lack of Supervision	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[REDACTED] 08/05/2014
3	[REDACTED]	[REDACTED]	Neglect Death	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	No	[REDACTED] 11/17/2014
4	[REDACTED]	[REDACTED]	Lack of Supervision	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[REDACTED] 08/05/2014
5	[REDACTED]	[REDACTED]	Neglect Death	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	No	[REDACTED] 11/17/2014

Preliminary Near Death: [REDACTED]

**C. Disposition Decision**

Disposition Decision: Assessed and Closed

Comments: Precipitating incident was an accident. There was no neglect involved.

**D. Case Workers**

Case Worker: [REDACTED]  
 Team Leader: [REDACTED]

Date: 11/17/2014  
 Date: 11/17/2014

**E. Investigation Summary**



**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]

**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 (ACV) passed away from drowning. The rest of the children were observed, but not interviewed as the parents felt it would be traumatic for them.

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

Collaterals report that Mr. and Mrs. [REDACTED] are outstanding parents. They are loving and kid and they care about the children's behavior and "moral character."

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

Mr. and Mrs. [REDACTED] reported that they were at the cabin, packing to go home and the children were swimming while relatives watched them. The children were told to get out of the pool and go to the cabin to bathe before going home and they did so. [REDACTED] (ACV) was witnessed walking up the sidewalk, but had apparently gone back into the pool area at which time he must have fallen into the pool.

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

Witnesses all describe the incident the same and none of them believe this to be any more than an accident.

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

NA

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: 02/17/2015

Contact Method:

Contact Time: 03:25 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/17/2015

Completed date: 02/17/2015

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: 02/17/2015 03:41 PM      Entered By: [REDACTED]

This investigation has been reviewed by Lead Investigator [REDACTED] Investigation Coordinator [REDACTED] Regional Investigations Director [REDACTED] Deputy Director of Investigations [REDACTED]. As reviewed this investigation 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: 01/30/2015

Contact Method:

Contact Time: 05:00 PM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location: [REDACTED]

Created Date: 01/30/2015

Completed date: 01/30/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Case Summary

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 01/30/2015 05:25 PM Entered By: [REDACTED]

The Department of Children's Services (DCS) received a referral on 07/20/2014 regarding [REDACTED] (DOB [REDACTED]) with an allegation of Lack of Supervision that resulted in near death of the child. The referral listed the alleged child victim (ACV) as [REDACTED] but the correct legal name was ascertained later. The child was not in DCS custody and the family had no DCS history.

The [REDACTED] family was vacationing at a rental cabin in [REDACTED] County that had a large swimming pool. The family, and several members of extended family, was preparing to end their vacation and took one last swim before packing to leave. All of the children were outfitted with life preservers. The parents told the children to get out of the pool and come with them to the cabin to bathe before returning to their home in [REDACTED], TN. Relatives reported that [REDACTED] was last seen following the rest of his family up the sidewalk to the cabin. Very shortly thereafter, a family friend saw that [REDACTED] was at the bottom of the pool. This family friend pulled the child out of the pool and yelled for someone to call 911. Maternal grandfather performed Cardio Pulmonary Resuscitation on the child until first responders arrived. First Responders transported the child (and the mother and father) to [REDACTED] where they life-flighted the child to [REDACTED]. The child was treated at [REDACTED] around the clock, but he was pronounced deceased on 07/22/2014 at 9:54 AM.

Investigator [REDACTED] was assigned the case at the outset, but assistance was provided by Lead Investigator [REDACTED] and Child Protective Services Assessment worker [REDACTED]. Law enforcement involved was [REDACTED] of the [REDACTED] County Sheriff's Office. Alleged perpetrators were listed as the birth parents [REDACTED]. Interviews were conducted with the parents and siblings, friends that were present and assisted in the attempted rescue, several relatives on the scene and at the hospital, and medical personnel. The grandfather reported that he had seen the child following the family up the walk to the cabin and that he had performed CPR on the child until emergency personnel arrived. Family friend reported seeing the child at the bottom of the pool, pulling him out, and instructing someone to call 911. The child's sisters reported that they had not seen anything that had happened as they were inside the cabin at the time of the incident.

Tennessee Department of Children's Services Policy Chapter 14/Work Aid 1 states:



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Child death is defined as:

- A) Any unexplained death of a child when the cause of death is unknown or pending an autopsy report.
- B) 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.
- C) Any child death caused by abuse or neglect resulting from the parent or caretaker's to stop another person's direct action that resulted in the death of the child.

The front-end Child Protection Investigative Team (CPIT) discussion was performed by Lead Investigator [REDACTED] on 07/21/2014 at 2:00 AM. LI [REDACTED] discussed the case with Detective [REDACTED] of the [REDACTED] County Sheriff's Office. The case was presented to the Child Protective Investigative Team at the [REDACTED] County Department of Children's Services Office in [REDACTED] Tennessee on 08/19/2014 at 2:00 PM. Members in attendance were: [REDACTED] (DCS Lead Investigator), [REDACTED] (DCS Investigator), [REDACTED] (DCS Investigator), [REDACTED] (Child Advocacy Center), & [REDACTED] of the [REDACTED] County Sheriff's Department. All members of the team agreed on the classification of Allegation Unsubstantiated/Perpetrator Unsubstantiated (AUPU). The [REDACTED] County Assistant District Attorney (ADA) [REDACTED] was not in attendance and so LI [REDACTED] presented the case to him on 12/16/2014. ADA [REDACTED] agreed with the Department of Children's Services classification of lack of supervision and Neglect Death being classified allegation unsubstantiated perpetrator unsubstantiated. ADA [REDACTED] reported that the DA's office will not be seeking prosecution on this case as we have ruled this as a tragic accident.

The consensus that resulted from the interviews of the involved individuals, public and private sector, was that the alleged perpetrators were not acting in any way inappropriately. All interviewees saw the incident as a tragic accident and supported the family completely.

There is not a preponderance of evidence to substantiate the allegation of Lack of Supervision resulting in the death of the child.

The case will be closed and classified as Allegation Unsubstantiated/Perpetrator Unsubstantiated for the allegation of Lack of Supervision resulting in the child's death.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/16/2014

Contact Method: Phone Call

Contact Time: 02:56 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 12/16/2014

Completed date: 12/18/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community, 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: 12/18/2014 10:11 AM      Entered By: [REDACTED]

Date 12/16/2014

Time: 2:56p.m.

LI [REDACTED] spoke with [REDACTED] ADA for [REDACTED] County regarding the allegations of lack of supervision and neglect death. LI [REDACTED] explained that Det. [REDACTED] has staffed this with ADA [REDACTED] when we first received the case in July. LI [REDACTED] explained that on July 20, 2014 the Department of Children Services received a near death referral regarding [REDACTED]. LI [REDACTED] explained that the child was pronounced dead at [REDACTED] several days later. LI [REDACTED] and ADA [REDACTED] discussed all witness statements. ADA [REDACTED] agreed with the Department of Children's Services classification of lack of supervision and Neglect Death being classified allegation unsubstantiated perpetrator unsubstantiated.

ADA [REDACTED] reported that the DA's office will not be seeking prosecution on this case as we have ruled this as a tragic accident.



**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: 12/09/2014

Contact Method: Correspondence

Contact Time: 12:24 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: [REDACTED]

Created Date: 12/16/2014

Completed date: 12/16/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Collateral Contact, Notation

Contact Sub Type:

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

Narrative Type: Original

Entry Date/Time: 12/16/2014 08:55 AM

Entered By: [REDACTED]

[REDACTED] medical records on [REDACTED] received 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: 12/03/2014

Contact Method:

Contact Time: 03:38 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 12/03/2014

Completed date: 12/03/2014

Completed By: [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 12/03/2014 03:40 PM      Entered By: [REDACTED]

LI [REDACTED] has sent the case to IC [REDACTED] to be reviewed for closure. Notification to the Juvenile Judge will be completed pursuant to local 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:	12/03/2014	Contact Method:	
Contact Time:	08:30 AM	Contact Duration:	Less than 45
Entered By:	[REDACTED]	Recorded For:	
Location:	[REDACTED]	Created Date:	12/03/2014
Completed date:	12/03/2014	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Case Summary		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 12/03/2014 09:00 AM Entered By: [REDACTED]

On 07/20/2014 referral # [REDACTED] was received by the Department of children's Services. The referral was based on Lack of Supervision and the Alleged Child Victim (ACV) was [REDACTED], DOE [REDACTED]. The referral stated the following: "On July 20, 2014 law enforcement responded to the cabin in [REDACTED] due to a child possibly drowning. [REDACTED] County officers responded prior to [REDACTED] County officers though it ended up being [REDACTED] County Jurisdiction. When [REDACTED] County officers arrived, it was discovered that [REDACTED] was nonresponsive and blue. The Grandfather, [REDACTED] was performing CPR on [REDACTED]. First responders and then EMTs both took over the CPR. [REDACTED] was transported to the hospital in [REDACTED] and was going to be life-flighted to [REDACTED]. At last report, [REDACTED] appeared to be breathing; however, it is unknown what condition he is in at this time.

A few family members were interviewed. [REDACTED] stated that the last time he saw [REDACTED] he was walking up toward the cabin away from the pool. The pool is about 20 to 30 yards away from the family's cabin. [REDACTED] stated that [REDACTED] was only out of the family's site for about three to four minutes. [REDACTED] did not see [REDACTED] again until a friend of the family; [REDACTED] spotted [REDACTED] at the bottom of the pool. [REDACTED] was the one the pulled [REDACTED] out of the pool. [REDACTED] and [REDACTED] were inside the home packing. It is unknown who was supposed to be watching the child. No one appeared to be aware that [REDACTED] was near the pool. It is unknown how long [REDACTED] had been at the bottom of the pool.

The parents were not interviewed due to the fact that they were in the ambulance by the time the interviews began. [REDACTED] and another relative, [REDACTED], were interviewed and gave similar statements. [REDACTED] is the uncle to [REDACTED]. [REDACTED] was interviewed as well. It is unknown if anyone has a criminal history with abuse or drug related charges. There had been drinking at the cabin, but no one appeared to be intoxicated. A report was taken by the [REDACTED] County Sheriff's Department and the number is [REDACTED]. It is unknown if there is going to be further investigation by law enforcement at this time." It should be noted that the name of the child in the original referral was not correct at the time.

The child (hereinafter referred to as [REDACTED]) was airlifted from [REDACTED] to [REDACTED] and placed in the Pediatric Intensive Care Unit (PICU). The child was pronounced deceased on 07/22/2014 at 9:54 AM. The case was assigned to Office of Child Safety Investigator [REDACTED] (CPSI) and CPSI [REDACTED] was assisted by Lead Investigator (LI) [REDACTED]. LI [REDACTED] went to the scene of the accident, took photographs and spoke to



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

the owner of the property. LI [REDACTED] also discussed the incident with [REDACTED] County Sheriff's Detective [REDACTED] by phone. The parents of the Alleged Child victim were names as Alleged Perpetrators; however, there was a significant amount of family members present when the incident happened. There were three siblings of [REDACTED] present as well as maternal and paternal grandparents, uncles, and cousins.

CPSI [REDACTED] spent many hours at [REDACTED] PICU and was not able to interview the parents as the medical personnel would not allow it at the time. However, CPSI was able to see the child and to interview the maternal and paternal grandmothers and a maternal uncle. All reported that the situation was a terrible accident. They reported that they were all headed up to the "cabin" to bathe before going home and the last time [REDACTED] was viewed he was coming up the path with them (the cabin was 20 to 30 feet away from the pool area, not 20 to 30 yards as claimed in the referral). This witness was the maternal grandfather. Very shortly thereafter, a friend of the family discovered the child at the bottom of the pool. Maternal grandfather performed CPR on the child until EMTs arrived.

The parents eventually cooperated with an in-depth interview and their version of the events were the same as all others interviewed. Several family members were vacationing in the [REDACTED] county area and their vacation was coming to an end. The immediate family had gone swimming in the pool for one last time and was then leaving the pool area to bathe before returning to their home in [REDACTED]. The last time [REDACTED] was seen was coming up the path behind them toward the cabin. They have been cooperative since and provided all information requested of them.

Tennessee Department of Children's Services Policy Chapter 14/Work Aid 1 states:

Child death is defined as:

- A) Any unexplained death of a child when the cause of death is unknown or pending an autopsy report.
- B) 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.
- C) Any child death caused by abuse or neglect resulting from the parent or caretaker's to stop another person's direct action that resulted in the death of the child.

The case was presented to the [REDACTED] County Child Protective Investigative Team on 08/19/2014 @ 2:00 PM and all members agreed with Investigator [REDACTED] findings and on the classification of Allegation Unsubstantiated/Perpetrator Unsubstantiated. The result of each interview with the parents and several family members was that the child's death was a tragic accident. The parents and family members were acting appropriately at the time of the incident and there is no evidence to support the allegation. This case will be closed and classified as Allegation Unsubstantiated/Perpetrator Unsubstantiated for the allegation of "Child Neglect 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:	11/16/2014	Contact Method:	Face To Face
Contact Time:	09:00 AM	Contact Duration:	Less than 45
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	11/16/2014
Completed date:	11/17/2014	Completed By:	[REDACTED]
Purpose(s):	Well Being		
Contact Type(s):	Alleged Perpetrator Interview, Other Child Living in the Home Interview/Observation		
Contact Sub Type:			

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

[REDACTED]

**Narrative Details**

Narrative Type: Original      Entry Date/Time: 11/16/2014 05:11 PM      Entered By: [REDACTED]

CPSI [REDACTED] met with the family this date. The entire family appears to be doing well and working through their grief. Mr. and Mrs. [REDACTED] talked about [REDACTED] Mission and some of the other activities they have been engaged in as a family. The children have been in counseling and they appear to be doing very well as mentioned previously. Mrs. [REDACTED] admitted that she was struggling today, but grateful that she has so much support in her immediate family and her church family.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 11/14/2014

Contact Method:

Contact Time: 03:15 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: [REDACTED]

Created Date: 11/17/2014

Completed date: 11/17/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 11/17/2014 07:55 AM      Entered By: [REDACTED]

4th request sent for medical records on this case. Request sent by [REDACTED] RN, DCS Nurse.



**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: 10/10/2014

Contact Method: Phone Call

Contact Time: 09:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: [REDACTED]

Created Date: 11/17/2014

Completed date: 11/17/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 11/17/2014 07:53 AM      Entered By: [REDACTED]

CPSI [REDACTED] placed a call to [REDACTED] to try and get some help with getting the medical records for this case. CPSI spoke to an individual and that provided a different number for medical records and some advice on how to get a faster response. 3rd request sent for medical records for this case.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/23/2014

Contact Method:

Contact Time: 08:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: [REDACTED]

Created Date: 12/16/2014

Completed date: 12/16/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/16/2014 08:42 AM Entered By: [REDACTED]

Received on this date: Autopsy results for [REDACTED] Results of Autopsy were:

Cause of Death: Drowning

Manner of Death: Accident

Narrative Type: Addendum 1 Entry Date/Time: 12/16/2014 08:48 AM Entered By: [REDACTED]

Correct date 09/22/2014



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/22/2014

Contact Method:

Contact Time: 02:30 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: [REDACTED]

Created Date: 09/22/2014

Completed date: 09/22/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 09/22/2014 02:36 PM      Entered By: [REDACTED]

2nd request faxed for medical records from [REDACTED]



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/22/2014

Contact Method: Correspondence

Contact Time: 08:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: [REDACTED]

Created Date: 09/22/2014

Completed date: 09/22/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 09/22/2014 02:13 PM      Entered By: [REDACTED]

Autopsy report received on [REDACTED] 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:	08/31/2014	Contact Method:	Face To Face
Contact Time:	09:00 AM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	12/03/2014
Completed date:	12/03/2014	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community, Well Being		
Contact Type(s):	Sibling Interview/Observation		
Contact Sub Type:			

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

Narrative Type: Original      Entry Date/Time: 12/03/2014 02:09 PM      Entered By: [REDACTED]

CPSI [REDACTED] met with the family at another community site (other than the home) and asked to speak briefly with the siblings, [REDACTED] and [REDACTED]. The two older girls were all right with talking with CPSI, but [REDACTED] was very shy and did not want to come with us and so he was allowed to stay with his mother and father. [REDACTED] was taken a distance away and asked how she was doing. She said, "OK, I guess." She reported that it was really hard and sometimes she feels really bad, but her mother and father help a lot. She was asked where she was when the incident took place. She reported that she and her sister had gone up to the cabin with their parents and did not know what happened until all the commotion started. She reported that then "they would not let us come down to where they were and we had to stay with Gramma. Gramma brought us to the hospital." CPSI thanked her for talking to CPSI and then talked briefly with [REDACTED]. She also reported that she did not witness anything happening and didn't really know what was happening until they got to the hospital. CPSI said, "It must have been really hard to be there at the hospital all that time not really knowing what was happening." She advised that it was very hard and that they had been saving up money to get a pool and now they really don't want one."



**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: 08/25/2014

Contact Method:

Contact Time: 10:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 12/03/2014

Completed date: 12/03/2014

Completed By: [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/03/2014 03:38 PM Entered By: [REDACTED]

CPSI [REDACTED] discussed the case with LI [REDACTED] CPSI [REDACTED] reported that she has not received the medical records from [REDACTED] LI [REDACTED] advised CPSI [REDACTED] to do another request and ask RN [REDACTED] if she can assist in getting the records. LI [REDACTED] also advised CPSI [REDACTED] to complete another ending Case Summary using the Child Death Summary format.



**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:	08/25/2014	Contact Method:	
Contact Time:	08:00 AM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:	[REDACTED]	Created Date:	08/25/2014
Completed date:	08/25/2014	Completed By:	[REDACTED]
Purpose(s):	Well Being		
Contact Type(s):	Case Summary		
Contact Sub Type:			

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

Narrative Type: Original      Entry Date/Time: 08/25/2014 08:39 AM      Entered By: [REDACTED]  
 Date of Referral: 07/20/2014      County: [REDACTED]

DCS received a referral of abuse or neglect of a child based upon lack of supervision.

Based on the information collected during the investigation of this case, the classification for this referral is as follows:

A copy of the Classification and Summary will be submitted to CPSI LI [REDACTED] for review and a copy sent to the Juvenile Court Judge.

Summary of this case is as follows:

Alleged Victim (s): [REDACTED]  
 Alleged Perpetrator(s): [REDACTED]  
 Victim's Mother: [REDACTED]  
 Victim's Father: [REDACTED]

DCS received a referral of abuse or neglect of a child based upon Lack of supervision. Case was assigned to Child Protective Services Investigator (CPSI) [REDACTED]. The investigation revealed that ACV [REDACTED] resided with [REDACTED] and [REDACTED] in [REDACTED]. The family was vacationing at an address in [REDACTED] County. they were preparing to leave the vacation location when the family took a last swim in the pool. The children were wearing life preservers. The mother and father were in the cabin packing to leave and relatives were watching the children. The children were told to get out of the pool and go to the cabin to bathe before leaving the vacation spot. ACV [REDACTED] was observed walking up the path to the cabin and was out of sight for just a few moments when he apparently went back to the pool and jumped or fell into the pool. A family friend spotted the child at the bottom of the pool and pulled him out, immediately starting CPR. When paramedics arrived they took over the CPR while he was transported to the [REDACTED]. He was air-flighted to [REDACTED] where he was in the [REDACTED] for 2 days. [REDACTED] passed away on the morning of 07/22/2014.



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

---

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

---

All witnesses report the same information about the events as they unfolded. Collateral contacts report that the parents are outstanding parents. Parents were very cooperative regarding the investigation. The child's drowning was a terrible accident and there was no negligence discovered in the parent's or relative's behavior. Siblings were provided with counseling at the hospital and although counseling was offered by the Department, the parents felt that their church family could provide that role for them.

No safety concerns were noted within this family.

Safety Assessment Score:

Initial: conditionally safe Closing: safe

For the above stated reasons, this CPSI requests closure of 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:	Created In Error
Contact Date:	08/19/2014	Contact Method:	Face To Face
Contact Time:	02:00 PM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	08/25/2014
Completed date:	08/25/2014	Completed By:	[REDACTED]
Purpose(s):	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: 08/25/2014 08:19 AM Entered By: [REDACTED]

Child Protective Investigation Team meeting convened and this case was discussed. All members of the team agreed to classification of AUPU (allegation Unsubstantiated/Perpetrator Unsubstantiated). Team members were: [REDACTED] (DCS LI), [REDACTED] (DCS CM), [REDACTED] (DCS CM), [REDACTED] (CAC), & [REDACTED] (LE).

Narrative Type: Created In Error Entry Date/Time: 12/15/2014 01:06 PM Entered By: [REDACTED]

One CPIT member not documented.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED] Status: Created In Error  
 Contact Date: 08/19/2014 Contact Method: Face To Face  
 Contact Time: 02:00 PM Contact Duration: Less than 30  
 Entered By: [REDACTED] Recorded For:  
 Location: [REDACTED] Created Date: 12/15/2014  
 Completed date: 12/15/2014 Completed By: [REDACTED]  
 Purpose(s): Service Planning  
 Contact Type(s): CPIT (Child Protective Investigative Team)  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/15/2014 01:08 PM Entered By: [REDACTED]

Child Protective Investigation Team meeting convened and this case was discussed. All members of the team agreed to classification of AUPU (allegation Unsubstantiated/Perpetrator Unsubstantiated). Team members were: [REDACTED] (DCS LI), [REDACTED] (DCS CM), [REDACTED] (DCS CM), [REDACTED] (CAC), [REDACTED] [REDACTED] LE), & [REDACTED] [REDACTED] County DA).

Narrative Type: Created In Error Entry Date/Time: 12/15/2014 01:34 PM Entered By: [REDACTED]

Incorrect information documented.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/19/2014

Contact Method: Face To Face

Contact Time: 02:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: [REDACTED]

Created Date: 12/15/2014

Completed date: 12/15/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

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

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 12/15/2014 01:34 PM      Entered By: [REDACTED]

Child Protective Investigation Team meeting convened and this case was discussed. All members of the team agreed to classification of AUPU (allegation Unsubstantiated/Perpetrator Unsubstantiated). Team members were: [REDACTED] (DCS LI), [REDACTED] (DCS CM), [REDACTED] (DCS CM), [REDACTED] (CAC), & [REDACTED] (LE).



**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:	08/19/2014	Contact Method:	Face To Face
Contact Time:	01:30 PM	Contact Duration:	Less than 45
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	08/25/2014
Completed date:	08/25/2014	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community, Well Being		
Contact Type(s):	Alleged Perpetrator Interview		
Contact Sub Type:			

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

Narrative Type: Original    Entry Date/Time: 08/25/2014 07:45 AM    Entered By: [REDACTED]

CPSI [REDACTED] went to the family home to meet with Mrs. [REDACTED] for a final follow-up. Children were all at school. Home was very neat and tidy with adequate space and no safety concerns. During the first meeting with the [REDACTED] family, CPSI neglected to do the front-end paperwork and so this was done. CPSI explained the current report made to the Tennessee Department of Children's Services and the MRS/Assessment process. CPSI also provided the family with a brochure describing the Multiple Response Approach. CPSI explained all forms and engaged the family during the paperwork process. Mrs. [REDACTED] signed the Client's Rights Handbook Signature Page, Native American Heritage Veto Verification, Health Insurance Portability and Accountability Act (HIPAA) Acknowledgement form, Notice of Equal Access to Programs and Services, and the Release of Information. CPSI obtained signed acknowledgements of such and copies have been placed into the file. Mrs. [REDACTED] reported that [REDACTED] is having the worst time with the absence of his twin brother, understandably, and he keeps climbing into bed with her and her husband. She reported that he missed his little roommate. She talked about how she has to get her crying done when the children are out of the house because when she cries, it especially bothers [REDACTED]. She then talked about "[REDACTED] Mission" and how it is progressing. The family and their church family have developed a ministry in [REDACTED] name and they go out on the weekends and minister to the urban areas in [REDACTED]. CPSI advised Mrs. [REDACTED] that the case would be closed. CPSI again expressed sympathy for the family's loss.

Narrative Type: Addendum 1    Entry Date/Time: 08/25/2014 08:02 AM    Entered By: [REDACTED]

Mrs. [REDACTED] was again offered counseling for the family and she again turned it down. Mrs. [REDACTED] feels that her church family is filling that role in their lives.



**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:	Face To Face
Contact Time:	04:00 PM	Contact Duration:	Less than 45
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	08/05/2014
Completed date:	08/15/2014	Completed By:	[REDACTED]
Purpose(s):	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: 08/05/2014 02:05 PM Entered By: [REDACTED]

CPSI [REDACTED] went to the place of Mr. [REDACTED] employment to meet with the family as arranged by them. Present were Mr. and Mrs. [REDACTED]. CPSI expressed sympathy for the ordeal that they are having to endure and they were gracious. CPSI [REDACTED] spoke first with Mr. [REDACTED]. He reported that they were in the cabin getting ready to leave since their vacation was over and they were headed home. The children had all been in the pool playing, but they had been told to "wrap it up" and come to the cabin to bathe before leaving (relatives were watching the kids while Mr. and Mrs. [REDACTED] packed their belongings to leave). They all were walking up the sidewalk toward the cabin (they thought), but [REDACTED] had apparently turned around and gone back to the pool. [REDACTED] (Gpa) had witnessed [REDACTED] on the sidewalk heading up with the rest of the family, but then lost track. They had just noticed that [REDACTED] was missing when Mr. [REDACTED] had seen the child at the bottom of the pool and had pulled him out. The child was given CPR until the EMTs arrived and then they took over. Prior to putting the child into the ambulance, they had detected a faint pulse. The child was transported to [REDACTED] and from there he was life-flighted to [REDACTED]. The parents were not interviewed by Law Enforcement at that time as they rode with the child in the ambulance. Mr. [REDACTED] was obviously grief-stricken, but he reported that he and his wife are "holding onto their faith and the belief that God has a plan and will get the family through this." He reported that the other children are doing as well as can be expected under the circumstances, but to talk to them about the situation right now might be too traumatic.

CPSI then spoke to Mrs. [REDACTED]. She reported that she did not know exactly what happened because she and her husband had been packing to leave, but she related what she had been told by the relatives that had been there. She reported that the kids were all coming up the sidewalk to the cabin, but they somehow lost [REDACTED] and he had apparently gone right back down to the pool. She said, "Maybe he thought he left something in the pool or something." Then she said that they had all had on life jackets and had just taken them off to come up to the cabin. She said, "Maybe if...oh, I don't know what we could have done." CPSI assured her that the Department feels that this was a horrible accident and told her again how sorry CPSI was. She was weeping softly and she talked about how [REDACTED] had said that he felt he was "called to preach." She reported that just the other day he had come to her and told her how much he missed their senior pastor that had died recently. CPSI asked about how the other kids are doing and she said they were doing OK. She reported that [REDACTED] twin, [REDACTED] had played with [REDACTED] favorite toy and looked up at her and asked if she missed [REDACTED]. She said she began to cry and the boy said, "I was just asking a question, mom. I didn't mean to make you cry." Then she reported that the girls, [REDACTED] and [REDACTED] were doing OK too. She said that they had told her and her husband that if they had not gone to the Christian school that they have been



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

going to they wouldn't have any idea how to handle this. Mrs. [REDACTED] reported that their church family had been wonderful and that people stop by the house frequently and just want to pray with them.

CPSI then talked with the couple together and we talked about what they are going to do from here. They said that there was a ministry that they had started in [REDACTED] name, [REDACTED] Mission." they said that it was in lieu of flowers and that Missions was an interest to the boy and so they have a FaceBook page, asking for donations to continue what might have been [REDACTED] "work." CPSI thanked them for talking with CPSI.

Narrative Type: Addendum 1    Entry Date/Time: 01/28/2015 01:16 PM    Entered By: [REDACTED]

Prior to 07/22/2014, the date of the death, the [REDACTED] family household consisted of: [REDACTED]

Mother and father of the children were interviewed together. The family wanted to be interviewed together and reported that they were not willing to be interviewed separately, under the circumstances.



**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: 07/22/2014 Contact Method:  
 Contact Time: 03:17 PM Contact Duration: Less than 30  
 Entered By: [REDACTED] Recorded For:  
 Location: Created Date: 07/22/2014  
 Completed date: 07/31/2014 Completed By: [REDACTED]  
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being  
 Contact Type(s): Administrative Review  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/22/2014 03:20 PM Entered By: [REDACTED]  
 Purpose: Child Death Debriefing

This investigation was staffed with Investigator [REDACTED], Lead Investigator [REDACTED] Investigations Coordinator [REDACTED] and Regional Investigation Director [REDACTED]. The details of the case were discussed which will be documented by Investigator [REDACTED] and Lead Investigator [REDACTED]. This investigation began as a Near Child Death and was converted to a Child Death within 48 hours due to the child passing from the incident. LI [REDACTED] notified the Child Abuse Hotline of the Death on 07/22/2014 at approximately 11:35 am. Law enforcement was a part of the initial investigation and responders to the home.

Near Death/ Child Death forms were submitted on 07/22/2012.

Safety of other Children in the home: All family members were at the hospital and a visit to the home has not been conducted. The siblings were seen and in the care of their grandparents and did not appear to be at risk at this time. The siblings have been placed in Sibling Counseling at [REDACTED]. At this time the investigator

**Next Steps:**

Determine if investigation will be assigned to another Investigator.

Continue with investigation: visit the home, interview parents, other children in the home, share information with LE, Contact the DA.



**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: 07/22/2014

Contact Method: Phone Call

Contact Time: 11:54 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/22/2014

Completed date: 07/22/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community, 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: 07/22/2014 03:48 PM      Entered By: [REDACTED]

LI [REDACTED] contacted Detective [REDACTED] with the [REDACTED] Sheriff's Office to update him on the case. LI [REDACTED] explained that she went to the residence located at [REDACTED] and took pictures of the pool area. LI [REDACTED] explained that the case has changed from a near fatality case to a child fatality case. LI [REDACTED] reported that the child died at 9:54a.m. at [REDACTED] and he is being taken to [REDACTED] County Medical Examiners office. LI [REDACTED] explained that we are not sure if an autopsy will be completed 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: 07/22/2014

Contact Method:

Contact Time: 11:35 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/22/2014

Completed date: 07/22/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 07/22/2014 03:39 PM      Entered By: [REDACTED]

LI [REDACTED] contacted the Child Abuse Hotline regarding Intake ID [REDACTED]. LI [REDACTED] explained that the referral came in on 07/20/2014 for a near fatality. LI [REDACTED] explained that the case needs to be changed to a child fatality. LI [REDACTED] reported that CPSI [REDACTED] received a call from [REDACTED] and the child died at 9:54a.m. today. LI [REDACTED] gave the Child Abuse Hotline her cell phone number of [REDACTED] in case they needed more information.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/22/2014

Contact Method: Phone Call

Contact Time: 10:55 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: [REDACTED]

Created Date: 07/25/2014

Completed date: 07/25/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/25/2014 12:32 PM Entered By: [REDACTED]

CPSI [REDACTED] received a call from Social worker [REDACTED] of [REDACTED]. She reported that at 9:54 AM [REDACTED] passed away. She reported that they had not removed him from life support; she reported that he "went on his own." She reported that they are transferring his body to the Medical Examiner's Office and then to the funeral home.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	07/21/2014	Contact Method:	Face To Face
Contact Time:	07:30 PM	Contact Duration:	Less than 45
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	07/22/2014
Completed date:	07/22/2014	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community, Well Being		
Contact Type(s):	Collateral Contact		
Contact Sub Type:			

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

[REDACTED]

**Narrative Details**

Narrative Type: Original      Entry Date/Time: 07/22/2014 08:42 AM      Entered By: [REDACTED]  
 Date: 07/21/2014

Location: [REDACTED]

Time: 7:30p.m.

LI [REDACTED] went to the residence located at [REDACTED] and spoke with the property owner, [REDACTED]. LI [REDACTED] asked Mr. [REDACTED] if LI [REDACTED] could take pictures of the outside of the residence where the incident happened regarding [REDACTED]. Mr. [REDACTED] reported that this was a horrible accident, and he gave LI [REDACTED] consent to take pictures. Mr. [REDACTED] reported that he does not know how the child was able to open the gate because he installed the locks that he feels is to complex for a 4 year old. There were three locked gates around the pool area. One on each end of the pool and another in the middle. There was a seated bar area beside the pool, and a pool house. Mr. [REDACTED] reported that on the end of the pool that is closest to the house the pool is three foot. He reported that at the end where the diving board is located it is approximately 10 foot.

LI [REDACTED] took pictures of the gates, pool, and area surrounding the pool. The pictures can be found in the CPS hard file. LI [REDACTED] thanked Mr. [REDACTED] for allowing her to take pictures at the property.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	07/21/2014	Contact Method:	Face To Face
Contact Time:	05:45 PM	Contact Duration:	Less than 03 Hour
Entered By:	[REDACTED]	Recorded For:	
Location:	[REDACTED]	Created Date:	07/25/2014
Completed date:	07/25/2014	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Collateral Contact		
Contact Sub Type:			

**Children Concerning**

**Participant(s)**

[REDACTED]

**Narrative Details**

Narrative Type: Original      Entry Date/Time: 07/25/2014 11:27 AM      Entered By: [REDACTED]

CPSI got word that CPSI needed to contact the family to find out who owns the property where the incident happened so permission could be granted to take photographs of the scene. CPSI [REDACTED] went back to the Pediatric Intensive care unit to attempt to make contact with the family again. CPSI went to the area just before going through the doors to the actual unit and was able to contact a social worker about the child. she went into the unit and when she came out she reported that the family would talk with CPSI, but it would have to be on their timetable. CPSI said, "Of course," and the social worker went off shift. CPSI sat on one of the benches for some time. There were several people in the little area and they were talking about a child. It became clear that the child they were referring to was the ACV and so CPSI went to two ladies who were talking and crying and apologized, introduced self, and told them that the Department's only concern at this time is to lend whatever support possible. The ladies were [REDACTED] (maternal grandmother) and [REDACTED] (paternal Grandmother). Ms. [REDACTED] reported that the whole family was there with the parents and at least 5 pastors from around the area. She reported that the pastor from the parent's church came off of vacation to be with them. She also reported that the mother and father are outstanding parents and she would tell CPSI if they were not. The ladies provided CPSI with the names and birthdates of the other children and CPSI found out that [REDACTED] was a twin. They said that the family had been swimming in the pool for a long time and that they were coming back up the sidewalk to shower/bathe before leaving the resort. [REDACTED] was last seen on the sidewalk from the pool to the cabin. She was asked who owned the place and she said the name of it was [REDACTED] and the address is [REDACTED]. [REDACTED] she reported that she did not know the owners name. CPSI asked her [REDACTED] about the other people in the pool and she reported there wasn't anyone else in the pool, but there were people in the clubhouse preparing food for some kind of a get together. Nobody saw the child get into the pool, but [REDACTED] a friend of the family, saw the child at the bottom of the pool and pulled him out. She reported that Mr. [REDACTED] was "beside himself with grief." They reported that the Grandfather, Mr. [REDACTED] gave the child CPR for a while and that the EMTs took over when they arrived. They gave CPR for "20 minutes" and they had a faint pulse when they transported the child to [REDACTED]. From there, the child was life-flighted to [REDACTED].

The ladies gave the sibling's names and birthdates as:  
[REDACTED]

They reported that the three children are in the PICU with the parents and they have been since the incident. CPSI got contact numbers and the address for the parents from the ladies and told them that eventually, CPSI would need to



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

---

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

---

talk to the parents and the children, but not right now. CPSI left the hospital leaving instructions with medical personnel that DCS needed to be notified as soon as possible if the child died.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/21/2014

Contact Method:

Contact Time: 04:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: [REDACTED]

Created Date: 01/30/2015

Completed date: 01/30/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

**Children Concerning**

[REDACTED]

**Participant(s)**

[REDACTED]

**Narrative Details**

Narrative Type: Original      Entry Date/Time: 01/30/2015 05:28 PM      Entered By: [REDACTED]

Initial Safety assessment completed on this date and 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: 07/21/2014

Contact Method:

Contact Time: 10:00 AM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location: [REDACTED]

Created Date: 07/22/2014

Completed date: 07/25/2014

Completed By: [REDACTED]

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

Contact Type(s): Case Summary

Contact Sub Type:

**Children Concerning**

[REDACTED]

**Participant(s)**

[REDACTED]

**Narrative Details**

Narrative Type: Original

Entry Date/Time: 07/25/2014 12:05 PM

Entered By: [REDACTED]

Date of Referral: 07/20/2014

Priority Assigned: P1

County: [REDACTED]

Victim (s) [REDACTED]

Victim's Mother: [REDACTED]

Victim's Father: [REDACTED]

Allegations: Lack of Supervision

Alleged Perpetrators: [REDACTED]

CPS/DCS History: Completed. Report can be located in the case hard file. This family has no DCS history

Background Checks: Completed. Report can be located in the case hard file.

CPSI conducted the following searches:

Tennessee Bureau of Investigation Sex Offender Registry as to [REDACTED] with result of not on registry. A copy of such finding is contained within the hard file.

Tennessee Bureau of Investigation Sex Offender Registry as to [REDACTED] with result of not on registry. A copy of such finding is contained within the hard file.

Tennessee Bureau of Investigation Meth Offender Registry as to [REDACTED] with result of not on registry. A copy of finding is contained within the hard file.

Tennessee Bureau of Investigation Meth Offender Registry as to [REDACTED] with result of not on registry. A copy of finding is contained within the hard file.

Tennessee Felony Offender search as to [REDACTED] with result of not on registry. A copy of such findings is contained within the hard file.



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

---

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

---

Tennessee Felony Offender search as to [REDACTED] with result of not on registry. A copy of such findings is contained within the hard file.

National Sexual Offender Search as to [REDACTED] with result of not on registry. A copy of such finding is contained within the hard file.

National Sexual Offender Search as to [REDACTED] with result of not on registry. A copy of such finding is contained within the hard file.

Tennessee Department of Health as to [REDACTED] with result of not on registry. A copy of such finding is contained within the hard file.

Tennessee Department of Health as to [REDACTED] with result of not on registry. A copy of such finding is contained within the hard file.

Report sent to Juvenile Court Judge as per local DCS 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:	07/21/2014	Contact Method:	Face To Face
Contact Time:	03:45 AM	Contact Duration:	Less than 02 Hour
Entered By:	[REDACTED]	Recorded For:	
Location:	[REDACTED]	Created Date:	07/25/2014
Completed date:	07/25/2014	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Initial ACV Face To Face		
Contact Sub Type:			

**Children Concerning**

[REDACTED]

**Participant(s)**

[REDACTED]

**Narrative Details**

Narrative Type: Original Entry Date/Time: 07/25/2014 11:04 AM Entered By: [REDACTED]

CPSI [REDACTED] returned to the Pediatric Intensive Care Unit at [REDACTED] and checked on the status of the child. CPSI was told that he had coded again and that he is still critical. CPSI was told that the child is likely brain dead at this time. CPSI told them that CPSI needed to go up to the unit, but was again told that CPSI could not go. Several conversations were held with supervision and CPSI finally told the front desk person that CPSI had to make contact with the family. CPSI was allowed to go to the unit and CPSI stood close to the room where the boy was being treated and observed him. He was unconscious and his mother crawled into the bed with him. CPSI did not make contact with the family at this time as it was extremely emotional and critical time for the family and the boy. CPSI again talked to supervision (LI [REDACTED] & TC [REDACTED] and was at this time allowed to return to [REDACTED] County and make contact with the family later.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/21/2014

Contact Method: Phone Call

Contact Time: 02:00 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/21/2014

Completed date: 07/21/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community, 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: 07/21/2014 04:59 PM Entered By: [REDACTED]

LI [REDACTED] contact Detective [REDACTED] with the [REDACTED] County Sheriffs Office for an initial CPIT of the case. LI [REDACTED] explained that the referral came in as a near fatality, however the child is at [REDACTED] at this time in critical condition. LI [REDACTED] explained the referral that was called into the Department of Children Services, and advised Det. [REDACTED] that at this time the parents have not been able to be interviewed due to [REDACTED] refused to allow CPSI [REDACTED] to speak with the family or see the child. It was reported to LI [REDACTED] by CPSI [REDACTED] that the child is in critical condition, and that they have had to do CPR on the child since he arrived at [REDACTED]. LI [REDACTED] explained that [REDACTED] is keeping CPSI [REDACTED] advised to the child, [REDACTED] condition, however due to his critical nature CPSI [REDACTED] has not been able to speak with the parents or see the child.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/21/2014

Contact Method: Attempted Face To Face

Contact Time: 12:45 AM

Contact Duration: Less than 01 Hour

Entered By: [REDACTED]

Recorded For:

Location: [REDACTED]

Created Date: 07/25/2014

Completed date: 07/25/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Initial ACV Face To Face

Contact Sub Type:

**Children Concerning**

[REDACTED]

**Participant(s)**

[REDACTED]

**Narrative Details**

Narrative Type: Original      Entry Date/Time: 07/25/2014 10:56 AM      Entered By: [REDACTED]

CPSI [REDACTED] went to [REDACTED] to make contact with this family. CPSI was told by the front desk that the medical personnel did not expect the child to survive and they would not allow CPSI to go up to the PICU at that time. They reported that they were working on the child and that he had recently "coded" and the family is with the child. CPSI told them that contact had to be made with another child in the NICU and so CPSI would return later.



**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: 07/20/2014

Contact Method:

Contact Time: 11:23 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/21/2014

Completed date: 07/21/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/21/2014 05:06 PM Entered By: [REDACTED]

LI [REDACTED] attempted to contact IC [REDACTED] to advise him about the near fatality report that was received at 11:10p.m. There was no answer so LI [REDACTED] send IC [REDACTED] a text message explaining that we received a report for a near fatality, and that CPSI [REDACTED] was on her way to [REDACTED] at this time. LI [REDACTED] explained that this is a [REDACTED] County case, and the child was life flighted to [REDACTED] because he was found at the bottom of a swimming pool.



**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: 07/20/2014

Contact Method:

Contact Time: 06:40 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 12/16/2014

Completed date: 12/16/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/16/2014 08:34 AM Entered By: [REDACTED]

As per [REDACTED] County Sheriff's Deputy [REDACTED] The parents of the child were not interviewed at the scene. By the time Deputy [REDACTED] arrived on scene, they had left to follow the child to [REDACTED]



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/20/2014

Contact Method: Face To Face

Contact Time: 06:35 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 12/16/2014

Completed date: 12/16/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original    Entry Date/Time: 12/16/2014 08:30 AM    Entered By: [REDACTED]

As per [REDACTED] County Deputy [REDACTED]: Mr [REDACTED] (friend of the family of victim) reported that he was the one that found the child at the bottom of the pool. He reported that he was with [REDACTED] daughter at the other end of the pool. When [REDACTED] daughter finished swimming, he gathered her and was heading toward the house. That was when he spotted the child at the bottom of the pool. [REDACTED] stated that he immediately went into the pool and pulled the child out. At that time [REDACTED] began CPR on the child.

Narrative Type: Addendum 1    Entry Date/Time: 12/16/2014 08:35 AM    Entered By: [REDACTED]

Please see hard file for full details.



**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:	07/20/2014	Contact Method:	Face To Face
Contact Time:	06:25 PM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	12/16/2014
Completed date:	12/16/2014	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Collateral Contact		
Contact Sub Type:			

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

[REDACTED]

**Narrative Details**

Narrative Type: Original    Entry Date/Time: 12/16/2014 08:24 AM    Entered By: [REDACTED]

As per [REDACTED] County Sheriff's Deputy [REDACTED] [REDACTED] (uncle to the victim) was alerted to the situation by Mr. [REDACTED] and he shouted for [REDACTED] to help [REDACTED] get the child out of the pool. He went and called 911. He also told Deputy that [REDACTED] had been headed up the walk with the rest of the family the last time he had been seen.

Narrative Type: Addendum 2    Entry Date/Time: 01/23/2015 10:32 AM    Entered By: [REDACTED]

For full details of these interviews, please see the uploaded Law Enforcement reports and copies of said reports are also in the CPS hard file.

Narrative Type: Addendum 1    Entry Date/Time: 12/16/2014 08:34 AM    Entered By: [REDACTED]

Please see hard file for full details.



**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: 07/20/2014

Contact Method: Face To Face

Contact Time: 06:15 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 12/16/2014

Completed date: 12/16/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/16/2014 07:56 AM Entered By: [REDACTED]

As per [REDACTED] County Deputy [REDACTED]: Mr. [REDACTED] (grandfather of victim) was interviewed. He reported that he had last seen the child walking up the steps from the pool. He did not see him again until he was found in the pool. He and [REDACTED] (friend of family) pulled the child out of the pool and Mr. [REDACTED] started CPR.

Narrative Type: Addendum 2 Entry Date/Time: 01/23/2015 10:33 AM Entered By: [REDACTED]

For full details of these interviews, please see the uploaded Law Enforcement reports and copies of said reports are also in the CPS hard file.

Narrative Type: Addendum 1 Entry Date/Time: 12/16/2014 08:34 AM Entered By: [REDACTED]

Please see hard file for full details.



**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: 07/20/2014

Contact Method:

Contact Time: 06:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 01/28/2015

Completed date: 01/28/2015

Completed By: [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 01/28/2015 11:09 AM Entered By: [REDACTED]

[REDACTED] County Referral

Priority 1 Response- Near Death

This investigation is assigned to CPSI [REDACTED] for the purposes of investigation. Notification to the Judge, DA, and law enforcement will be completed pursuant to local protocol.

Referral:

[REDACTED] (4) is in the custody of his parents, [REDACTED] and [REDACTED]. [REDACTED] has no known special needs or disabilities. It is unknown if the family has history with the Tennessee Department of Children Services. There are no known safety concerns for a case worker going out to the home. [REDACTED] and [REDACTED] have three other children, names and information is unknown.

On July 20, 2014 law enforcement responded to the cabin in [REDACTED] due to a child possibly drowning. [REDACTED] County officers responded prior to [REDACTED] County officers though it ended up being [REDACTED] County Jurisdiction. When [REDACTED] County officers arrived, it was discovered that [REDACTED] was nonresponsive and blue. The grandfather, [REDACTED] was performing CPR on [REDACTED]. First responder's and then EMTs both took over the CPR. [REDACTED] was transported to the hospital in [REDACTED] and was going to be life flighted to [REDACTED]. At last report, [REDACTED] appeared to be breathing; however, it is unknown what condition he is in at this time.

A few family members were interviewed. [REDACTED] stated that the last time he saw [REDACTED] he was walking up towards the cabin away from the pool. The pool is about 20 to 30 yards away from the family's cabin. [REDACTED] stated that [REDACTED] was only out of the family's site for about three to four minutes. [REDACTED] did not see [REDACTED] again until a friend of the family; [REDACTED] spotted [REDACTED] at the bottom of the pool. [REDACTED] was the one the pulled [REDACTED] out of the pool. [REDACTED] and [REDACTED] were inside the home packing. It is unknown who was supposed to be watching the child. No one appeared to be aware that [REDACTED] was near the pool. It is unknown how long [REDACTED] had been at the bottom of the pool.

The parents were not interviewed due to the fact that they were in the ambulance by the time the interviews began.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

[REDACTED] and another relative, [REDACTED] was interview and gave similar statements. [REDACTED] is the uncle to [REDACTED] [REDACTED] was interviewed as well. It is unknown if anyone has a criminal history with abuse or drug related charges. There had been drinking at the cabin, but no one appeared to be intoxicated.

A report was taken by the [REDACTED] County Sheriff's Department and the number is [REDACTED] It is unknown if there is going to be further investigation by law enforcement at this time.



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

**Assessment**

Family Name: [REDACTED]

TN DCS Intake ID #: [REDACTED]

County: [REDACTED]

Worker: [REDACTED]

Date of Referral: 7/20/14 10:11 PM

Date of Assessment: 7/21/14 12:00 AM

Assessment Type: Initial

Number of Children in the Household: 4

**Section 1: Immediate Harm Factors**

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

Yes    No

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



## Tennessee Department of Children's Services

### SDM™ Safety Assessment

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

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

#### Section 2: Safety Interventions

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

#### Non-Protective Custody Interventions:

1. Intervention or direct services by worker as part of a safety plan.
2. Use of family, neighbors, or other individuals in the community as safety resources.
3. Use of community agencies or services as immediate safety resources.
4. Have caretaker appropriately protect the victim from the alleged perpetrator.
5. Have the alleged perpetrator leave the home, either voluntarily or in response to legal action.
6. Have the non-offending caretaker move to a safe environment with the child.
7. Legal action planned or initiated - child remains in the home.
8. Other (Specify): \_\_\_\_\_

#### Protective Custody Interventions:

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



Tennessee Department of Children's Services  
SDM™ Safety Assessment

Section 3: Safety Decision

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

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

Children Removed

Children Not Removed

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

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

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

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