



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

Intake

Intake ID: [REDACTED]
 Intake Taken By: [REDACTED] Intake Date/Time: 07/24/2014 07:17 PM [REDACTED]
 Track Assigned: Investigation Priority Assigned: 1
 Screened By: [REDACTED]
 Date Screened: 07/24/2014

Investigation

Investigation ID: [REDACTED]
 First County/Region: [REDACTED]
 Date/Time Assigned : 07/25/2014 09:20 AM
 First Team Leader Assigned: [REDACTED] Date/Time 07/25/2014 12:00 AM
 First Case Manager [REDACTED] Date/Time 07/25/2014 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	7 Yrs	Neglect Death	Yes	Unknown Participant [REDACTED], Unknown	Other Relative

Referent(s)

Referent Name: [REDACTED] Role to Alleged Victim(s): [REDACTED]
 Referent Address: [REDACTED]
 Referent Phone Number: [REDACTED]
 Type of Contact: I-3 Phone
 Notification: None
 Narrative: *****THIS CHILD IS NOT IN DCS CUSTODY*****
 TFACTS: None found based on the information given
 Open Court Custody/FSS/FCIP None
 Closed Court Custody None
 Open CPS None
 Substantiated None
 Fatality None



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

Screened out None

History (not listed above): None

County: [REDACTED]

Notification: None

School/ Daycare: N/A

Native American Descent: None

Directions: None

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

Reporter states:

*****THIS CHILD IS NOT IN DCS CUSTODY*****

[REDACTED] (5) was in the custody of his mother, [REDACTED] and father, name unknown. It is unknown if there are any other children or adults residing in the home. [REDACTED] was a special needs child with a chromosome deletion syndrome. 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. The reporter does not know if the family has history with law enforcement.

On July 24, 2014 [REDACTED] was taken to [REDACTED] Hospital by ambulance after being found in a pond near his residence by [REDACTED]. It was stated that [REDACTED] had wandered off from the home for an extended period of time; it is unknown when it was noticed that he was missing or how long he had been gone before being located. It is unknown where [REDACTED] or the father were at the time of [REDACTED] initial disappearance; it is unknown if the father was even at the home when the incident occurred. At some point, [REDACTED] went looking for [REDACTED] and found him in the pond non-responsive. [REDACTED] contacted 911 and rode in the ambulance with [REDACTED] to the hospital. It is unknown what measures were taken initially by the parents when they found out [REDACTED] was missing from the home. The reporter states that they do not know what condition [REDACTED] was in at the time that emergency personnel responded to the scene. By the time [REDACTED] arrived at the hospital he had fully coded. The time of death was noted to be 20:07 [REDACTED].

It is unknown if law enforcement has been contacted, but it is noted that the reporter has not contacted them at this time. The child's body will be submitted to the Medical Examiner's Office for further evaluation. There were no other noted injuries seen on [REDACTED] to suggest other forms of abuse. Both [REDACTED] and the father are present at [REDACTED] Hospital as well as other family members.

The reporter would like the worker with the Department to contact local law enforcement.

This is all the information given at this time.

Per SDM: Investigation Track P 1-Child Fatality-[REDACTED] on 7/24/14 at 7:40 PM [REDACTED]

[REDACTED] TL on 07/24/14 @ 8:01 PM.

[REDACTED] received on 07/24/14 @ 8:04 PM.

Notified Child Death Group: [REDACTED]

RA [REDACTED] was also copied on the notification email.



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

Participant(s)

Name: [REDACTED]

Gender: Female

Date of Birth:

Participant ID: [REDACTED]

SSN:

Race:

Age:

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN:

Race: White

Age: 7 Yrs

Address: [REDACTED]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact: [REDACTED]

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], Unknown

Gender:

Date of Birth:

Partipant ID: [REDACTED]

SSN:

Race:

Age:

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

A. Investigation

Case Name: [REDACTED]

Investigation ID: [REDACTED]

Referral Date: 07/24/2014

Assignment Date: 07/25/2014

Street Address:

City/State/Zip:

B. Allegation

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

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: This case is being closed with the classification of allegation unsubstantiated/alleged perpetrator unsubstantiated.

D. Case Workers

Case Worker: [REDACTED]

Date: 08/10/2015

Team Leader: [REDACTED]

Date: 08/11/2015

E. Investigation Summary

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

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

The family was in the room with [REDACTED]. CPSI [REDACTED] did observe [REDACTED] in the hospital bed. [REDACTED] was in the bed at children's with tubing in his mouth. [REDACTED] was deceased upon CPS [REDACTED] arrival. The family was crying and the mother did not want to leave the side of [REDACTED]. [REDACTED] did have her eyes were almost swollen shut due to crying. [REDACTED] was hugging family crying and stated this is my fault this is all my fault for this I should have double checked the doors. [REDACTED] was the pastor and was saying a prayer for [REDACTED] and the family.

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

On 5/7/15 Child Protective Investigative Team (CPIT), present for the meeting were Child Protective Service Investigator (CPSI) [REDACTED] of the Child Advocacy Center Safe Harbor (CAC), District Attorney (DA), [REDACTED] Director of [REDACTED] Juvenile Court; [REDACTED] Sheriff Department; Detective [REDACTED] Police Department; Patrolman/SRO [REDACTED]. The team agreed that this case can be Unsubstantiated; this case was not referred for prosecution.



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

Case Name : [REDACTED]

Investigation ID: [REDACTED]

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

Alleged perpetrator is unknown.

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

Reporter states: [REDACTED] (5) was in the custody of his mother, [REDACTED] and father, name unknown. It is unknown if there are any other children or adults residing in the home. [REDACTED] was a special needs child with a chromosome deletion syndrome. 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. The reporter does not know if the family has history with law enforcement. On July 24, 2014 [REDACTED] was taken to [REDACTED] Children's Hospital by ambulance after being found in a pond near his residence by [REDACTED]. It was stated that [REDACTED] had wandered off from the home for an extended period of time; it is unknown when it was noticed that he was missing or how long he had been gone before being located. It is unknown where [REDACTED] or the father were at the time of [REDACTED] initial disappearance; it is unknown if the father was even at the home when the incident occurred. At some point, [REDACTED] went looking for [REDACTED] and found him in the pond non-responsive. [REDACTED] contacted 911 and rode in the ambulance with [REDACTED] to the hospital. It is unknown what measures were taken initially by the parents when they found out [REDACTED] was missing from the home. The reporter states that they do not know what condition [REDACTED] was in at the time that emergency personnel responded to the scene. By the time [REDACTED] arrived at the hospital he had fully coded. The time of death was noted to be 20:07 [REDACTED]. It is unknown if law enforcement has been contacted, but it is noted that the reporter has not contacted them at this time. The child's body will be submitted to the Medical Examiner's Office for further evaluation. There were no other noted injuries seen on [REDACTED] to suggest other forms of abuse. Both [REDACTED] and the father are present at [REDACTED] Children's Hospital as well as other family members. The reporter would like the worker with the Department to contact local law enforcement.

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

An interview was conducted with the Chief of Police in [REDACTED]. [REDACTED] reported he patrols numerous times and has not seen any kids and have never seen anyone by the pond. [REDACTED] stated they were performing CPR when I got there and the lady looked tired so I took over. [REDACTED] stated the mother was giving the child breaths and then the volunteer fireman and I continued to work on the child and when EMS arrived we scoped him up and we took him to the EMS. The neighbor was out mowing his grass and he heard the dogs barking reported [REDACTED]. The neighbor is an alderman. [REDACTED] stated the neighbor was out in the pond about 5 ft.

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 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] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 10/09/2015

Contact Method:

Contact Time: 03:48 PM

Contact Duration:

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 10/09/2015

Completed date: 10/09/2015

Completed By: [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 10/09/2015 02:49 PM Entered By: [REDACTED]

This case has been reviewed and approved for closure by Lead Investigator (LI) [REDACTED]. Notice of the classification decision to the [REDACTED] Juvenile Court Judge will be provided by LI [REDACTED]. Notification of the classification to the district attorney will be provided by LI when applicable. Notice of the classification to the DCS Legal Attorney will be provided by LI [REDACTED]. All the appropriate paperwork has been reviewed and signed if applicable by LI [REDACTED].

This case was reviewed and approved for closure by Deputy Director [REDACTED] on this date.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	10/09/2015	Contact Method:	
Contact Time:	09:15 AM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	10/12/2015
Completed date:	10/12/2015	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: 10/12/2015 01:51 PM Entered By: [REDACTED]
 This case has been reviewed by Deputy Director of Investigations [REDACTED] and has been approved for closure.

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	10/09/2015	Contact Method:	
Contact Time:	09:15 AM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	10/12/2015
Completed date:	10/12/2015	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: 10/12/2015 01:51 PM Entered By: [REDACTED]
 This case has been reviewed by Deputy Director of Investigations [REDACTED] and has been approved for closure.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	10/09/2015	Contact Method:	
Contact Time:	09:15 AM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	10/12/2015
Completed date:	10/12/2015	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: 10/12/2015 01:51 PM Entered By: [REDACTED]
 This case has been reviewed by Deputy Director of Investigations [REDACTED] and has been approved for closure.

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	10/09/2015	Contact Method:	
Contact Time:	09:15 AM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	10/12/2015
Completed date:	10/12/2015	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: 10/12/2015 01:51 PM Entered By: [REDACTED]
 This case has been reviewed by Deputy Director of Investigations [REDACTED] and has been approved for closure.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	10/09/2015	Contact Method:	
Contact Time:	09:15 AM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	10/12/2015
Completed date:	10/12/2015	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: 10/12/2015 01:51 PM Entered By: [REDACTED]
 This case has been reviewed by Deputy Director of Investigations [REDACTED] and has been approved for closure.

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	10/09/2015	Contact Method:	
Contact Time:	09:15 AM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	10/12/2015
Completed date:	10/12/2015	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: 10/12/2015 01:51 PM Entered By: [REDACTED]
 This case has been reviewed by Deputy Director of Investigations [REDACTED] and has been approved for closure.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	10/09/2015	Contact Method:	
Contact Time:	09:15 AM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	10/12/2015
Completed date:	10/12/2015	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: 10/12/2015 01:51 PM Entered By: [REDACTED]
 This case has been reviewed by Deputy Director of Investigations [REDACTED] and has been approved for closure.

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	10/09/2015	Contact Method:	
Contact Time:	09:15 AM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	10/12/2015
Completed date:	10/12/2015	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: 10/12/2015 01:51 PM Entered By: [REDACTED]
 This case has been reviewed by Deputy Director of Investigations [REDACTED] and has been approved for closure.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	10/09/2015	Contact Method:	
Contact Time:	09:15 AM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	10/12/2015
Completed date:	10/12/2015	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: 10/12/2015 01:51 PM Entered By: [REDACTED]
 This case has been reviewed by Deputy Director of Investigations [REDACTED] and has been approved for closure.

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	10/09/2015	Contact Method:	
Contact Time:	09:15 AM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	10/12/2015
Completed date:	10/12/2015	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: 10/12/2015 01:51 PM Entered By: [REDACTED]
 This case has been reviewed by Deputy Director of Investigations [REDACTED] and has been approved for closure.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	10/09/2015	Contact Method:	
Contact Time:	09:15 AM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	10/12/2015
Completed date:	10/12/2015	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: 10/12/2015 01:51 PM Entered By: [REDACTED]
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Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	10/09/2015	Contact Method:	
Contact Time:	09:15 AM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	10/12/2015
Completed date:	10/12/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
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Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

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Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	10/09/2015	Contact Method:	
Contact Time:	09:15 AM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	10/12/2015
Completed date:	10/12/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
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Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 10/12/2015 01:51 PM Entered By: [REDACTED]
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Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	10/09/2015	Contact Method:	
Contact Time:	09:15 AM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	10/12/2015
Completed date:	10/12/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
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Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

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Contact Duration:

Entered By: [REDACTED]

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Location:

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Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	09/02/2015	Contact Method:	
Contact Time:	01:00 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	09/02/2015
Completed date:	09/02/2015	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: 09/02/2015 01:23 PM Entered By: [REDACTED]
 This case has been reviewed by Deputy Director of Investigations [REDACTED] and feedback has been given to the team via email.

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	09/02/2015	Contact Method:	
Contact Time:	01:00 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	09/02/2015
Completed date:	09/02/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

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

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Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 09/02/2015 Contact Method:
 Contact Time: 01:00 PM Contact Duration:
 Entered By: [REDACTED] Recorded For: [REDACTED]
 Location: Created Date: 09/02/2015
 Completed date: 09/02/2015 Completed By: [REDACTED]
 Purpose(s): Safety - Child/Community
 Contact Type(s): Administrative Review
 Contact Sub Type:

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

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Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 09/02/2015 Contact Method:
 Contact Time: 01:00 PM Contact Duration:
 Entered By: [REDACTED] Recorded For: [REDACTED]
 Location: Created Date: 09/02/2015
 Completed date: 09/02/2015 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: 09/02/2015 01:23 PM Entered By: [REDACTED]
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Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 09/02/2015 Contact Method:
 Contact Time: 01:00 PM Contact Duration:
 Entered By: [REDACTED] Recorded For: [REDACTED]
 Location: Created Date: 09/02/2015
 Completed date: 09/02/2015 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: 09/02/2015 01:23 PM Entered By: [REDACTED]
 This case has been reviewed by Deputy Director of Investigations [REDACTED] and feedback has been given to the team via email.

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 09/02/2015 Contact Method:
 Contact Time: 01:00 PM Contact Duration:
 Entered By: [REDACTED] Recorded For: [REDACTED]
 Location: Created Date: 09/02/2015
 Completed date: 09/02/2015 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: 09/02/2015 01:23 PM Entered By: [REDACTED]
 This case has been reviewed by Deputy Director of Investigations [REDACTED] and feedback has been given to the team via email.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 09/02/2015 Contact Method:
 Contact Time: 01:00 PM Contact Duration:
 Entered By: [REDACTED] Recorded For: [REDACTED]
 Location: Created Date: 09/02/2015
 Completed date: 09/02/2015 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: 09/02/2015 01:23 PM Entered By: [REDACTED]
 This case has been reviewed by Deputy Director of Investigations [REDACTED] and feedback has been given to the team via email.

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 09/02/2015 Contact Method:
 Contact Time: 01:00 PM Contact Duration:
 Entered By: [REDACTED] Recorded For: [REDACTED]
 Location: Created Date: 09/02/2015
 Completed date: 09/02/2015 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: 09/02/2015 01:23 PM Entered By: [REDACTED]
 This case has been reviewed by Deputy Director of Investigations [REDACTED] and feedback has been given to the team via email.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	09/02/2015	Contact Method:	
Contact Time:	01:00 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	09/02/2015
Completed date:	09/02/2015	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: 09/02/2015 01:23 PM Entered By: [REDACTED]

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

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	09/02/2015	Contact Method:	
Contact Time:	01:00 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	09/02/2015
Completed date:	09/02/2015	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: 09/02/2015 01:23 PM Entered By: [REDACTED]

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



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 09/02/2015 Contact Method:
 Contact Time: 01:00 PM Contact Duration:
 Entered By: [REDACTED] Recorded For: [REDACTED]
 Location: Created Date: 09/02/2015
 Completed date: 09/02/2015 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: 09/02/2015 01:23 PM Entered By: [REDACTED]
 This case has been reviewed by Deputy Director of Investigations [REDACTED] and feedback has been given to the team via email.

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 09/02/2015 Contact Method:
 Contact Time: 01:00 PM Contact Duration:
 Entered By: [REDACTED] Recorded For: [REDACTED]
 Location: Created Date: 09/02/2015
 Completed date: 09/02/2015 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: 09/02/2015 01:23 PM Entered By: [REDACTED]
 This case has been reviewed by Deputy Director of Investigations [REDACTED] and feedback has been given to the team via email.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	09/02/2015	Contact Method:	
Contact Time:	01:00 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	09/02/2015
Completed date:	09/02/2015	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: 09/02/2015 01:23 PM Entered By: [REDACTED]

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

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	09/02/2015	Contact Method:	
Contact Time:	01:00 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	09/02/2015
Completed date:	09/02/2015	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: 09/02/2015 01:23 PM Entered By: [REDACTED]

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



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/02/2015

Contact Method:

Contact Time: 01:00 PM

Contact Duration:

Entered By: [REDACTED]

Recorded For: [REDACTED]

Location:

Created Date: 09/02/2015

Completed date: 09/02/2015

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: 09/02/2015 01:23 PM Entered By: [REDACTED]

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



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]	Case Name: [REDACTED]
Case Status: Close	Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]	Status: Completed
Contact Date: 08/10/2015	Contact Method:
Contact Time: 09:40 AM	Contact Duration:
Entered By: [REDACTED]	Recorded For:
Location:	Created Date: 08/10/2015
Completed date: 08/10/2015	Completed By: [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being	
Contact Type(s): Case Summary	
Contact Sub Type:	

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

Narrative Type: Original Entry Date/Time: 08/10/2015 09:10 AM Entered By: [REDACTED]

Closing Summary for Child Death Investigation

[REDACTED]:

The Department of Children's Services (DCS) Office of Child and Safety received a referral on 07/24/14 with an allegation of Child Neglect Death regarding [REDACTED]. The referral was screened into [REDACTED] as P1 with allegations of Neglect Death, severe. The alleged child victim is [REDACTED], age 5 year old. The alleged perpetrator is unknown. [REDACTED] was a special needs child with a chromosome deletion syndrome. It was reported [REDACTED] medical condition caused him to be unsteady in his walk and was off balance without his shoes with inserts. [REDACTED] was barefoot due to mother, [REDACTED], taking his shoes off when the family got home from visiting the grandmother at approximately 6:30 pm. [REDACTED] was reported to have been placed on the couch while mother went to start fixing supper. [REDACTED] was reported by the siblings, [REDACTED] and [REDACTED] to be playing hide and seek. The mother, [REDACTED], became distraught and begins looking for [REDACTED] immediately. The siblings began looking for [REDACTED] in the residence and then [REDACTED] remembered seeing the basement door opened a little bit. [REDACTED] went outside and began looking for [REDACTED] outside. [REDACTED] reported the garage door was open and the neighbor was weed eating so I approached him. [REDACTED] stated the neighbor stated to me that he saw the child on the top of the driveway and I thought [REDACTED] was in the woods because it is the closest thing to the driveway. [REDACTED] stated we did not spot him and we came to the driveway again and we took a few steps in our driveway and we could see [REDACTED] at this point face down in the pond with his green shirt on. [REDACTED] stated I got [REDACTED] on the bank and I first shake him to get a response and he was limp and lifeless and I gave him a breath and there was water that came out of his mouth and I turned him on his side to get it out and I started chest compression [REDACTED] stated the neighbor's wife came out to give compressions and she was trainer for CPR. [REDACTED] stated we never got a pulse and then the police got there and the fire truck and then an ambulance. [REDACTED] reported [REDACTED] could not swim [REDACTED] stated [REDACTED] has medical conditions of hypotonia, muscle weakness, apraxia and it is a motor planning the communication with his brain and muscle; every task is learned through lots of repetition he had an abnormal off balance gate and especially on uneven terrain. [REDACTED] reported the water in the pond was chest high on me when I went after [REDACTED] in the pond. [REDACTED] stated When [REDACTED] has his shoes on they have inserts that helped him maintain his balance [REDACTED] stated [REDACTED] was bare foot and it's my fault because I took his shoes off. [REDACTED] Chief of Police in [REDACTED] reported he patrols



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

numerous times and has not seen any kids and have never seen anyone by the pond. Chief stated they were performing CPR when I got there and the lady looked tired so I took over. Chief stated the mother was giving the child breaths and then the volunteer fireman and I continued to work on the child and when EMS arrived we scooped him up and we took him to the EMS truck. The neighbor was out mowing his grass and he heard the dogs barking reported [REDACTED] reported the neighbor is an [REDACTED] [REDACTED] reported he was dispatched approximately 7:05 pm to the scene. By the time [REDACTED] arrived at the hospital, Children's Hospital, he had fully coded. The time of death was noted to be 20:07 [REDACTED]. The investigation into this incident was conducted by [REDACTED] Chief of Police [REDACTED] Sheriff Department assisted and Office of Child and Safety CPSI (Child Protective investigator [REDACTED]).

The report to DCS listed unknown perpetrator as the alleged perpetrator of Child Neglect Death. Numerous interviews were conducted.

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

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

The case was presented to the [REDACTED] Child Protective Investigation Team on 5/7/15. Team members were in agreement that there was not sufficient evidence to substantiate the allegation of Child Neglect Death.

There is not a preponderance of evidence to substantiate the allegation of Child Neglect Death.

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



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/01/2015

Contact Method:

Contact Time: 09:51 AM

Contact Duration:

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 07/01/2015

Completed date: 07/01/2015

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/01/2015 09:15 AM Entered By: [REDACTED]

Lead Investigator spoke with Child Protective Service Investigator (CPSI), [REDACTED] regarding the [REDACTED] investigation. CPSI reports that the autopsy report has been received and that she will scan this and all medical documentation into the investigation. CPSI will need to bring the investigation current and complete all investigative tasks prior to submitting for final review. The [REDACTED] case has been presented to and signed off on by the Child Protective Service Investigative Team (CPIT) as Allegation Unsubstantiated/Perpetrator Unsubstantiated.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 06/29/2015

Contact Method: Face To Face

Contact Time: 01:00 PM

Contact Duration:

Entered By: [REDACTED]

Recorded For: [REDACTED]

Location: Family Home

Created Date: 08/09/2015

Completed date: 08/09/2015

Completed By: [REDACTED]

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

Contact Type(s): Sibling Interview/Observation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/09/2015 02:36 PM Entered By: [REDACTED]

The children [REDACTED] and [REDACTED] reported they are doing well. They reported they are attending counseling. There was no safety concerns noted with the girls at this time.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 05/07/2015

Contact Method: Face To Face

Contact Time: 09:00 AM

Contact Duration:

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 08/10/2015

Completed date: 08/10/2015

Completed By: [REDACTED]

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

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

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/10/2015 07:08 AM Entered By: [REDACTED]

On 5/7/15 Child Protective Investigative Team (CPIT), present for the meeting were Child Protective Service Investigator (CPSI) [REDACTED] of the Child Advocacy Center Safe Harbor (CAC), District Attorney (DA), [REDACTED] Director of [REDACTED] Juvenile Court; [REDACTED] Sheriff Department; Detective [REDACTED] Police Department; Patrolman/SRO [REDACTED]. The team agreed that this case can be Unsubstantiated; this case was not referred for prosecution.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 05/05/2015

Contact Method:

Contact Time: 02:00 PM

Contact Duration:

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/10/2015

Completed date: 08/10/2015

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/10/2015 09:15 AM Entered By: [REDACTED]

A fax was received from [REDACTED] Medical Clinic on 5-5-15 from Dr. [REDACTED] Office on the final autopsy report on [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: System Completed

Contact Date: 04/12/2015

Contact Method: Face To Face

Contact Time: 11:45 AM

Contact Duration:

Entered By: [REDACTED]

Recorded For:

Location: School

Created Date: 08/09/2015

Completed date: 08/10/2015

Completed By: System Completed

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

Contact Type(s): Sibling Interview/Observation

Contact Sub Type:

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

Narrative Type: Original

Entry Date/Time:

Entered By:



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 03/10/2015

Contact Method:

Contact Time: 01:30 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 03/10/2015

Completed date: 03/10/2015

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/10/2015 12:33 PM Entered By: [REDACTED]

Lead Investigator staffed the [REDACTED] case with Child Protective Service Investigator (CPSI), [REDACTED] on this date. CPSI reports that she has been having monthly contact with the remaining siblings in the case. The children are receiving counseling to help address trauma as the result of their brothers death. The autopsy report for this case has not been completed. Case will remain open until autopsy report is back and all investigative tasks have been complete. CPSI [REDACTED] will need to continue to see the children monthly until the case is either closed or transferred to FSS.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/18/2014

Contact Method: Face To Face

Contact Time: 09:15 AM

Contact Duration:

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 08/10/2015

Completed date: 08/10/2015

Completed By: [REDACTED]

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

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

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/10/2015 07:15 AM Entered By: [REDACTED]

On 12/18/14 Child Protective Investigative Team (CPIT), present for the meeting were Child Protective Service Investigator (CPSI) [REDACTED] of the Child Advocacy Center [REDACTED] (CAC), District Attorney (DA), [REDACTED] and [REDACTED] Police Department; Patrolman/SRO [REDACTED]. This case was reset for the next CPIT hearing due to not having the autopsy back.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/08/2014

Contact Method: Face To Face

Contact Time: 01:45 PM

Contact Duration:

Entered By: [REDACTED]

Recorded For:

Location: School

Created Date: 08/10/2015

Completed date: 08/10/2015

Completed By: [REDACTED]

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

Contact Type(s): Sibling Interview/Observation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/10/2015 07:42 AM Entered By: [REDACTED]

On 12/8/14 at approximately 1:45 pm Child Protective Service Investigator (CPSI) [REDACTED] met face to face with [REDACTED] at [REDACTED] in [REDACTED]. A Private interview was conducted with sister, [REDACTED] 12 years old white female. The child felt about school, services, family. The child expressed no concerns. CPSI did discuss what the case planning process was going to be in an age appropriate manner with [REDACTED] so that the child would not be scared and to reduce trauma. [REDACTED] has no physical disabilities or limitations noted at this time. [REDACTED] does not wear any medical devices such as glasses, braces, hearing aids.

[REDACTED] is currently in the custody and care of her mother and father, [REDACTED] and [REDACTED]. [REDACTED] is not considered to be a danger to herself, others or to the community at this time.

[REDACTED] reported the following:

I am doing great. I am getting ready for Christmas. I know what I want for Christmas. CPSI asked what [REDACTED] wanted for Christmas [REDACTED] stated I don't think I will be able to get I will get it. [REDACTED] whispered over and said I want my brother back but I know that wont happen. [REDACTED] did give CPSI a hug before CPSI left. [REDACTED] went back to class.

On 12/8/14 at approximately 1:50 pm Child Protective Service Investigator (CPSI) [REDACTED] met face to face with [REDACTED] at [REDACTED] School in [REDACTED] TN. A Private interview was conducted with sister, [REDACTED] 9 years old white female.

[REDACTED] reported the following: I am excited Christmas is almost here. I still don't know what I want for Christmas. I am excited though.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 11/20/2014

Contact Method:

Contact Time: 02:16 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 11/20/2014

Completed date: 11/20/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 11/20/2014 01:19 PM Entered By: [REDACTED]

CPSI [REDACTED] contacted the forensic department at [REDACTED] at [REDACTED] and spoke with [REDACTED] [REDACTED] reported the final autopsy is still finalizing and it is not ready at this time. [REDACTED] stated she will check the hard file and see if there is a paper copy.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 11/20/2014

Contact Method: Face To Face

Contact Time: 09:50 AM

Contact Duration:

Entered By: [REDACTED]

Recorded For:

Location: School

Created Date: 08/10/2015

Completed date: 08/10/2015

Completed By: [REDACTED]

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

Contact Type(s): Sibling Interview/Observation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/10/2015 07:34 AM Entered By: [REDACTED]

On 11/20/14 at approximately 9:50 am Child Protective Service Investigator (CPSI) [REDACTED] met face to face with [REDACTED] at [REDACTED] School in [REDACTED] TN. A Private interview was conducted with alleged victim, [REDACTED] 9 years old white female. The child felt about school, services, family. The child expressed no concerns. CPSI did discuss what the case planning process was going to be in an age appropriate manner with [REDACTED] so that the child would not be scared and to reduce trauma. [REDACTED] has no physical disabilities or limitations noted at this time. [REDACTED] does not wear any medical devices such as glasses, braces, hearing aids.

[REDACTED] is currently in the custody and care of her mother and father, [REDACTED] and [REDACTED]. [REDACTED] is not considered to be a danger to herself, others or to the community at this time.

[REDACTED] reported the following:

I am doing good. I am seeing someone and I get to talk to them about what happened. They are really nice.

Narrative Type: Addendum 1 Entry Date/Time: 08/10/2015 07:42 AM Entered By: [REDACTED]

not the alleged victim.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 11/20/2014

Contact Method: Face To Face

Contact Time: 09:45 AM

Contact Duration:

Entered By: [REDACTED]

Recorded For:

Location: School

Created Date: 08/10/2015

Completed date: 08/10/2015

Completed By: [REDACTED]

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

Contact Type(s): Sibling Interview/Observation

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 08/10/2015 07:32 AM Entered By: [REDACTED]

On 11/20/14 at approximately 9:45 am Child Protective Service Investigator (CPSI) [REDACTED] met face to face with [REDACTED] at [REDACTED] School in [REDACTED] TN. A Private interview was conducted with alleged victim, [REDACTED] 12 years old white female. The child felt about school, services, family. The child expressed no concerns. CPSI did discuss what the case planning process was going to be in an age appropriate manner with [REDACTED] so that the child would not be scared and to reduce trauma. [REDACTED] has no physical disabilities or limitations noted at this time. [REDACTED] does not wear any medical devices such as glasses, braces, hearing aids. [REDACTED] is currently in the custody and care of her mother and father, [REDACTED] and [REDACTED]. [REDACTED] is not considered to be a danger to herself, others or to the community at this time. [REDACTED] reported the following:

Things have been different. We are now going to counseling. Mom cries a lot and I can hear her at night. I cry sometimes too. My little sister has not taken it well at all she cries more than anyone I think.

Narrative Type: Addendum 1 Entry Date/Time: 08/10/2015 07:43 AM Entered By: [REDACTED]

not the alleged victim



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 11/18/2014

Contact Method: Face To Face

Contact Time: 09:00 AM

Contact Duration:

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 08/10/2015

Completed date: 08/10/2015

Completed By: [REDACTED]

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

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

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/10/2015 07:14 AM Entered By: [REDACTED]

On 11/18/14 Child Protective Investigative Team (CPIT), present for the meeting were Child Protective Service Investigator (CPSI) [REDACTED] of the Child Advocacy Center [REDACTED], District Attorney (DA), [REDACTED] Director of [REDACTED] Juvenile Court; [REDACTED] Sheriff Department; Detective [REDACTED] This case was reset for the next CPIT hearing due to not having the autopsy back.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 10/23/2014

Contact Method: Face To Face

Contact Time: 12:00 PM

Contact Duration:

Entered By: [REDACTED]

Recorded For:

Location: School

Created Date: 08/10/2015

Completed date: 08/10/2015

Completed By: [REDACTED]

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

Contact Type(s): Sibling Interview/Observation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/10/2015 07:50 AM Entered By: [REDACTED]

On 10/23/14 at approximately 12 pm Child Protective Service Investigator (CPSI) [REDACTED] met face to face with [REDACTED] at [REDACTED] School in [REDACTED] TN. A Private interview was conducted with sister, [REDACTED] 12 years old white female. [REDACTED] reported she was doing well. [REDACTED] was clean and dressed nicely.

On 10/23/14 at approximately 12:05 pm Child Protective Service Investigator (CPSI) [REDACTED] met face to face with [REDACTED] at [REDACTED] School in [REDACTED] TN. A Private interview was conducted with sister, [REDACTED] 9 years old white female. [REDACTED] stated she was doing great today. There was no safety concerns noted at this time with the children.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 10/20/2014

Contact Method: Face To Face

Contact Time: 09:00 AM

Contact Duration:

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 08/10/2015

Completed date: 08/10/2015

Completed By: [REDACTED]

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

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

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/10/2015 07:12 AM Entered By: [REDACTED]

On 10/20/14 Child Protective Investigative Team (CPIT), present for the meeting were Child Protective Service Investigator (CPSI) [REDACTED] of the Child Advocacy Center [REDACTED], District Attorney (DA), [REDACTED] Director of [REDACTED] Juvenile Court [REDACTED] Sheriff Department; Detective [REDACTED] Police Department; Patrolman/SRO [REDACTED], [REDACTED] Police Department [REDACTED] This case was reset for the next CPIT hearing due to not having the autopsy back.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/18/2014

Contact Method: Face To Face

Contact Time: 09:00 AM

Contact Duration:

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 08/10/2015

Completed date: 08/10/2015

Completed By: [REDACTED]

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

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

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 08/10/2015 07:09 AM Entered By: [REDACTED]

On 9/18/14 Child Protective Investigative Team (CPIT), present for the meeting were Child Protective Service Investigator (CPSI) [REDACTED], [REDACTED] of the Child Advocacy Center [REDACTED], District Attorney (DA), [REDACTED] Director of [REDACTED] Juvenile Court; [REDACTED] Sheriff Department; Detective [REDACTED] Police Department; Patrolman/SRO [REDACTED]. This case was reset for the next CPIT hearing due to not having the autopsy back.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/18/2014

Contact Method: Face To Face

Contact Time: 12:25 PM

Contact Duration:

Entered By: [REDACTED]

Recorded For:

Location: School

Created Date: 08/10/2015

Completed date: 08/10/2015

Completed By: [REDACTED]

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

Contact Type(s): Sibling Interview/Observation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/10/2015 08:23 AM Entered By: [REDACTED]

On 8/18/14 at approximately 12:45 pm Child Protective Service Investigator (CPSI) [REDACTED] met face to face with [REDACTED] at [REDACTED] School in [REDACTED] TN. A Private interview was conducted with sister, [REDACTED] 12 years old white female. [REDACTED] reported she was doing well and her mom is trying to get counseling set up for everyone to go to. [REDACTED] reported she liked going to school.

On 8/18/14 at approximately 12:50 pm Child Protective Service Investigator (CPSI) [REDACTED] met face to face with [REDACTED] at [REDACTED] School in [REDACTED] TN. A Private interview was conducted with sister, [REDACTED] 9 years old white female. [REDACTED] reported she likes going to school and feels safe at home with her mom and dad. [REDACTED] stated she got new teachers and likes them.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/18/2014

Contact Method: Attempted Face To Face

Contact Time: 11:55 AM

Contact Duration:

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 08/10/2015

Completed date: 08/10/2015

Completed By: [REDACTED]

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

Contact Type(s): Referent Interview, Sibling Interview/Observation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/10/2015 07:58 AM Entered By: [REDACTED]

On 8/18/14 at approximately 11:55 am Child Protective Service Investigator (CPSI) [REDACTED] attempted met face to face with [REDACTED], birth mother at the residence of [REDACTED]. There was no cars in the driveway at this time.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/18/2014

Contact Method:

Contact Time: 11:40 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/18/2014

Completed date: 08/18/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/18/2014 10:48 AM Entered By: [REDACTED]

Dr. [REDACTED]

A phone interview was conducted with [REDACTED] with the medical examiner. CPSI [REDACTED] spoke to obtain a preliminary report. CPSI [REDACTED] spoke with [REDACTED] in Dr [REDACTED] office. CPSI faxed a letterhead to try to obtain the preliminary report



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/25/2014

Contact Method:

Contact Time: 10:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/02/2014

Completed date: 08/02/2014

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: 08/02/2014 02:38 PM Entered By: [REDACTED]

CPSI [REDACTED] sent in the Notice of Child Death report on 7/25/14.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/25/2014

Contact Method:

Contact Time: 09:34 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/05/2014

Completed date: 08/05/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/05/2014 09:21 AM Entered By: [REDACTED]

CPSI [REDACTED] completed and sent out the Near Death/Death Report as per policy



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]	Case Name: [REDACTED]
Case Status: Close	Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]	Status: Completed
Contact Date: 07/25/2014	Contact Method:
Contact Time: 08:08 AM	Contact Duration: Less than 30
Entered By: [REDACTED]	Recorded For: [REDACTED]
Location:	Created Date: 08/02/2014
Completed date: 08/02/2014	Completed By: [REDACTED]
Purpose(s): Service Planning	
Contact Type(s): Administrative Review	
Contact Sub Type:	

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

Narrative Type: Original Entry Date/Time: 08/02/2014 02:27 PM Entered By: [REDACTED]

10:18 pm LI [REDACTED] received a phone call from CPSI [REDACTED]. She stated that she has spoken with [REDACTED] and he is coming to the hospital and will be there when she arrives. CPSI [REDACTED] and [REDACTED] were almost at the hospital. [REDACTED] reported to CPSI [REDACTED] that the family has no prior criminal records. The family lives in a nice subdivision. In his being around the area he had never seen anyone outside. The location of the pond is located on the neighbors property. When the mother got to the scene of her child, she started CPR and then the neighbor helped with the CPR, then the detective started CPR when he arrived on the scene. The family only lives about 5 minutes for the EMS department. [REDACTED] said the ACV was blue and his tummy was bloated when he arrived on the scene. CPSI [REDACTED] stated that [REDACTED] is not charging the family and calling the incident accidental.

11:59pm LI [REDACTED] received a call from CPSI [REDACTED]. The timeline from the mother is that she had just got home from visiting her mother's home. They walked in the door and placed ACV on the couch to take off his shoes. The mother stated he wore special shoes due to his problems with walking. She stated he is unsteady with his gate. The mother said she went to start supper. One of the siblings, 11 year old seen ACV missing and she told her mother he must be playing 'hide and seek'. The mother and her starting looking for ACV. In the process of the search the mother went to look down the basement steps concerned he may of fell, and the basement door was unlocked. The mother looked in the woods first which is close to the home. The mother heard the neighbors dog barking. The mother couldn't see how ACV would of made it down the driveway, which slopes with his gate. The mother found the child in the pond, face down and she immediately started CPR, and then the neighbor came to help out and the neighbor wife helped with CPR. One of the siblings called 911. There is a sibling age 9 and she was also at the home. The father was at the [REDACTED] where he works when this happened. CPSI said she googled the land scape of the home and she and [REDACTED] described the surroundings of the home. The land is sloping with a semi-circle driveway and the pond joins the [REDACTED] land. The family has supportive family members, Aunt, sister and grandparents, and one relative is driving up from [REDACTED] along with their Pastor was with them tonight. CPSI [REDACTED] said the mother had cried so much her eyes were almost swollen shut, remorse and tears were present during the scene at the hospital. The mother did not appear under the influence of drugs or appear to be using any drugs. CPSI [REDACTED] and LI [REDACTED] had both looked in TFACTS for any history and none was found.



Tennessee Department of Children's Services
Case Recording Summary

Case Id:	██████████	Case Name:	██████████
Case Status:	Close	Organization:	██████████ Region



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]	Case Name: [REDACTED]
Case Status: Close	Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]	Status: Completed
Contact Date: 07/24/2014	Contact Method:
Contact Time: 11:59 PM	Contact Duration: Less than 15
Entered By: [REDACTED]	Recorded For:
Location:	Created Date: 08/05/2014
Completed date: 08/05/2014	Completed By: [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being	
Contact Type(s): Notation	
Contact Sub Type:	

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

Narrative Type: Original Entry Date/Time: 08/05/2014 08:58 AM Entered By: [REDACTED]

L [REDACTED] received a call from CPSI [REDACTED]. The timeline from the mother is that she had just got home from visiting her mother's home. They walked in the door and placed ACV on the couch to take off his shoes. The mother stated he wore special shoes due to his problems with walking. She stated he is unsteady with his gate. The mother said she went to start supper. One of the siblings, 11 year old seen ACV missing and she told her mother he must be playing 'hide and seek'. The mother and her starting looking for ACV. In the process of the search the mother went to look down the basement steps concerned he may of fell, and the basement door was unlocked. The mother looked in the woods first which is close to the home. The mother heard the neighbor's dog barking. The mother couldn't see how ACV would of made it down the driveway, which slopes with his gate. The mother found the child in the pond, face down and she immediately started CPR, and then the neighbor came to help out and the neighbor wife helped with CPR.

One of the siblings called 911. There is a sibling age 9 and she was also at the home. The father was at the [REDACTED] shop where he works when this happened.

CPSI said she googled the land scape of the home and she and [REDACTED] described the surroundings of the home. The land is sloping with a semi-circle driveway and the pond joins the [REDACTED] land. The family has supportive family members, Aunt, sister and grandparents, and one relative is driving up from [REDACTED] along with their Pastor was with them tonight.

CPSI [REDACTED] said the mother had cried so much her eyes were almost swollen shut, remorse and tears were present during the scene at the hospital. The mother did not appear under the influence of drugs or appear to be using any drugs. CPSI [REDACTED] and LI [REDACTED] had both looked in TFACTS for any history and none was found.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 07/24/2014 Contact Method: Face To Face
 Contact Time: 11:29 PM Contact Duration: Less than 05 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Hospital Created Date: 08/05/2014
 Completed date: 08/05/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Parent/Caretaker Interview
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/05/2014 08:57 AM Entered By: [REDACTED]

An interview was conducted with [REDACTED] ([REDACTED]), birth mother. [REDACTED] reported her DOB as [REDACTED]. [REDACTED] reported we had been at my moms and we got home at 6:30pm. [REDACTED] stated I carried [REDACTED] up the stairs and put him on the steps and then put him on the couch. [REDACTED] stated the neighbor was mowing and we let our dog out and the dog was upset the neighbor was mowing. [REDACTED] stated the day was like any normal day one of the girls was settling with their routine like they normally do. [REDACTED] stated [REDACTED] stated I came outside to help with the dog. [REDACTED] stated so I came in from the back and started to fix the dinner. [REDACTED] stated [REDACTED] came and told me that [REDACTED] was hiding and placing seeks again. [REDACTED] stated [REDACTED] would hide in the shower and hide in the bedroom under the covers. [REDACTED] stated we knew to look for him in his special placed so we looked for [REDACTED] in his normal spots and [REDACTED] was not there. [REDACTED] stated we need to find your brother and then we went different areas of the house to try to find him. [REDACTED] stated I went to the front porch and one made the comment that he was going to the basement and was unlocking the door, but I can't remember if it is [REDACTED] or [REDACTED] that stated that. [REDACTED] stated [REDACTED] normally needed assistance with everything because of his medical conditions. [REDACTED] stated I was scared because I thought he fell down the stairs and we were looking. [REDACTED] stated I ran down the stairs and did not see him. [REDACTED] stated the garage door was open so went out through there and the neighbor was weed eating. [REDACTED] stated the neighbor stated to me that he saw the child on the top of the driveway and I thought [REDACTED] was in the woods because it is the closest thing to the driveway. [REDACTED] stated we did not spot him and we came to the driveway and we took a few steps and we could see him face down in the pond. [REDACTED] stated I got [REDACTED] on the bank and I first shook him to get a response and he was limp and lifeless and I gave him a breath and there was water that came out and I turned him on his side to get it out and I started chest compression and it was no long after that the neighbor was calling 911. [REDACTED] stated the neighbor's wife came out to give compressions and she was trainer for CPR. [REDACTED] stated we never got a pulse and then the police got there and the fire truck and then an ambulance [REDACTED] reported [REDACTED] could not swim. [REDACTED] stated [REDACTED] has medical conditions of hypotonia, muscle weakness, apraxia and it is a motor planning the communication with his brain and muscle. Every task is learned through lots of repetition he had an abnormal off balance gate and especially on uneven terrain. The water in the pond was chest high on me when I went after [REDACTED] in the pond. [REDACTED] stated When [REDACTED] has his shoes on they have inserts that helped him maintain his balance. [REDACTED] stated [REDACTED] was bare foot and it's my fault because I took his shoes off. [REDACTED] was very emotional when describing what happened with her son. [REDACTED] eyes were swollen almost to shut due to the crying.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/24/2014

Contact Method: Face To Face

Contact Time: 11:11 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 08/05/2014

Completed date: 08/05/2014

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/05/2014 08:55 AM Entered By: [REDACTED]

An interview was conducted [REDACTED] maternal aunt. [REDACTED] stated [REDACTED] was hydronumros. Pulmonary stenous and it cleared up. [REDACTED] stated [REDACTED] had gross motor delay. [REDACTED] stated I EIS was involved. [REDACTED] stated [REDACTED] had been lately falling a lot that is why he wore a brace on his legs. [REDACTED] stated [REDACTED] was at work, [REDACTED] in [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/24/2014

Contact Method: Face To Face

Contact Time: 11:05 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 08/05/2014

Completed date: 08/05/2014

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/05/2014 08:53 AM Entered By: [REDACTED]

An interview was conducted with [REDACTED], paternal aunt. [REDACTED] stated [REDACTED] had a rare chromosome 4p deletion. [REDACTED] stated [REDACTED] had speech problems and did have issues walking.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/24/2014

Contact Method: Face To Face

Contact Time: 11:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 08/05/2014

Completed date: 08/05/2014

Completed By: [REDACTED]

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

Contact Type(s): Initial ACV Face To Face

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)**Narrative Details**

Narrative Type: Original Entry Date/Time: 08/05/2014 08:52 AM Entered By: [REDACTED]

The family was in the room with [REDACTED] CPSI [REDACTED] did observe [REDACTED] in the hospital bed. [REDACTED] was in the bed at children's with tubing in his mouth [REDACTED] was deceased upon CPSI [REDACTED] arrival. The family was crying and the mother did not want to leave the side of [REDACTED] [REDACTED] did have her eyes were almost swollen shut due to crying. [REDACTED] was hugging family crying and stated this is my fault this is all my fault for this I should have double checked the doors. [REDACTED] was the pastor and was saying a prayer for [REDACTED] and the family



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/24/2014

Contact Method: Face To Face

Contact Time: 10:46 PM

Contact Duration: Less than 05 Hour

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 08/05/2014

Completed date: 08/05/2014

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/05/2014 08:51 AM Entered By: [REDACTED]

[REDACTED], [REDACTED] Police Department reported he patrols numerous times and has not seen any kids and have never seen anyone by the pond. Chief stated they were performing CPR when I got there and the lady looked tired so I took over. Chief stated the mother was giving the child breaths and then the volunteer fireman and I continued to work on the child and when EMS arrived we scooped him up and we took him to the EMS. The neighbor was out mowing his grass and he heard the dogs barking reported Chief [REDACTED]. The neighbor is an alderman. Chief stated the neighbor was out in the pond about 5 ft. Chief stated The principal of [REDACTED] called me and told me the child was nonverbal. Chief [REDACTED] reported he was dispatched approximately 7:05 pm.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/24/2014

Contact Method: Face To Face

Contact Time: 10:45 PM

Contact Duration: Less than 05 Hour

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 08/05/2014

Completed date: 08/05/2014

Completed By: [REDACTED]

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

Contact Type(s): Sibling Interview/Observation

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 08/05/2014 08:45 AM Entered By: [REDACTED]

An interview was conducted with [REDACTED], 9 year old sibling. [REDACTED] reported she was present when this happened but her mother told her to get back in the house when they started doing CPR on [REDACTED]. [REDACTED] stated I don't remember much. [REDACTED] stated I was outside for a second and I watched my mom pull [REDACTED] out of the pond. [REDACTED] stated after that I was told to stay in the house.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/24/2014

Contact Method: Face To Face

Contact Time: 10:39 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 08/05/2014

Completed date: 08/05/2014

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/05/2014 08:50 AM Entered By: [REDACTED]

Deputy medical examiner investigator, [REDACTED], he was seen here first at [REDACTED] first and [REDACTED] had a chromosome related issue. The child had a chromosome issue that he was being treated at [REDACTED] We don't know how he got to the pond and that is all we don't know. Dr. [REDACTED] will send the order for the autopsy. Medical Examiner stated Chief could attend if he wanted to. Chief [REDACTED] declined at this time. Medical Examiner requested pictures of the scene. Deputy stated the mother saw him at the top of the driveway and that prompted her to go towards the pond. [REDACTED] stated the child will go through the autopsy tomorrow. Deputy stated mother was out in the pond and she was chest high. Deputy stated the mother did report that she has a dog and the dog was barking. Deputy reported mother was appropriate Office number [REDACTED]



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 07/24/2014 Contact Method: Face To Face
 Contact Time: 10:33 PM Contact Duration: Less than 05 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Hospital Created Date: 08/05/2014
 Completed date: 08/05/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Sibling Interview/Observation
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/05/2014 08:45 AM Entered By: [REDACTED]

CPSI [REDACTED] made it to children's hospital in [REDACTED]. The following people were present : [REDACTED] (13)cousin, [REDACTED] (11) cousin, [REDACTED] (11)sister, [REDACTED] paternal aunt, [REDACTED] cousin, [REDACTED] (9), [REDACTED], paternal father, [REDACTED], birth mother.

An interview was conducted with [REDACTED], 11 year old sibling [REDACTED] reported she was the one that called 911. [REDACTED] stated [REDACTED] went down to the steps and went down the basement and then left the basement. The basement door was open and the neighbors said he was standing in the doorway. [REDACTED] stated then momma ran down the driveway and was looking and then momma seen him in the pond with his green shirt. [REDACTED] stated I ran inside momma was pulling him out of the water and they started to do CPR. [REDACTED] stated [REDACTED] came out there afterwards. [REDACTED] stated [REDACTED] would have to have his feet to the side because he would be off balance. [REDACTED] CPSI [REDACTED] explained that there is no reason for [REDACTED] to blame herself or feel guilty and losing a sibling is very hard. [REDACTED] shook her head and agreed. CPSI [REDACTED] stated she will go and put someone in the home that will talk to [REDACTED] if she wants to. [REDACTED] stated she don't want to talk about this to anyone. [REDACTED] stated she did not want to go into the room with [REDACTED] and did not want to see him at this time.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/24/2014

Contact Method: Face To Face

Contact Time: 10:30 PM

Contact Duration: Less than 05 Hour

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 08/05/2014

Completed date: 08/05/2014

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 08/05/2014 08:46 AM Entered By: [REDACTED]

An interview was conducted with [REDACTED] birth father. Mr. [REDACTED] reported he was at work at [REDACTED] in [REDACTED] County when he received the phone call about his son. Mr. [REDACTED] stated he is so upset and does not know how to show it. Mr. [REDACTED] stated this is such a shock I don't know what to do. Mr. [REDACTED] stated my wife [REDACTED] would keep the children inside and they have not wondered like this before.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/24/2014

Contact Method:

Contact Time: 10:18 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/05/2014

Completed date: 08/05/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/05/2014 08:58 AM Entered By: [REDACTED]

LI [REDACTED] received a phone call from CPSI [REDACTED]. She stated that she has spoken with Chief [REDACTED] and he is coming to the hospital and will be there when she arrives. CPSI [REDACTED] and Chief [REDACTED] were almost at the hospital. Chief [REDACTED] reported to CPSI [REDACTED] that the family has no prior criminal records. The family lives in a nice subdivision. In his being around the area he had never seen anyone outside. The location of the pond is located on the neighbor's property. When the mother got to the scene of her child, she started CPR and then the neighbor helped with the CPR, then the detective started CPR when he arrived on the scene. The family only lives about 5 minutes for the EMS department. Chief [REDACTED] said the ACV was blue and his tummy was bloated when he arrived on the scene. CPSI [REDACTED] stated that Chief [REDACTED] is not charging the family and calling the incident accidental.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/24/2014

Contact Method: Phone Call

Contact Time: 09:35 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/05/2014

Completed date: 08/05/2014

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/05/2014 08:44 AM Entered By: [REDACTED]

CPSI [REDACTED] contacted Children's Hospital per phone. [REDACTED] RN stated the family is here at the ER and is currently waiting to see the medical examiner. [REDACTED] reported she works the front desk and the mother is waiting to tell her other 2 daughters what happened. CPSI [REDACTED] stated she is on her way to the hospital.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 07/24/2014

Contact Method: Attempted Phone Call

Contact Time: 09:24 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 08/05/2014

Completed date: 08/05/2014

Completed By: [REDACTED]

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

Contact Type(s): Referent Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/05/2014 08:42 AM Entered By: [REDACTED]

An interview was not conducted on July 24 2014, with the referent, [REDACTED] social worker at Children's Hospital, due to the phone going straight to voice mail. CPSI [REDACTED] did leave a call back name and number. [REDACTED] [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]	Case Name: [REDACTED]
Case Status: Close	Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]	Status: Completed
Contact Date: 07/24/2014	Contact Method:
Contact Time: 08:45 PM	Contact Duration: Less than 05
Entered By: [REDACTED]	Recorded For:
Location:	Created Date: 08/05/2014
Completed date: 08/05/2014	Completed By: [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being	
Contact Type(s): Notation	
Contact Sub Type:	

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

Narrative Type: Original Entry Date/Time: 08/05/2014 09:05 AM Entered By: [REDACTED]

CPSI [REDACTED] received a phone call from Detective [REDACTED] Sheriff Department. Det. [REDACTED] stated he remembered CPSI [REDACTED] being on call and waited to let her know they just found a juvenile in [REDACTED] in a pond and that Chief [REDACTED] is already working the scene. Det [REDACTED] stated if there is anything that the Sheriff Department can assist with please let us know. CPSI [REDACTED] thanked Det [REDACTED] for informing her of the situation. CPSI [REDACTED] immediately contacted per phone LI [REDACTED] to inform her of the child.



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

Case Id: [REDACTED]	Case Name: [REDACTED]
Case Status: Close	Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]	Status: Completed
Contact Date: 07/24/2014	Contact Method:
Contact Time: 08:00 PM	Contact Duration: Less than 15
Entered By: [REDACTED]	Recorded For:
Location:	Created Date: 08/05/2014
Completed date: 08/05/2014	Completed By: [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being	
Contact Type(s): Case Summary	
Contact Sub Type:	

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

Narrative Type: Original Entry Date/Time: 08/05/2014 08:40 AM Entered By: [REDACTED]

On 07/24/14 07:19 PM, a referral was called into Central Intake. The referral was screened into [REDACTED] as P1 with allegations of Neglect Death, severe. The alleged child victim is [REDACTED] age 5 year old. The alleged perpetrator is unknown. Response is due on July 25, 2014 at 7:19 PM [REDACTED]. The case is assigned to CPSI [REDACTED] LI [REDACTED]. It is not known if this child is of Native American descent. This information will need to be obtained when response is met. A follow up phone call will be made and documented with the referent within 15 working days of referral per policy. TFACTS was checked and there is no history at this time.

TFACTS history:

Open Court Custody/FSS/FCIP None

Closed Court Custody None

Open CPS None

Substantiated None

Fatality None

Screened out None

History (not listed above): None

*****THIS CHILD IS NOT IN DCS CUSTODY***** CPSI [REDACTED] will need to ensure the case is staffed from the field and the parents are contacted per policy timelines. CPSI [REDACTED] will need to ensure all MRS policies and procedures are being followed including the face to face contacts, collateral contacts, Family Functional Assessments and team meetings. All dictation must be entered per regional policy. CPSI [REDACTED] needs to ensure that all paperwork reviewed with the family is documented in case recordings and that Safety Assessments, Noncustodial Permanency Plans, Immediate Protection Agreements and/or background checks are submitted timely and per policy to supervision. Methamphetamine was not a contributing factor in this investigation. There was no exposure to clandestine laboratories that manufacture Methamphetamine in this investigation. There was no drug involvement (use, sale or manufacturing) in this investigation.

Reporter states: [REDACTED] (5) was in the custody of his mother, [REDACTED] and father, name unknown. It is unknown if there are any other children or adults residing in the home. [REDACTED] was a special needs child with a chromosome deletion syndrome. 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. The reporter does not know if the family has history with law enforcement. On July 24, 2014 [REDACTED] was taken to [REDACTED] Children's Hospital by ambulance after being found in a pond near his residence by [REDACTED]. It was stated that [REDACTED] had wandered off from the home for an extended period of time; it is unknown when it was noticed that he was missing or



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

how long he had been gone before being located. It is unknown where [REDACTED] or the father were at the time of [REDACTED] initial disappearance; it is unknown if the father was even at the home when the incident occurred. At some point, [REDACTED] went looking for [REDACTED] and found him in the pond non-responsive. [REDACTED] contacted 911 and rode in the ambulance with [REDACTED] to the hospital. It is unknown what measures were taken initially by the parents when they found out [REDACTED] was missing from the home. The reporter states that they do not know what condition [REDACTED] was in at the time that emergency personnel responded to the scene. By the time [REDACTED] arrived at the hospital he had fully coded. The time of death was noted to be 20:07 [REDACTED]. It is unknown if law enforcement has been contacted, but it is noted that the reporter has not contacted them at this time. The child's body will be submitted to the Medical Examiner's Office for further evaluation. There were no other noted injuries seen on [REDACTED] to suggest other forms of abuse. Both [REDACTED] and the father are present at [REDACTED] Children's Hospital as well as other family members. The reporter would like the worker with the Department to contact local law enforcement.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]	Case Name: [REDACTED]
Case Status: Close	Organization: [REDACTED] Region

Case Recording Details

Recording ID: [REDACTED]	Status: Completed
Contact Date: 07/24/2014	Contact Method:
Contact Time: 09:00 AM	Contact Duration: Less than 01 Hour
Entered By: [REDACTED]	Recorded For:
Location:	Created Date: 08/05/2014
Completed date: 08/05/2014	Completed By: [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being	
Contact Type(s): Notation	
Contact Sub Type:	

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

Narrative Type: Original Entry Date/Time: 08/05/2014 09:01 AM Entered By: [REDACTED]

9:00 pm LI [REDACTED] received phone call from On-call CPSI [REDACTED] to notify a case was being called in due to her conversation with detective.

9:00 pm LI [REDACTED] received the call from [REDACTED] on P1

9:08 pm LI [REDACTED] called CPSI [REDACTED] back to complete the P1.

9:11 pm LI [REDACTED] called LI [REDACTED]. The following are the steps to take at this time.

- 1) Due to the medical information and confirmation of death, CPSI [REDACTED] does not have to view the ACV. Medical records will be obtained, and LE should be seeing the ACV.
- 2) Assess if there are any other children. Where were they located at the time of incident? Are they safe, and where are they staying. If they are going to a relative or at a relative's home make a call to that resident.
- 3) See the parents and offer grief therapy information/agencies.
- 4) If LE is at the scene gain what time frame/outline of events have been stated.
- 5) CPSI [REDACTED] to do a typed summary and email to [REDACTED] and IC [REDACTED] after steps have been completed as soon as possible. Also include [REDACTED]
- 6) CPSI [REDACTED] will email the form and complete documentation in TFACTS within 48 hours.

9:21 pm LI [REDACTED] notified RA [REDACTED] of the referral/P1 Death. [REDACTED] asked to send her the email.

9:24 pm phone call from CPSI [REDACTED] and we discussed that she has made phone calls to dispatch to locate the only detective and Chief of Police for [REDACTED]. LI [REDACTED] addressed with CPSI [REDACTED] on being comfortable with the situation and access her condition with this case. CPSI [REDACTED] gave details of a prior death case she worked. LI [REDACTED] addressed with CPSI [REDACTED] to seek out her supervisor for any future need in dealing with this situation. LI [REDACTED] expressed to CPSI [REDACTED] that I wanted to make sure she is able to deal with this case and seek out talking about this case with me on her self-help and coping skills tonight.

9:37 pm phone call from CPSI [REDACTED] and she was able to speak with the social worker at the hospital and the parents are at the hospital awaiting to speak with a medical examiner. The parents are waiting on the other 2 children/daughters to arrive at the hospital. The parents have not told the other children what has happened.