



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

Case # 2014.199

Intake #:	██████████	Investigation #:	██████████	Date of Referral:	11/30/2014	
Type: (Please check one)	<input checked="" type="checkbox"/> DEATH	<input type="checkbox"/> NEAR DEATH	Date of Death/Near Death:	11/29/2014		
Child's Name:	██████████ ██████████	DOB:	██████████	Person ID:	██████████	
Gender:	<input checked="" type="checkbox"/> Male	<input type="checkbox"/> Female	Race/Ethnicity:	Black or African American	County/Region:	██████████
Parents' Names:	Mother: ██████████ ██████████	Father:	██████████ ██████████			
Alleged Perpetrator's Name:	Unknown		Relationship to Victim:			
Child in custody at time of incident?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	Adjudication:			
If child is in DCS custody, list placement type and name:						

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

The victim sixteen year old, ██████████ ██████████ (██████████) was discovered unresponsive in his bed while at his residence located at ██████████. The decedent's mother, ██████████ discovered the child unresponsive in his bed at approximately 0925 hours on the morning of 11/29/14. The ██████████, ██████████ responded to the residence where paramedics confirmed aystole at 0938 hours. Investigator ██████████, ██████████ pronounced death at 1136 hours. The decedents remains were transported to the ██████████.

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

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

Describe (in detail) interview with family:

On 11/30/14 CPSI contacted the family via phone in regards to the referral received on ██████████ ██████████. CPSI contacted the mother, ██████████ ██████████ by phone at ██████████. CPSI introduced self and explained the purpose of the call and gave the mother the Department's condolences in regards to her son. Ms. ██████████ was very emotionally and crying at the time of the phone call. CPSI spoke with the aunt and she reported the mother was not able to speak due to the death of her son. CPSI advised the aunt that the Department wanted to ensure the safety of any other children in the home and offer grief counseling to the mother. The aunt reported the mother has an adult son and that there are no other minor children in the home. CPSI provided the aunt this worker's number and informed the aunt this worker will contact the mother tomorrow. CPSI went to the home on 12/1/14 that morning and evening and no one was home at the time of the visit, also this worker contacted the mother by phone and no one answered. CPSI conducted a DCS Check, Juvenile Court and ██████████ Police Check on the family and there was no history found on the family.

11/30/14

CPSI went to the home of the ██████████ family on 11/30/14 at ██████████. No one was at home at the time of the visit. CPSI also contacted the family by phone but no one answered the phone at the time of the call.

12/1/14

CPSI went to the home in the morning and evening on 12/1/14. No one was at home at the time of the visits. CPSI also contacted the family by phone. No one answered at the time of the visit and was not able to leave a message due to the voice mail was full.

12/2/14

CPSI attempted to contact the mother, ██████████ ██████████ by phone but no one answered the phone and could not leave a voicemail.

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

CPSI went to the home of the family during the evening. No one was at home at the time of the visit. CPSI contacted the mother by phone and left a message.

12/3/14/

CPSI contacted the mother by phone to schedule a home visit. No one answered the phone and this worker left a message for the family.

12/4/14

CPSI contacted the mother by phone this morning and left a message on the voicemail to schedule a home visit. CPSI received a phone call from the mother and this workers schedule a home visit for this evening at 4:00 p.m.

12/4/14

CPSI went to the home of the family located at . CPSI introduced self to the family and extended the condolences to the family. At the home during the visit was the mother, father, aunt, grandmother, CPSI observed the home consisted of three bedrooms, two baths, den, living room and kitchen. CPSI also observed the room of that was fully furnished. The household compositions includes the mother, and aunt also the mother has an adult son, (21 years old) whom does not reside in the home. The father Mr. resides at The mother stated that on 11/27/14 that morning her, and the aunt, Ms. were at the home The mother said they left the home sometime after 12:00 p.m. and went over family members home for Thanksgiving and left their home sometime after 4:00 p.m. The mother said her and went to numerous stores shopping for Christmas gifts and returned to the home that night (the mother was not certain what time they arrived home). The mother said the next day, 11/28/14 they went out that day to continue Christmas shopping and arrived home sometime that night and was home by 11:00 p.m. The mother said was fine during the holidays and that night he came to check on her and she went to bed. The mother said the next morning on 11/29/14 the aunt was preparing breakfast that morning and she noticed did not come out of his room because he loves to eat. The mother said she went into his room and found him on the floor face down chest raised and foam coming from his mouth. The mother said she called the paramedics and when they arrived they pronounced him dead and obtained his medication and transported him to the morgue. The mother said was a good kid and did not have any behavior problems at school or home and made good grades. The mother said he was not on drugs or affiliated with any gangs. The mother said the only health condition he had was seizures and he attended a neurologist, for the last few years. The mother said the last seizure he had was about eight months ago and he had been on medication for his seizures. The mother said he was on three different medications for his seizure; pamaploid, capra and topax and she does not know the dosages due to the paramedics took the medication. The mother said that he took the medication once a day. The mother said was his primary physician and he was seen about three weeks ago due to the child had a physical because he wanted to play wrestling for his school. The mother said he attended School and was in the eleventh grade. The mother said that was her best friend and they had a close relationship and now she feels left alone since he has passed. CPSI spoke with the father, Mr. and he said was a good kid and he would never do any type of drugs or involved with a gang. The father said he was active in his life and his mother took good care of him. CPSI spoke with the aunt, Ms. and the grandmother, Ms. and they both said was loved by his parents and family and they believe he died from a seizure and no one would never abuse or neglect him. The mother said she heard from fourteen year old cousin, he had not been taking his medication for his seizures and she provided his guardian's information. CPSI observed the home was neat and clean at the time of the visit and completed the authorizations papers with the parents. CPSI informed the parents that the Department can refer grief counseling to the family if needed.

12/4/14

CPSI contacted at the Homicide Department with the Police Department. said that she jus returned off from vacation and she was assigned to the case of said that from the police report that suffered from seizures and the mother found the child in his room unresponsive. said the paramedics arrived and found the child face down with his body in a fist position and was pronounced dead on the scene. said the child was transported to the morgue along with his medication and there is no more information at this time.

12/4/14

CPSI contacted the guardian, for CPSI introduced self and explained the purpose of the call. Ms. said her grandson, informed her after the death of he was not taking his medication. Ms. said she would also get on due to he was not taking his medication and would have to watch

[redacted] to ensure he would take his medication. Ms. [redacted] allowed this worker to talk with [redacted] in regards to [redacted]. [redacted] said he is fourteen years old and is cousin is [redacted] and they were close and would play video games all the time. He said that [redacted] would tell him he was tired of taking the medication and he was going to stop taking it due to the medication was making him sleepy and he was not able to stay up and play video games. He said he told the family that he was not taking the medication after he died.

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

N/A

Describe disposition of body (Death): CPSI spoke with [redacted] at the [redacted] on 12/2/14. Mr. [redacted] stated that there were no marks or bruises found on [redacted] and the autopsy is still pending.

Name of Medical Examiner/Coroner: [redacted] **Was autopsy requested?** No Yes

Did CPS open an investigation on this Death/Near Death? No Yes

Was there DCS involvement at the time of Death/Near Death? No Yes

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

Describe law enforcement or court involvement, if applicable:

The case was assigned to the [redacted] CPSI contacted the [redacted] on 12/2/14 [redacted] was not in the office at the time.

Describe (in detail) action taken to ensure safety of other children (list names and ages of surviving children) and/or victim (Near Death) (attach safety plan, if applicable):

There are no other minor children in the home..

Name:	Age:

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

Date	Case #	Allegations	Victims	Perpetrators	Classification/Adj
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

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

Contact Person/Phone Number(s) (include CM, TL, and TC):

Contact Person:	Telephone Number: () -
Case Manager: [redacted]	Telephone Number: [redacted]
Team Leader: [redacted]	Telephone Number: [redacted]

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

Intake #:	██████████	Investigation #:	██████████	Date of Referral:	12/20/14	Case #	2014-199
Team Coordinator:	██████████			Telephone Number:	██████████		
ATTACH a copy of the <u>TFACTS Incident Report</u> or if TFACTS is inoperable, <u>DCS Form CS-0496, Serious Incident Report</u> to this notice.						<input type="checkbox"/> No	<input type="checkbox"/> Yes
<p>Email to: ██████████</p> <p>within forty-eight (48) hours of notification</p> <p>Include subject line (in RED): CHILD DEATH [secure email] or</p> <p>CHILD NEAR DEATH [secure email]</p>							



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

Intake

Intake ID: [REDACTED]
Intake Taken By: [REDACTED] Intake Date/Time: 11/30/2014 03:36 PM CT
Track Assigned: Investigation Priority Assigned: 1
Screened By: [REDACTED]
Date Screened: 11/30/2014

Investigation

Investigation ID: [REDACTED]
First County/Region: [REDACTED]
Date/Time Assigned : 12/01/2014 03:49 PM
First Team Leader Assigned: [REDACTED] Date/Time 12/01/2014 12:00 AM
First Case Manager [REDACTED] Date/Time 12/01/2014 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	17 Yrs	Neglect Death	Yes	Unknown Participant [REDACTED] Unknown	None

Referent(s)

Referent Name: [REDACTED] Role to Alleged Victim(s): [REDACTED]
Referent Address: [REDACTED]
Referent Phone Number: [REDACTED]
Type of Contact: Facsimile
Notification: None
Narrative: TFACTS:
Family Case ID: None Found
Open Court Custody/FSS/FCIP None Found
Closed Court Custody None Found
Open CPS None Found
Death None Found
Substantiated: None Found



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

Screened out 0

History (not listed above): None Found

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

Reporter's name/relationship: [REDACTED]

Reporter states:

The child is not in state custody.

Note: This information was received via fax and has been entered verbatim from the report received.

"The [REDACTED] County Medical Examiner is investigating the death of [REDACTED] [REDACTED] (DOB: [REDACTED]). This 16 year-old child was discovered unresponsive in bed at approximately 0925 hours on the morning of 11/29/2014, by his mother. [REDACTED] [REDACTED] responded to the residence of [REDACTED] where paramedics confirmed asystole at 0938 hours. [REDACTED] [REDACTED] pronounced death at 1136 hours. A scene investigation was conducted by this office and [REDACTED] Police Department, and the decedent's remains were transported to this office for autopsy. The cause and manner of death are pending at this time. The mother's name is [REDACTED] [REDACTED] (DOB: [REDACTED] SSN# [REDACTED] and her contact phone number is [REDACTED]. Our case number is [REDACTED].

Per SDM: Investigative Track/Priority 1 [REDACTED] [REDACTED] CM 3 on 11-30-2014 at 3:40 P.M.

[REDACTED] paged at 3:51 P.M.

[REDACTED] 11-30-14 03:51:48 PM CST 11-30-14 03:52:43 PM CST Received

Email notification sent to [REDACTED] [REDACTED] Regional Administrator
 [REDACTED] [REDACTED] and the [REDACTED] County email notification group.



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

Participant(s)

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] **Race:** [REDACTED] **Age:** 17 Yrs

Address: [REDACTED]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact: [REDACTED]

Contact Type: HOME

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED]

Race:

Age: 48 Yrs

Address: [REDACTED]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact: [REDACTED]

Contact Type: HOME

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: 11/30/2014

Assignment Date: 12/01/2014

Street Address: [REDACTED]

City/State/Zip: [REDACTED]

B. Allegation

#	Children's Name	DOB	Specific Allegation for Each Child	Alleged Perpetrator's Name	DOB	Classification	Severe Abuse	Classified By
		SSN			SSN			Classified Date
1	[REDACTED]	[REDACTED]	Neglect Death	Unknown male, Unknown male	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[REDACTED] 04/16/2015

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: Case Closure

D. Case Workers

Case Worker: [REDACTED]

Date: 04/16/2015

Team Leader: [REDACTED]

Date: 04/16/2015

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 child was deceased at the time of the referral. There are no other siblings in the home.

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

the Department received the autopsy and was reported the child died from natural causes (seizure) The department also received medical records. CPSI received medical records from his primary doctor, [REDACTED] on [REDACTED]. The child was last seen on 11/13/14 for a Physical and that his exam was normal and giving immunization shots. The records indicated that victim was seen on 9/8/14 due to the child had a possible spider bit on his left arm that has been itching for about a week he reports it has gradually gotten bigger with no discharge. His current medications Topamax, Pamelor and Kepra. The doctor prescribed the child Cleocin for the spider bite mark.

CPSI also received medical reports from the Neurologist where the patient goes for his medication, pamaploid, capra and topax and the family was compliant with services. Enclosed in case file.



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)?

There is no perpetrator the child died of natural causes (seizure).

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

CPSI spoke with the referent in regards to the referral on [REDACTED] [REDACTED]. The referent stated that there were no marks or bruises found on [REDACTED] and the autopsy is still pending.

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

The Department received a P-1 Referral on [REDACTED] [REDACTED] alleging Neglect Death. The alleged perpetrator is unknown. "The [REDACTED] County Medical Examiner is investigating the death of [REDACTED] [REDACTED] (DOB: [REDACTED]). This 16 year-old child was discovered unresponsive in bed at approximately 0925 hours on the morning of 11/29/2014, by his mother. [REDACTED] [REDACTED] responded to the residence of [REDACTED] where paramedics confirmed asystole at 0938 hours. [REDACTED] [REDACTED] pronounced death at 1136 hours. A scene investigation was conducted by this office and [REDACTED] Police Department, and the decedent's remains were transported to this office for autopsy. The cause and manner of death are pending at this time. There was no evidence found due to the Department received the autopsy and was reported the child died from natural causes (seizure) The department also received medical records. Attorney [REDACTED] signed off on cpit form classifying as AUPU.

Distribution Copies: Juvenile Court in All Cases
 District Attorney in Severe Child Abuse Cases
 Regional Supervising Attorney



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 05/29/2015

Contact Method:

Contact Time: 11:32 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 05/29/2015

Completed date: 05/29/2015

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: 05/29/2015 11:36 AM Entered By: [REDACTED]

The allegation has been investigated and has been reviewed by this Lead Investigator, Investigative Coordinator [REDACTED] [REDACTED] Regional Investigative Director [REDACTED] and assistant Deputy Director of Investigations [REDACTED]. The case has been approved for closure and copies of the 740 will be forwarded to the AG and the Judge per policy.



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

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

Case Recording Details

Recording ID: [REDACTED] Status: Completed
Contact Date: 05/26/2015 Contact Method:
Contact Time: 12:00 PM Contact Duration: Less than 30
Entered By: [REDACTED] Recorded For:
Location: DCS Office Created Date: 05/26/2015
Completed date: 05/26/2015 Completed By: [REDACTED]
Purpose(s): Safety - Child/Community
Contact Type(s): Case Summary
Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 05/26/2015 12:16 PM Entered By: [REDACTED]
[REDACTED] Summary:

The Department of Children's Services (DCS) Special Investigations Unit received a referral on 11/30/14 with an allegation of Child Neglect Death [REDACTED] was not in state custody at the time of the referral and the family had no previous history with the Department of Children's Services. The alleged perpetrator is unknown. "The [REDACTED] County Medical Examiner is investigated the death of [REDACTED] (DOB: [REDACTED]). [REDACTED] 16 year-old child was discovered unresponsive in bed at approximately 0925 hours on the morning of 11/29/2014, by his mother, [REDACTED]."

The [REDACTED] responded to the residence of [REDACTED] where paramedics confirmed asystole at 0938 hours. [REDACTED] pronounced death at 1136 hours. A scene investigation was conducted by the [REDACTED] and [REDACTED] Police Department. The decedent's remains were transported to the [REDACTED] for autopsy. The cause and manner of death are pending at this time.

The investigation into this incident was conducted by The [REDACTED] [REDACTED] [REDACTED] [REDACTED] Homicide Police Department [REDACTED].

The report to DCS listed the alleged perpetrator of Child Neglect Death as Unknown. Numerous interviews were conducted of family, school staff and medical professionals.

As part of the investigation, Child Protective Service Investigator went to the home of the [REDACTED] family located at [REDACTED] on 12/4/14. Child Protective Service Investigator introduced self to the family and extended the condolences to the family. At the home during the visit was the mother, [REDACTED] father [REDACTED] aunt, [REDACTED] grandmother, [REDACTED]. Child Protective Service Investigator observed the home consisted of three bedrooms, two baths, den, living room and kitchen. Child Protective Service Investigator also observed the room of [REDACTED] that was fully furnished. The household compositions includes the mother, [REDACTED] and aunt [REDACTED] also the mother has an adult son, [REDACTED] (21 years old) whom does not reside in the home. The father, Mr. [REDACTED] resides at [REDACTED].



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

The mother, [REDACTED] stated that on 11/27/14 that morning her, [REDACTED] and the aunt, Ms. [REDACTED] were at the home. The mother said they left the home sometime after 12:00 p.m. and went over family members home for Thanksgiving and left their home sometime after 4:00 p.m. The mother said her and [REDACTED] went to numerous stores shopping for Christmas gifts and returned to the home that night (the mother was not certain what time they arrived home). The mother said the next day, 11/28/14 they went out that day to continue Christmas shopping and arrived home sometime that night and was home by 11:00 p.m. The mother said [REDACTED] was fine during the holidays and that night he came to check on her and she went to bed. The mother said the next morning on 11/29/14 the aunt, Ms. [REDACTED] was preparing breakfast that morning and she noticed [REDACTED] did not come out of his room because he loves to eat. The mother said she went into his room and found him on the floor face down chest raised and foam coming from his mouth. The mother said she called the paramedics and when they arrived they pronounced him dead on 11/30/14 (at 1136 hours) and obtained his medication and transported him to the morgue. The mother said [REDACTED] was a good kid and did not have any behavior problems at school or home and made good grades.

The mother said he was not on drugs or affiliated with any gangs. The mother said the only health condition he had was seizures and he attended a neurologist, [REDACTED] for the last few years. The mother said the last seizure he had was about eight months ago and he had been on medication for his seizures. The mother said he was on three different medications for his seizure; pamploid, capra and topax and she does not know the dosages due to the paramedics took the medication. The mother said that he took the medication once a day. The mother said [REDACTED] was his primary physician and he was seen about three weeks ago due to the child had a physical because he wanted to play wrestling for his school. The mother said he attended [REDACTED] School and was in the eleventh grade. The mother said that [REDACTED] was her best friend and they had a close relationship and now she feels left alone since he has passed.

Child Protective Service Investigator spoke with the father, Mr. [REDACTED] at the home on 12/4/14 and he said [REDACTED] was a good kid and he would never do any type of drugs or involved with a gang. The father said he was active in his life and his mother took good care of him. Child Protective Service Investigator spoke with the aunt, Ms. [REDACTED] and the grandmother, Ms. [REDACTED] and they both said [REDACTED] was loved by his parents and family and they believe he died from a seizure and no one would never abuse or neglect him. The mother said she heard from [REDACTED] fourteen year old cousin, [REDACTED] he had not been taking his medication for his seizures and she provided his guardian's information. Child Protective Service Investigator observed the home was neat and clean at the time of the visit and completed the authorizations papers with the parents. Child Protective Service Investigator informed the parents that the Department can refer grief counseling to the family if needed.

Child Protective Service Investigator contacted [REDACTED] at the Homicide Department with the [REDACTED] Police Department on 12/4/14. [REDACTED] said that she just returned off from vacation and she was assigned to the case of [REDACTED]. [REDACTED] said that from the police report that [REDACTED] suffered from seizures and the mother found the child in his room unresponsive. [REDACTED] said the paramedics arrived and found the child face down with his body in a fist position and was pronounced dead on the scene. [REDACTED] said the child was transported to the morgue along with his medication and there is no more information at this time.

Child Protective Service Investigator spoke with [REDACTED] at [REDACTED] on 12/2/14. Mr. [REDACTED] stated that there were no marks or bruises found on [REDACTED] and the autopsy is still pending. CPSI conducted a DCS Check TFACTS), Juvenile Court ([REDACTED]) and [REDACTED] Police Check ([REDACTED]) on the family and there was no history found through the check.

Child Protective Service Investigator contacted [REDACTED] School on 12/4/14 in regards to [REDACTED]. The counselor, Ms. [REDACTED] at [REDACTED] was not in the office and this worker left a message for the counselor. Child Protective Service Investigator contacted the guardian, [REDACTED] for [REDACTED] on 12/4/14. Child Protective Service Investigator introduced self and explained the purpose of the call. Ms. [REDACTED] said her grandson, [REDACTED] informed her after the death of [REDACTED] he was not taking his medication. Ms. [REDACTED] said she would also get on [REDACTED] due to he was not taking his medication and would have to watch [REDACTED] to ensure he would take his medication. Ms. [REDACTED] allowed this worker to talk with [REDACTED] in regards to [REDACTED]. [REDACTED] said he is fourteen years old and is cousin is [REDACTED] and they were close and would play video games all the time. He said that [REDACTED] would tell him he was tired of taking the medication and he was going to stop taking it due to the medication was making him sleepy and he was not able to stay up and play video games. He said he told the family that he was not taking the medication after he died.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Child Protective Service Investigator received medical records from his primary doctor, [REDACTED] on [REDACTED]. The child was last seen on 11/13/14 for a Physical and that his exam was normal and giving immunization shots. The records indicated that victim was seen on 9/8/14 due to the child had a possible spider bit on his left arm that has been itching for about a week he reports it has gradually gotten bigger with no discharge. His current medications Topamax, Pamelor ans Kepra. The doctor prescribed the child Cleocin for the spider bite mark.

Child Protective Service Investigator received medical reports from the Neurologist where the patient goes for his medication, pamaploid, capra ans topax and the family was compliant with services. The records are enclosed in case file.

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] County Child Protective Investigation Team on 12/2/14. Team members were in agreement that there was not sufficient evidence to substantiate the allegation of Child Neglect Death.

The Department of Children's Services found no evidence found due to the autopsy from the [REDACTED] reported the child died from natural causes (seizure). [REDACTED] signed off on Child Protective Investigation Form classifying the Neglect Death as AUPU.

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:	██████████	Case Name:	██████████ ██████████
Case Status:	Close	Organization:	██████████

Case Recording Details

Recording ID:	██████████	Status:	Completed
Contact Date:	05/22/2015	Contact Method:	
Contact Time:	02:00 PM	Contact Duration:	Less than 30
Entered By:	████████████████████	Recorded For:	
Location:		Created Date:	05/22/2015
Completed date:	05/22/2015	Completed By:	████████████████████
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Case Summary		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 05/22/2015 02:13 PM Entered By: ██████████

Child Death Closing Summary:

The Department of Children's Services received a P-1 Referral on 11/30/14 on ██████████ ██████████ alleging Neglect Death. The child was not in state custody at the time of the referral and the family had no previous history with the Department of Children's Services. The alleged perpetrator is unknown. "The ██████████ Medical Examiner is investigated the death of ██████████ (DOB: ██████████). ██████████ ██████████ 16 year-old child was discovered unresponsive in bed at approximately 0925 hours on the morning of 11/29/2014, by his mother, ██████████. The ██████████ ██████████ responded to the residence of ██████████, where paramedics confirmed asystole at 0938 hours. ██████████ ██████████ and ██████████ pronounced death at 1136 hours. A scene investigation was conducted by the ██████████ ██████████ and ██████████ Police Department. The decedent's remains were transported to the ██████████ for autopsy. The cause and manner of death are pending at this time.

Child Protective Service Investigator went to the home of the ██████████ family located at ██████████ on 12/4/14. Child Protective Service Investigator introduced self to the family and extended the condolences to the family. At the home during the visit was the mother, ██████████ father ██████████ aunt, ██████████ grandmother, ██████████ Child Protective Service Investigator observed the home consisted of three bedrooms, two baths, den, living room and kitchen. Child Protective Service Investigator also observed the room of ██████████ that was fully furnished. The household compositions includes the mother, ██████████ and aunt ██████████ also the mother has an adult son, ██████████ (21 years old) whom does not reside in the home. The father, Mr. ██████████ resides at ██████████

The mother, ██████████ stated that on 11/27/14 that morning her, ██████████ and the aunt, Ms. ██████████ were at the home. The mother said they left the home sometime after 12:00 p.m. and went over family members home for Thanksgiving and left their home sometime after 4:00 p.m. The mother said her and ██████████ went to numerous stores shopping for Christmas gifts and returned to the home that night (the mother was not certain what time they arrived home). The mother said the next day, 11/28/14 they went out that day to continue Christmas shopping and arrived home sometime that night and was home by 11:00 p.m. The mother said ██████████ was fine during the holidays and that night he came to check on her and she went to bed.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: ██████████

Case Name: ██████████ ██████████

Case Status: Close

Organization: ██████████

The mother said the next morning on 11/29/14 the aunt, Ms. ██████████ was preparing breakfast that morning and she noticed ██████████ did not come out of his room because he loves to eat. The mother said she went into his room and found him on the floor face down chest raised and foam coming from his mouth. The mother said she called the paramedics and when they arrived they pronounced him dead on 11/30/14 (at 1136 hours) and obtained his medication and transported him to the morgue. The mother said ██████████ was a good kid and did not have any behavior problems at school or home and made good grades.

The mother said he was not on drugs or affiliated with any gangs. The mother said the only health condition he had was seizures and he attended a neurologist, ██████████ ██████████ for the last few years. The mother said the last seizure he had was about eight months ago and he had been on medication for his seizures. The mother said he was on three different medications for his seizure; pamploid, capra and topax and she does not know the dosages due to the paramedics took the medication. The mother said that he took the medication once a day. The mother said ██████████ ██████████ was his primary physician and he was seen about three weeks ago due to the child had a physical because he wanted to play wrestling for his school. The mother said he attended ██████████ School and was in the eleventh grade. The mother said that ██████████ was her best friend and they had a close relationship and now she feels left alone since he has passed.

Child Protective Service Investigator spoke with the father, Mr. ██████████ at the home on 12/4/14 and he said ██████████ was a good kid and he would never do any type of drugs or involved with a gang. The father said he was active in his life and his mother took good care of him. Child Protective Service Investigator spoke with the aunt, Ms. ██████████ and the grandmother, Ms. ██████████ and they both said ██████████ was loved by his parents and family and they believe he died from a seizure and no one would never abuse or neglect him. The mother said she heard from ██████████ fourteen year old cousin, ██████████ ██████████ he had not been taking his medication for his seizures and she provided his guardian's information. Child Protective Service Investigator observed the home was neat and clean at the time of the visit and completed the authorizations papers with the parents. Child Protective Service Investigator informed the parents that the Department can refer grief counseling to the family if needed.

Child Protective Service Investigator contacted ██████████ ██████████ at the Homicide Department with the ██████████ Police Department on 12/4/14. ██████████ ██████████ said that she just returned off from vacation and she was assigned to the case of ██████████ ██████████ ██████████ said that from the police report that ██████████ suffered from seizures and the mother found the child in his room unresponsive. ██████████ ██████████ said the paramedics arrived and found the child face down with his body in a fist position and was pronounced dead on the scene. ██████████ ██████████ said the child was transported to the morgue along with his medication and there is no more information at this time.

Child Protective Service Investigator spoke with ██████████ at ██████████ on 12/2/14. Mr. ██████████ stated that there were no marks or bruises found on ██████████ and the autopsy is still pending. CPSI conducted a DCS Check TFACTS), Juvenile Court (██████████) and ██████████ Police Check (██████████) on the family and there was no history found through the check.

Child Protective Service Investigator contacted ██████████ School on 12/4/14 in regards to ██████████ ██████████. The counselor, ██████████ at ██████████ was not in the office and this worker left a message for the counselor. Child Protective Service Investigator contacted the guardian, ██████████ ██████████ for ██████████ ██████████ on 12/4/14. Child Protective Service Investigator introduced self and explained the purpose of the call. Ms. ██████████ said her grandson, ██████████ informed her after the death of ██████████ he was not taking his medication. Ms. ██████████ said she would also get on ██████████ due to he was not taking his medication and would have to watch ██████████ to ensure he would take his medication. Ms. ██████████ allowed this worker to talk with ██████████ in regards to ██████████ ██████████ said he is fourteen years old and is cousin is ██████████ and they were close and would play video games all the time. He said that ██████████ would tell him he was tired of taking the medication and he was going to stop taking it due to the medication was making him sleepy and he was not able to stay up and play video games. He said he told the family that he was not taking the medication after he died.

Child Protective Service Investigator received medical records from his primary doctor, ██████████ ██████████ on ██████████ ██████████. The child was last seen on 11/13/14 for a Physical and that his exam was normal and giving immunization shots. The records indicated that victim was seen on 9/8/14 due to the child had a possible spider bite on his left arm that has been itching for about a week he reports it has gradually gotten bigger with no discharge. His current medications Topamax, Pamelor and Keppra. The doctor prescribed the child Cleocin for the spider bite mark.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Child Protective Service Investigator received medical reports from the Neurologist where the patient goes for his medication, pamploid, capra ans topax and the family was compliant with services. Enclosed in case file.

NEGLECT DEATH:

DCS Policy defines any child death that is the result of the caretaker's failure to meet childcare responsibilities.

Child Protective Investigation Team was held in [REDACTED] County on 12/2/14 and stamped as DCS to Handle As Appropriate by Assistant District Attorney.

The Department of Children's Services found no evidence found due to the autopsy from the [REDACTED] reported the child died from natural causes (seizure). [REDACTED] signed off on Child Protective Investigation Form classifying the Neglect Death as AUPU.

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

Narrative Type: Addendum 1 Entry Date/Time: 05/26/2015 11:37 AM Entered By: [REDACTED]

Error of Case Summary Note.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 05/06/2015

Contact Method:

Contact Time: 03:30 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 05/06/2015

Completed date: 05/06/2015

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: 05/06/2015 04:00 PM Entered By: [REDACTED]

The allegation has been investigated by CPSI [REDACTED] who has returned the autopsy report to CPIT for review by [REDACTED] who has determined that the allegation will be unsubstantiated. The autopsy stated that the cause of death was from a seizure disorder and the manner of death as natural. The CPSI has spoken with the parents and other family members and completed background checks and history searches in TFACTS and with the court. There is no evidence of any illicit drug usage or gang involvement and there are no other minor children living in the home. The CPSI has spoken with school officials and gathered medical documentation which has been placed inside of the case file. The AG and the Judge were notified of the report and the classification. CPSI [REDACTED] has offered services to the mother which have been declined. This case will be forwarded to middle and upper management for review and recommendations.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 05/01/2015

Contact Method:

Contact Time: 11:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 05/01/2015

Completed date: 05/01/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 05/01/2015 12:43 PM Entered By: [REDACTED]

The initial and closing (740 From) Notification will be forward to the the Judge (Juvenile Court) and the Attorney General.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 04/29/2015 Contact Method:
 Contact Time: 04:47 PM Contact Duration: Less than 30
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 04/29/2015
 Completed date: 05/15/2015 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Administrative Review
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/29/2015 04:55 PM Entered By: [REDACTED]

The case has been reviewed and the following tasks need to be completed and documented: 1. Document when the fatality notification was completed and forwarded. 2. Document when the case was initially brought to CPIT and the disposition. 3. Document that the initial SDM has been completed and the safety decision. 4. The CPSI is to document all of the background/history checks completed on the adults living in the home. 5. The CPSI is to document when the required forms were signed and completed. 6. The initial and closing notifications to the Judge and AG are to be documented in the case recordings. After these tasks are completed this case will be reviewed again by this Lead Investigator and forwarded to upper management.



Tennessee Department of Children's Services
Case Recording Summary

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

Case Recording Details

Recording ID: [REDACTED] Status: Completed
Contact Date: 04/16/2015 Contact Method:
Contact Time: 03:00 PM Contact Duration: Less than 30
Entered By: [REDACTED] Recorded For:
Location: Created Date: 04/16/2015
Completed date: 04/16/2015 Completed By: [REDACTED]
Purpose(s): Safety - Child/Community
Contact Type(s): Case Summary
Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/16/2015 03:13 PM Entered By: [REDACTED]
Child Death Closing Summary:

The Department received a P-1 Referral on 11/30/14 on [REDACTED] [REDACTED] alleging Neglect Death. The alleged perpetrator is unknown. "The [REDACTED] County Medical Examiner is investigating the death of [REDACTED] [REDACTED] (DOB: [REDACTED]). This 16 year-old child was discovered unresponsive in bed at approximately 0925 hours on the morning of 11/29/2014, by his mother. [REDACTED] [REDACTED] responded to the residence of [REDACTED] where paramedics confirmed asystole at 0938 hours. [REDACTED] [REDACTED] pronounced death at 1136 hours. A scene investigation was conducted by this office and [REDACTED] Police Department, and the decedent's remains were transported to this office for autopsy. The cause and manner of death are pending at this time. The mother's name is [REDACTED] [REDACTED] (DOB: [REDACTED] SSN# [REDACTED] and her contact phone number is [REDACTED]. Our case number is [REDACTED]. Per SDM: Investigative Track/Priority 1 [REDACTED] CM 3 on 11-30-2014 at 3:40 P.M.

On 11/30/14 CPSI [REDACTED] contacted the mother, [REDACTED] [REDACTED] via phone around 4:00 p.m. in regards to the referral received on [REDACTED]. CPSI contacted the mother, [REDACTED] [REDACTED] by phone at [REDACTED]. CPSI introduced self and explained the purpose of the call and gave the mother the Department's condolences in regards to her son. Ms. [REDACTED] was very emotional and crying at the time of the phone call. CPSI spoke with an aunt that was at the home. The aunt reported that the mother was not able to speak due to the death of her son. CPSI advised the aunt that the Department wanted to ensure the safety of any other children in the home and offer grief counseling to the mother. The aunt reported the mother has an adult son and there are no other minor children in the home. CPSI provided the aunt this worker's number and informed her that this worker will contact the mother on tomorrow.

On 11/30/15 around 5:45 p.m. CPSI [REDACTED] went to the home to meet response time on said victim, [REDACTED] [REDACTED]. CPSI was not able to make face to face with said child due to the child was deceased at the time of the referral and that said victim was transported to the [REDACTED]. CPSI also went to the home on 12/1/14 around 8:30 a.m. to meet with the family around 8:30 a.m. No one was at the home at the time of the visit. CPSI spoke with [REDACTED] at [REDACTED] on 12/2/14. Mr. [REDACTED] stated that there were no marks or bruises found on [REDACTED] and the autopsy is still pending. CPSI conducted a DCS Check (TFACTS), Juvenile Court [REDACTED] and [REDACTED] Police Check [REDACTED] on the family and there was no history found through the check.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

CPSI contacted [REDACTED] School on 12/4/14 in regards to [REDACTED]. The counselor at [REDACTED] was not in the office and this worker left a message for the counselor. CPSI contacted the guardian, [REDACTED] for [REDACTED] on 12/4/14 CPSI introduced self and explained the purpose of the call. Ms. [REDACTED] said her grandson, [REDACTED] informed her after the death of [REDACTED] he was not taking his medication. Ms. [REDACTED] said she would also get on [REDACTED] due to he was not taking his medication and would have to watch [REDACTED] to ensure he would take his medication. Ms. [REDACTED] allowed this worker to talk with [REDACTED] in regards to [REDACTED]. [REDACTED] said he is fourteen years old and is cousin is [REDACTED] and they were close and would play video games all the time. He said that [REDACTED] would tell him he was tired of taking the medication and he was going to stop taking it due to the medication was making him sleepy and he was not able to stay up and play video games. He said he told the family that he was not taking the medication after he died.

CPSI went to the home of the [REDACTED] family located at [REDACTED] on 12/4/14. CPSI introduced self to the family and extended the condolences to the family. At the home during the visit was the mother, [REDACTED] father [REDACTED] aunt, [REDACTED] grandmother, [REDACTED]. CPSI observed the home consisted of three bedrooms, two baths, den, living room and kitchen. CPSI also observed the room of [REDACTED] that was fully furnished. The household compositions includes the mother, [REDACTED] and aunt [REDACTED] also the mother has an adult son, [REDACTED] (21 years old) whom does not reside in the home. The father, Mr. [REDACTED] resides at [REDACTED].

The mother stated that on 11/27/14 that morning her, [REDACTED] and the aunt, Ms. [REDACTED] were at the home. The mother said they left the home sometime after 12:00 p.m. and went over family members home for Thanksgiving and left their home sometime after 4:00 p.m. The mother said her and [REDACTED] went to numerous stores shopping for Christmas gifts and returned to the home that night (the mother was not certain what time they arrived home). The mother said the next day, 11/28/14 they went out that day to continue Christmas shopping and arrived home sometime that night and was home by 11:00 p.m. The mother said [REDACTED] was fine during the holidays and that night he came to check on her and she went to bed.

The mother said the next morning on 11/29/14 the aunt, Ms. [REDACTED] was preparing breakfast that morning and she noticed [REDACTED] did not come out of his room because he loves to eat. The mother said she went into his room and found him on the floor face down chest raised and foam coming from his mouth. The mother said she called the paramedics and when they arrived they pronounced him dead and obtained his medication and transported him to the morgue. The mother said [REDACTED] was a good kid and did not have any behavior problems at school or home and made good grades.

The mother said he was not on drugs or affiliated with any gangs. The mother said the only health condition he had was seizures and he attended a neurologist, [REDACTED] for the last few years. The mother said the last seizure he had was about eight months ago and he had been on medication for his seizures. The mother said he was on three different medications for his seizure; pamaploid, capra and topax and she does not know the dosages due to the paramedics took the medication. The mother said that he took the medication once a day. The mother said [REDACTED] was his primary physician and he was seen about three weeks ago due to the child had a physical because he wanted to play wrestling for his school. The mother said he attended [REDACTED] School and was in the eleventh grade. The mother said that [REDACTED] was her best friend and they had a close relationship and now she feels left alone since he has passed.

CPSI spoke with the father, Mr. [REDACTED] at the home on 12/4/14 and he said [REDACTED] was a good kid and he would never do any type of drugs or involved with a gang. The father said he was active in his life and his mother took good care of him. CPSI spoke with the aunt, Ms. [REDACTED] and the grandmother, Ms. [REDACTED] and they both said [REDACTED] was loved by his parents and family and they believe he died from a seizure and no one would never abuse or neglect him. The mother said she heard from [REDACTED] fourteen year old cousin, [REDACTED] he had not been taking his medication for his seizures and she provided his guardian's information. CPSI observed the home was neat and clean at the time of the visit and completed the authorizations papers with the parents. CPSI informed the parents that the Department can refer grief counseling to the family if needed.

NEGLECT DEATH:

DCS Policy defines any child death that is the result of the caretaker's failure to meet childcare responsibilities.

CPIT was held in [REDACTED] County on 12/2/14 and stamped as DCS to Handle As Appropriate by Assistant District Attorney.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

The Department received a P-1 Referral on [REDACTED] [REDACTED] alleging Neglect Death. The alleged perpetrator is unknown. "The [REDACTED] County Medical Examiner is investigating the death of [REDACTED] (DOB: [REDACTED]). This 16 year-old child was discovered unresponsive in bed at approximately 0925 hours on the morning of 11/29/2014, by his mother. [REDACTED] [REDACTED] responded to the residence of [REDACTED] where paramedics confirmed asystole at 0938 hours. [REDACTED] [REDACTED] pronounced death at 1136 hours. A scene investigation was conducted by this office and [REDACTED] Police Department, and the decedent's remains were transported to this office for autopsy. The cause and manner of death are pending at this time. There was no evidence found due to the Department received the autopsy and was reported the child died from natural causes (seizure) The department also received medical records. [REDACTED] [REDACTED] signed off on cpit form classifying as AUPU.

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

Narrative Type: Addendum 2 Entry Date/Time: 05/26/2015 11:38 AM Entered By: [REDACTED]

Error of Case Summary Note.

Narrative Type: Addendum 1 Entry Date/Time: 04/16/2015 03:19 PM Entered By: [REDACTED]

CPSI received medical records from his primary doctor, [REDACTED] [REDACTED] on [REDACTED] [REDACTED]. The child was last seen on 11/13/14 for a Physical and that his exam was normal and giving immunization shots. The records indicated that victim was seen on 9/8/14 due to the child had a possible spider bit on his left arm that has been itching for about a week he reports it has gradually gotten bigger with no discharge. His current medications Topamax, Pamelor ans Kepra. The doctor prescribed the child Cleocin for the spider bite mark.

CPSI also received medical reports from the Neurologist where the patient goes for his medication, pamaploid, capra ans topax and the family was compliant with services. Enclosed in case file.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/16/2015

Contact Method:

Contact Time: 02:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 04/16/2015

Completed date: 04/16/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/16/2015 02:50 PM Entered By: [REDACTED]

NEGLECT DEATH:

DCS Policy defines any child death that is the result of the caretaker's failure to meet childcare responsibilities.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/16/2015

Contact Method:

Contact Time: 09:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 05/06/2015

Completed date: 05/06/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 05/06/2015 02:25 PM Entered By: [REDACTED]

The closing notification of the case was forwarded to the the Judge (Juvenile Court) and the Attorney General.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/15/2015

Contact Method:

Contact Time: 09:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 04/16/2015

Completed date: 04/16/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/16/2015 02:28 PM Entered By: [REDACTED]

The case was heard in morning cpit and [REDACTED] [REDACTED] reviewed the case and signed off that the allegation was AUPU.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 03/26/2015

Contact Method: Phone Call

Contact Time: 02:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/16/2015

Completed date: 04/16/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/16/2015 03:24 PM Entered By: [REDACTED]

CPSI contacted the mother and she said she received the autopsy report and it stated that he died from seizure disorder. The mother said she is doing fine and is seeking counseling with her church. CPSI does not have to make a monthly visit with the family due to there are no children in the home.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	02/11/2015	Contact Method:	Correspondence
Contact Time:	12:00 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	04/16/2015
Completed date:	04/16/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Collateral Contact		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 04/16/2015 02:44 PM Entered By: [REDACTED]

CPSI received medical records from his primary doctor, [REDACTED] on [REDACTED]. The child was last seen on 11/13/14 for a Physical and that his exam was normal and giving immunization shots. The records indicated that victim was seen on 9/8/14 due to the child had a possible spider bit on his left arm that has been itching for about a week he reports it has gradually gotten bigger with no discharge. His current medications Topamax, Pamelor ans Keppra. The doctor prescribed the child Cleocin for the spider bite mark.

Narrative Type: Addendum 1 Entry Date/Time: 04/16/2015 02:47 PM Entered By: [REDACTED]

CPSI also received medical reports from the Neurologist where the patient goes for his medication, pamaploid, capra ans topax and the family was compliant with services. Enclosed in case file.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/11/2015

Contact Method:

Contact Time: 09:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/16/2015

Completed date: 04/16/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/16/2015 02:29 PM Entered By: [REDACTED]

CPSI sent off case for morning review. The case was stamped as copy to [REDACTED] [REDACTED] for review. CPSI will wait for [REDACTED] [REDACTED] recommendations.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 01/30/2015

Contact Method: Correspondence

Contact Time: 12:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 04/16/2015

Completed date: 04/16/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/16/2015 02:34 PM Entered By: [REDACTED]

CPSI received the autopsy report from the Medical Examiner. The examiner [REDACTED] [REDACTED] Investigator determined the cause of death was seizure disorder and cause of manner was natural. The report is enclosed in case file.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 01/07/2015

Contact Method: Phone Call

Contact Time: 09:30 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 01/09/2015

Completed date: 01/09/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 01/09/2015 08:33 AM Entered By: [REDACTED]

CPSI received a phone call from the mother, [REDACTED] [REDACTED] in regards to [REDACTED] [REDACTED]. Ms. [REDACTED] said that the funeral went well and that she will be getting counseling from her church. Ms. [REDACTED] apologized to this worker due to she thought that the Department was accusing her of her son's death. CPSI explained the policies with the Department and the Department was not accusing her and we needed to get information. CPSI informed the mother if the Department can refer her to services if needed in the future. There are no other children in the home and this worker is awaiting for the autopsy report.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/08/2014

Contact Method:

Contact Time: 09:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 05/08/2015

Completed date: 05/08/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 05/08/2015 12:54 PM Entered By: [REDACTED]

CPSI completed and forward fatality report to TL to forward to [REDACTED]



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

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	12/05/2014	Contact Method:	
Contact Time:	06:30 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	05/01/2015
Completed date:	05/01/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 05/01/2015 12:38 PM Entered By: [REDACTED]

The following Internet Records Clearance inquiries were completed on [REDACTED] [REDACTED]

- Justice System Inquiry (JSSI): Negative
- Tennessee Felony Registry: Negative
- Methamphetamine Offender Registry: Negative
- Tennessee Sexual Offender Registry: Negative
- National Sexual Offender Registry: Negative
- Tennessee Dept. of Health Vulnerable Person: Negative
- SSMS Check: Negative



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/05/2014

Contact Method:

Contact Time: 06:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 05/01/2015

Completed date: 05/01/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 05/01/2015 12:37 PM Entered By: [REDACTED]

The initial SDM is rated as Safe. There are no minor children in the home.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/05/2014

Contact Method:

Contact Time: 05:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 05/01/2015

Completed date: 05/01/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 05/01/2015 12:39 PM Entered By: [REDACTED]

CPSI explained and had Ms. [REDACTED] to complete the following: Client Rights Handbook Acknowledgement; HIPPA Notice of Privacy Practices-Client Acknowledge; Notification of Equal Access to Programs and Services and Grievance Procedures; Native American Heritage Veto Verification; TNDCS Authorization for Release of Information to DCS and Notification of Release; and TNDCS Authorization for Release of Information to DCS: TennCare Eligibility.



Tennessee Department of Children's Services
Case Recording Summary

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

Case Recording Details

Recording ID: [REDACTED]	Status: Completed
Contact Date: 12/05/2014	Contact Method: Face To Face
Contact Time: 04:15 PM	Contact Duration: Less than 01 Hour
Entered By: [REDACTED]	Recorded For:
Location: Family Home	Created Date: 12/08/2014
Completed date: 12/08/2014	Completed By: [REDACTED]
Purpose(s): Safety - Child/Community	
Contact Type(s): Parent/Caretaker Interview	
Contact Sub Type:	

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

Narrative Type: Original Entry Date/Time: 12/08/2014 11:13 PM Entered By: [REDACTED]

CPSI went to the home of the [REDACTED] family located at [REDACTED] ON 12/5/14. CPSI introduced self to the family and extended the condolences to the family. At the home during the visit was the mother, [REDACTED] father [REDACTED] aunt, [REDACTED] grandmother, [REDACTED]. CPSI observed the home consisted of three bedrooms, two baths, den, living room and kitchen. CPSI also observed the room of [REDACTED] that was fully furnished. The household compositions includes the mother, [REDACTED] and aunt [REDACTED] also the mother has an adult son, [REDACTED] (21 years old) whom does not reside in the home. The father Mr. [REDACTED] resides at [REDACTED]

The mother stated that on 11/27/14 that morning her, [REDACTED] and the aunt, Ms. [REDACTED] were at the home. The mother said they left the home sometime after 12:00 p.m. and went over family members home for Thanksgiving and left their home sometime after 4:00 p.m. The mother said her and [REDACTED] went to numerous stores shopping for Christmas gifts and returned to the home that night (the mother was not certain what time they arrived home). The mother said the next day, 11/28/14 they went out that day to continue Christmas shopping and arrived home sometime that night and was home by 11:00 p.m. The mother said [REDACTED] was fine during the holidays and that night he came to check on her and she went to bed. The mother said the next morning on 11/29/14 the aunt, Ms. [REDACTED] was preparing breakfast that morning and she noticed [REDACTED] did not come out of his room because he loves to eat. The mother said she went into his room and found him on the floor face down chest raised and foam coming from his mouth. The mother said she called the paramedics and when they arrived they pronounced him dead and obtained his medication and transported him to the morgue. The mother said [REDACTED] was a good kid and did not have any behavior problems at school or home and made good grades. The mother said he was not on drugs or affiliated with any gangs. The mother said the only health condition he had was seizures and he attended a neurologist, [REDACTED] for the last few years. The mother said the last seizure he had was about eight months ago and he had been on medication for his seizures. The mother said he was on three different medications for his seizure; pamaploid, capra and topax and she does not know the dosages due to the paramedics took the medication. The mother said that he took the medication once a day. The mother said [REDACTED] was his primary physician and he was seen about three weeks ago due to the child had a physical because he wanted to play wrestling for his school. The mother said he attended [REDACTED] School and was in the eleventh grade. The mother said that [REDACTED] was her best friend and they had a close relationship and now she feels left alone since he has passed.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

CPSI spoke with the father, Mr. [REDACTED] and he said [REDACTED] was a good kid and he would never do any type of drugs or involved with a gang. The father said he was active in his life and his mother took good care of him. CPSI spoke with the aunt, Ms. [REDACTED] and the grandmother, Ms. [REDACTED] and they both said [REDACTED] was loved by his parents and family and they believe he died from a seizure and no one would ever abuse or neglect him. The mother said she heard from [REDACTED] fourteen year old cousin, [REDACTED] [REDACTED] he had not been taking his medication for his seizures and she provided his guardian's information. CPSI observed the home was neat and clean at the time of the visit and completed the authorization papers with the parents. CPSI informed the parents that the Department can refer grief counseling to the family if needed.

Narrative Type: Addendum 1 Entry Date/Time: 12/08/2014 11:18 PM Entered By: [REDACTED]

CPSI entered the wrong date for the parent interview. The interview took place on 12/4/14.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/04/2014

Contact Method: Phone Call

Contact Time: 08:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 12/08/2014

Completed date: 12/08/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/08/2014 11:15 PM Entered By: [REDACTED]

CPSI contacted the guardian, [REDACTED] for [REDACTED] CPSI introduced self and explained the purpose of the call. Ms. [REDACTED] said her grandson, [REDACTED] informed her after the death of [REDACTED] he was not taking his medication. Ms. [REDACTED] said she would also get on [REDACTED] due to he was not taking his medication and would have to watch [REDACTED] to ensure he would take his medication. Ms. [REDACTED] allowed this worker to talk with [REDACTED] in regards to [REDACTED] [REDACTED] said he is fourteen years old and is cousin is [REDACTED] and they were close and would play video games all the time. He said that [REDACTED] would tell him he was tired of taking the medication and he was going to stop taking it due to the medication was making him sleepy and he was not able to stay up and play video games. He said he told the family that he was not taking the medication after he died.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/04/2014

Contact Method: Phone Call

Contact Time: 12:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 12/08/2014

Completed date: 12/08/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/08/2014 11:19 PM Entered By: [REDACTED]

12/4/14

CPSI contacted [REDACTED] at the Homicide Department with the [REDACTED] Police Department. [REDACTED] said that she just returned off from vacation and she was assigned to the case of [REDACTED]. [REDACTED] said that from the police report that [REDACTED] suffered from seizures and the mother found the child in his room unresponsive. [REDACTED] said the paramedics arrived and found the child face down with his body in a fist position and was pronounced dead on the scene. [REDACTED] said the child was transported to the morgue along with his medication and there is no more information at this time.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/04/2014

Contact Method: Phone Call

Contact Time: 11:30 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 12/08/2014

Completed date: 12/08/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/08/2014 11:20 PM Entered By: [REDACTED]

12/4/14

CPSI contacted [REDACTED] School in regards to [REDACTED] [REDACTED]. The counselor at [REDACTED] was not in the office and this worker left a message for the counselor.



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

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	12/04/2014	Contact Method:	
Contact Time:	09:30 AM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	12/08/2014
Completed date:	12/08/2014	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 12/08/2014 11:21 PM Entered By: [REDACTED]

CPSI contacted the mother by phone this morning and left a message on the voicemail to schedule a home visit. CPSI received a phone call from the mother and this worker scheduled a home visit for this evening at 4:00 p.m.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/02/2014

Contact Method:

Contact Time: 10:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 05/06/2015

Completed date: 05/06/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 05/06/2015 02:24 PM Entered By: [REDACTED]

The initial notification of the case was forwarded to the the Judge (Juvenile Court) and the Attorney General.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/02/2014

Contact Method:

Contact Time: 09:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 05/01/2015

Completed date: 05/01/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 05/01/2015 12:36 PM Entered By: [REDACTED]

The case was heard in morning cpit on 12/2/14 by [REDACTED]. The disposition was DCS to Handle as Appropriate and bring back when autopsy report is received.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/02/2014

Contact Method:

Contact Time: 08:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 12/08/2014

Completed date: 12/08/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/08/2014 11:25 PM Entered By: [REDACTED]

CPSI attempted to contact the mother, [REDACTED] [REDACTED] by phone and no one answered the phone, CPSI could not leave a message on the voicemail due to it was full



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 12/01/2014 Contact Method:
 Contact Time: 11:30 AM Contact Duration: Less than 30
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 05/14/2015
 Completed date: 05/14/2015 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: 05/14/2015 05:08 PM Entered By: [REDACTED]

CPSI made contact with this Lead Investigator and informed me that she still had not been able to make contact with the family. The case was staffed with Program Coordinator [REDACTED] who had spoken with [REDACTED] Regional Investigations Director [REDACTED] who instructed program to find out if the client had any prior gang involvement or a history with drugs or violence. The CPSI was instructed to find out what school the child attended and to go to Juvenile court to see if there were any records of the family in their system.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/01/2014

Contact Method: Phone Call

Contact Time: 11:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 12/08/2014

Completed date: 12/08/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Referent Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/08/2014 11:29 PM Entered By: [REDACTED]

CPSI spoke with the referent in regards to the referral on [REDACTED] [REDACTED]. The referent stated that there were no marks or bruises found on [REDACTED] and the autopsy is still pending.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/01/2014

Contact Method: Phone Call

Contact Time: 11:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 12/08/2014

Completed date: 12/08/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/08/2014 11:30 PM Entered By: [REDACTED]

CPSI spoke with [REDACTED] at the [REDACTED] on 12/2/14. Mr. [REDACTED] stated that there were no marks or bruises found on [REDACTED] and the autopsy is still pending



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/01/2014

Contact Method: Face To Face

Contact Time: 10:00 AM

Contact Duration: Less than 01 Hour

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 12/08/2014

Completed date: 12/08/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/08/2014 11:09 PM Entered By: [REDACTED]

12/1/14

CPSI conducted a DCS Check, Juvenile Court and [REDACTED] Police Check on the family and there was no history found through the check/



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/01/2014

Contact Method:

Contact Time: 08:30 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 12/08/2014

Completed date: 12/08/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/08/2014 11:08 PM Entered By: [REDACTED]

12/1/14

CPSI went to the home on 12/1/14 that morning and evening and no one was home at the time of the visit, also this worker contacted the mother by phone and no one answered.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 11/30/2014 Contact Method: Attempted Face To Face
 Contact Time: 05:45 PM Contact Duration: Less than 01 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 12/08/2014
 Completed date: 12/08/2014 Completed By: [REDACTED]
 Purpose(s): Safety - Child/Community
 Contact Type(s): Initial ACV Face To Face
 Contact Sub Type:

Children Concerning

[REDACTED] [REDACTED]

Participant(s)**Narrative Details**

Narrative Type: Original Entry Date/Time: 12/08/2014 11:00 PM Entered By: [REDACTED]

11/30/14

CPSI went to the home of the [REDACTED] family on 11/16/14 at [REDACTED]. No one was at home at the time of the visit. CPSI also contacted the family by phone but no one answered the phone at the time of the call.

Narrative Type: Addendum 2 Entry Date/Time: 04/16/2015 02:23 PM Entered By: [REDACTED]

Error: CPSI went to the home on 11/30/14 around 5:45 p.m. and went to the home on 12/1/14 to meet with the family around 8:30 a.m. No one was at the home at the time of the visit.

Narrative Type: Addendum 1 Entry Date/Time: 04/16/2015 02:20 PM Entered By: [REDACTED]

Error: CPSI went to the home on 11/30/14 around 5:30 p.m.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 11/30/2014

Contact Method: Face To Face

Contact Time: 05:45 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 12/29/2014

Completed date: 12/29/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Initial ACV Face To Face

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)**Narrative Details**

Narrative Type: Original Entry Date/Time: 12/29/2014 02:39 PM Entered By: [REDACTED]

CPSI [REDACTED] went to the home to meet response time on said victim, [REDACTED] [REDACTED] CPSI was not able to make face to face with said child due to the child was deceased at the time of the referral and that said victim was transported to the [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 11/30/2014

Contact Method:

Contact Time: 04:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 12/08/2014

Completed date: 12/08/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/08/2014 11:06 PM Entered By: [REDACTED]

On 11/30/14 CPSI [REDACTED] contacted the mother, [REDACTED] [REDACTED] via phone in regards to the referral received on [REDACTED]. [REDACTED] CPSI contacted the mother, [REDACTED] [REDACTED] by phone at [REDACTED]. CPSI introduced self and explained the purpose of the call and gave the mother the Department's condolences in regards to her son. Ms. [REDACTED] was very emotional and crying at the time of the phone call. CPSI spoke with an aunt that was at the home. The aunt reported that the mother was not able to speak due to the death of her son. CPSI advised the aunt that the Department wanted to ensure the safety of any other children in the home and offer grief counseling to the mother. The aunt reported the mother has an adult son and there are no other minor children in the home. CPSI provided the aunt this worker's number and informed her this worker will contact the mother on tomorrow.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 11/30/2014 Contact Method:
 Contact Time: 03:58 PM Contact Duration: Less than 15
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 05/14/2015
 Completed date: 05/14/2015 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: 05/14/2015 04:49 PM Entered By: [REDACTED]

The investigation concerning the death of [REDACTED] [REDACTED] has been assigned to [REDACTED] as a priority one with the allegation listed as Neglect Death and the alleged perp listed as unknown at this time. The case is being assigned to CPSI II [REDACTED] [REDACTED] who is responsible for meeting the response by 12-1-14 at 3:36 PM. The Judge and the A.G.'s office will be notified of this report by local protocol and procedure. The CPSI has been instructed to go to the home and observe the child and any other siblings living in the home. If there are other children living in the home they will need to see a doctor for a well child check-up. The CPSI is to engage the parents, complete the family composition and run background and historical checks on all adults living in the home and have the required forms signed including releases of information. The CPSI will engage and offer services to the family i.e. grief counseling and any other services deemed necessary after the home has been assessed. Collateral contacts will need to be made and any witnesses who were around at the time of the clients death or have knowledge of any concerning events or activities will need to be interviewed.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 11/30/2014

Contact Method:

Contact Time: 03:35 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 12/08/2014

Completed date: 12/08/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Case Summary

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/08/2014 11:35 PM Entered By: [REDACTED]

Note: This information was received via fax and has been entered verbatim from the report received.

The Department received a P-1 Referral on [REDACTED] [REDACTED] alleging Neglect Death. The alleged perpetrator is unknown. "The [REDACTED] County Medical Examiner is investigating the death of [REDACTED] [REDACTED] (DOB: [REDACTED]). This 16 year-old child was discovered unresponsive in bed at approximately 0925 hours on the morning of 11/29/2014, by his mother. [REDACTED] [REDACTED] responded to the residence of [REDACTED] [REDACTED] where paramedics confirmed asystole at 0938 hours. [REDACTED] [REDACTED] pronounced death at 1136 hours. A scene investigation was conducted by this office and [REDACTED] Police Department, and the decedent's remains were transported to this office for autopsy. The cause and manner of death are pending at this time. The mother's name is [REDACTED] [REDACTED] (DOB: [REDACTED] SSN# [REDACTED] and her contact phone number is [REDACTED]. Our case number is [REDACTED]."

Per SDM: Investigative Track/Priority 1 [REDACTED] [REDACTED] CM 3 on 11-30-2014 at 3:40 P.M.

[REDACTED] paged at 3:51 P.M.

[REDACTED] 11-30-14 03:51:48 PM CST [REDACTED] 11-30-14 03:52:43 PM CST Received

Email notification sent to [REDACTED] [REDACTED] Regional Administrator [REDACTED] and the [REDACTED] County email notification group.

County: [REDACTED]

Notification: None

School/ Daycare: Unknown

Native American Descent: No

Directions: None Given



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED]

Narrative Type: Addendum 1 Entry Date/Time: 04/16/2015 02:19 PM Entered By: [REDACTED]

The Department of Children Services received a referral on 11/30/14.