



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

**Intake**

Intake ID: [REDACTED]  
 Intake Taken By: [REDACTED] Intake Date/Time: 12/02/2014 06:22 AM [REDACTED]  
 Track Assigned: Investigation Priority Assigned: 1  
 Screened By: [REDACTED]  
 Date Screened: 12/02/2014

**Investigation**

Investigation ID: [REDACTED]  
 First County/Region: [REDACTED]  
 Date/Time Assigned : 12/02/2014 12:43 PM  
 First Team Leader Assigned: [REDACTED] Date/Time 12/02/2014 12:00 AM  
 First Case Manager: [REDACTED] Date/Time 12/02/2014 12:00 AM

**Allegations**

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
			CSEM ?		
[REDACTED]	1 Yr 10 Mos	Neglect Death	Yes	[REDACTED]	Birth Mother
[REDACTED]	1 Yr 10 Mos	Neglect Death	Yes	[REDACTED]	Birth Father

**Referent(s)**

Referent Name: [REDACTED] Role to Alleged Victim(s): [REDACTED]  
 Referent Address: [REDACTED]  
 Referent Phone Number: [REDACTED]  
 Type of Contact: I-3 Phone  
 Notification: Letter  
 Narrative: Family Case IDs: [REDACTED] (Father as Minor)  
 Open Court Custody/FSS/FCIP No  
 Closed Court Custody No  
 Open: No.  
 Substantiated: No.  
 Death: No priors.  
 Number of Screen Outs: 0



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

History (not listed above): No.

County: [REDACTED]  
 Notification: letter  
 School/ Daycare: unknown.  
 Native American Descent: no  
 Directions: none given.

Reporter's name/relationship: [REDACTED]

Reporter states [REDACTED] (2 months) resided with his mother, [REDACTED] and father, [REDACTED].  
 No one else resides in the home with the family.

[REDACTED] passed away on 12/2/2014 at approximately 6:20am. It is believed that everyone in the home was asleep prior to finding the child not breathing. The mother woke up and found that [REDACTED] was not breathing, then contacted 911. The firefighters were the first to respond on the scene. It is reported that firefighters performed CPR on the child, however [REDACTED] did not recover. EMS transported the child to [REDACTED]. The doctor pronounced [REDACTED] dead. The doctor has not stated as to the reason for the child's death. The doctor's name is unknown. It is believed that the child was sleeping in the bed with the family. It is believed that the child rolled over and suffocated himself with a blanket on the bed.

There are no injuries on [REDACTED]. It is not believed that alcohol or drugs were a part of the child's demise. It is not believed that [REDACTED] had any prior medical conditions prior to his death. It is not believed that there are any mental issues, domestic violence or any issues with alcohol and drugs that the referent is aware of. There are no known patterns of abuse in the home. It is unknown if there are previous instances of child fatality in the home or of [REDACTED] suffering from a serious injury.

The parents have spoken to law enforcement. No one has been arrested. It is not believed that either the mother or the father are going to have any charges at the time of the report. The mother and the father do not have a history with law enforcement that the referent is aware of. It is not believed that the death was caused by abuse or neglect.

An autopsy has not been completed at the time of the report. It is unknown where or when the autopsy will take place.

Special Needs or Disabilities: none that the referent is aware of.

Child's current location/is the child safe at this time [REDACTED]

Perpetrator's location at this time: mother is [REDACTED] and the father is at home.

Any other safety concerns for the child(ren) or worker who may respond: none that the referent is aware of at the time of the report.

Domestic Violence present in the home: none reported.

Per SDM: Investigative Track, P1 on 12-02-14 @ 07:36am, [REDACTED]

Recipients	Time Issued	Response Received	Devices	Responses	Received
[REDACTED]	12-02-14 07:37:47 AM	[REDACTED]	12-02-14 07:38:38 AM	[REDACTED]	[REDACTED]
[REDACTED]	12-02-14 07:37:49 AM	---	[REDACTED]	[REDACTED]	[REDACTED]

Email Sent

Email notification sent to [REDACTED] with [REDACTED] copied on correspondence. Email notification also sent to [REDACTED] on 12-02-14 @ 07:42am, [REDACTED]



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

**Participant(s)**

**Name:** [REDACTED]

Gender: Female

Date of Birth:

Participant ID: [REDACTED]

SSN:

Race:

Age:

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

Contact:

Contact Type:

Contact Comments:

**External History Search Results:**

**DCS History Search Results:**

**DCS Intake Search Results:**



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

**Name:** [REDACTED]

**Gender:** Male

**Date of Birth:** [REDACTED]

**Partipant ID:** [REDACTED]

**SSN:**

**Race:** Black/African

**Age:** 1 Yr 10 Mos

**Address:** [REDACTED]

**Deceased Date:**

**School/ ChildCare Comments:**

**Alleged Perpetrator:** No

**DCS Foster Child:** No

**Contact:** [REDACTED]

**Contact Type:** CELL

**Contact Comments:**

**External History Search Results:**

**DCS History Search Results:**

**DCS Intake Search Results:**



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

**Name:** [REDACTED]

**Gender:** Male

**Date of Birth:** [REDACTED]

**Participant ID:** [REDACTED]

**SSN:** [REDACTED]      **Race:** Black/African      **Age:** 24 Yrs

**Address:**

**Deceased Date:**

**School/ ChildCare Comments:**

**Alleged Perpetrator:** Yes

**DCS Foster Child:** No

**Contact:**

**Contact Type:**

**Contact Comments:**

**External History Search Results:**

**DCS History Search Results:**

**DCS Intake Search Results:**



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

**A. Investigation**

Case Name: [REDACTED]  
 Referral Date: 12/02/2014  
 Street Address: [REDACTED]  
 City/State/Zip: [REDACTED]

Investigation ID: [REDACTED]  
 Assignment Date: 02/23/2015

**B. Allegation**

#	Children's Name	DOB	Specific Allegation for Each Child	Alleged Perpetrator's Name	DOB	Classification	Severe Abuse	Classified By
		SSN			SSN		CSEM	
1	[REDACTED]	[REDACTED]	Neglect Death	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[REDACTED]
		[REDACTED]			[REDACTED]		05/18/2015	
2	[REDACTED]	[REDACTED]	Drug Exposed Infant	[REDACTED]	[REDACTED]	Allegation Substantiated / Perpetrator Substantiated	No	[REDACTED]
		[REDACTED]			[REDACTED]		05/18/2015	
3	[REDACTED]	[REDACTED]	Neglect Death	[REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[REDACTED]
		[REDACTED]			[REDACTED]		05/18/2015	
4	[REDACTED]	[REDACTED]	Drug Exposed Infant	[REDACTED]	[REDACTED]	Allegation Substantiated / Perpetrator Substantiated	No	[REDACTED]
		[REDACTED]			[REDACTED]		05/18/2015	

**C. Disposition Decision**

Disposition Decision: Assessed and Closed

Comments:

**D. Case Workers**

Case Worker: [REDACTED]

Date: 05/27/2015

Team Leader: [REDACTED]

Date: 05/28/2015

**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:**

CPSI was unable to interview the victim because he is deceased.



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

Phone Call with [REDACTED] on 5/18/2015: [REDACTED] spoke with [REDACTED] in regards to the case. IC asked if the parents appeared impaired during the interviews. He reported that the parents didn't seem impaired to him and they were talking to him fine. He reported that there is no way to say that the drugs impaired them. He felt that their admissions were pretty strong. The parents admitted and they found some drugs. They found some marijuana in the parent's room where the baby was sleeping. He reported that the parents told him that they smoked with some friends outside the home. He stated that he would speak with the DA again about this case.

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

[REDACTED] reported last night, she fed [REDACTED] at about 9 or 9:30 and put him in his swing and he fell asleep. At 10pm, both parents took a shower and then they had some friends over and [REDACTED] was playing cards and she was watching tv. [REDACTED] woke up and [REDACTED] held him on his lap while he slept then about 1am they all went to bed. [REDACTED] is spoiled and he doesn't like sleeping in his crib so she puts him in their big bed. [REDACTED] sleeps on the left, she in the middle and then they made an area for the baby with blankets so the baby couldn't roll off with other blankets. They had a wedge pillow that they used to keep the baby from rolling on his side but that was in the wash so [REDACTED] just rolled up a blanket and put it behind his back and she thought that would keep the baby from rolling but it didn't work. At 5:12, [REDACTED] woke up for work and she got up to pee and that was when she checked on the baby. She noticed right away that he was very pale and his lips were blue. She said she knew that he was already dead right then. She yelled for [REDACTED] to come and he checked the baby and didn't know what to do so he called her father, [REDACTED] who told them to call 911 and he did.

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

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

Allegation Unsubstantiated and Perpetrator Unsubstantiated for neglect death; Allegation Substantiated and Perpetrator Substantiated for drug exposed infant. The alleged perpetrators are mother, [REDACTED] and father, [REDACTED]

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



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

Case Id: [REDACTED]

Case Name | [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED] Status: Completed  
 Contact Date: 08/07/2015 Contact Method:  
 Contact Time: 02:20 PM Contact Duration:  
 Entered By: [REDACTED] Recorded For: [REDACTED]  
 Location: Created Date: 08/07/2015  
 Completed date: 08/07/2015 Completed By: [REDACTED]  
 Purpose(s): Safety - Child/Community  
 Contact Type(s): Administrative Review  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/07/2015 02:20 PM Entered By: [REDACTED]  
 This case has been reviewed by [REDACTED] and has been approved for closure.

**Case Recording Details**

Recording ID: [REDACTED] Status: Completed  
 Contact Date: 08/07/2015 Contact Method:  
 Contact Time: 02:20 PM Contact Duration:  
 Entered By: [REDACTED] Recorded For: [REDACTED]  
 Location: Created Date: 08/07/2015  
 Completed date: 08/07/2015 Completed By: [REDACTED]  
 Purpose(s): Safety - Child/Community  
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**Children Concerning****Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 08/07/2015 02:20 PM Entered By: [REDACTED]  
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**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: [REDACTED]

Case Name | [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	08/07/2015	Contact Method:	
Contact Time:	02:20 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	08/07/2015
Completed date:	08/07/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
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Narrative Type: Original      Entry Date/Time: 08/07/2015 02:20 PM      Entered By: [REDACTED]  
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Location:		Created Date:	08/07/2015
Completed date:	08/07/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
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Narrative Type: Original      Entry Date/Time: 08/07/2015 02:20 PM      Entered By: [REDACTED]  
 This case has been reviewed by [REDACTED] and has been approved for closure.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	08/07/2015	Contact Method:	
Contact Time:	02:20 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	08/07/2015
Completed date:	08/07/2015	Completed By:	[REDACTED]
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Narrative Type: Original      Entry Date/Time: 08/07/2015 02:20 PM      Entered By: [REDACTED]  
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Contact Time:	02:20 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	08/07/2015
Completed date:	08/07/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
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**Children Concerning****Participant(s)****Narrative Details**

Narrative Type: Original      Entry Date/Time: 08/07/2015 02:20 PM      Entered By: [REDACTED]  
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**Tennessee Department of Children's Services**  
**Case Recording Summary**

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED] Status: Completed  
 Contact Date: 08/07/2015 Contact Method:  
 Contact Time: 02:20 PM Contact Duration:  
 Entered By: [REDACTED] Recorded For: [REDACTED]  
 Location: Created Date: 08/07/2015  
 Completed date: 08/07/2015 Completed By: [REDACTED]  
 Purpose(s): Safety - Child/Community  
 Contact Type(s): Administrative Review  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 08/07/2015 02:20 PM Entered By: [REDACTED]  
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**Case Recording Details**

Recording ID: [REDACTED] Status: Completed  
 Contact Date: 08/07/2015 Contact Method:  
 Contact Time: 02:20 PM Contact Duration:  
 Entered By: [REDACTED] Recorded For: [REDACTED]  
 Location: Created Date: 08/07/2015  
 Completed date: 08/07/2015 Completed By: [REDACTED]  
 Purpose(s): Safety - Child/Community  
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**Children Concerning****Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 08/07/2015 02:20 PM Entered By: [REDACTED]  
 This case has been reviewed by [REDACTED] and has been approved for closure.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	08/07/2015	Contact Method:	
Contact Time:	02:20 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	08/07/2015
Completed date:	08/07/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

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

Narrative Type: Original      Entry Date/Time: 08/07/2015 02:20 PM      Entered By: [REDACTED]  
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**Case Recording Details**

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	08/07/2015	Contact Method:	
Contact Time:	02:20 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	08/07/2015
Completed date:	08/07/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

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

Narrative Type: Original      Entry Date/Time: 08/07/2015 02:20 PM      Entered By: [REDACTED]  
 This case has been reviewed by [REDACTED] and has been approved for closure.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	08/07/2015	Contact Method:	
Contact Time:	02:20 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	08/07/2015
Completed date:	08/07/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

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

Narrative Type: Original      Entry Date/Time: 08/07/2015 02:20 PM      Entered By: [REDACTED]  
 This case has been reviewed by [REDACTED] and has been approved for closure.

**Case Recording Details**

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	08/07/2015	Contact Method:	
Contact Time:	02:20 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	08/07/2015
Completed date:	08/07/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

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

Narrative Type: Original      Entry Date/Time: 08/07/2015 02:20 PM      Entered By: [REDACTED]  
 This case has been reviewed by [REDACTED] and has been approved for closure.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	08/07/2015	Contact Method:	
Contact Time:	02:20 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	08/07/2015
Completed date:	08/07/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

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

Narrative Type: Original      Entry Date/Time: 08/07/2015 02:20 PM      Entered By: [REDACTED]  
 This case has been reviewed by [REDACTED] and has been approved for closure.

**Case Recording Details**

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	08/07/2015	Contact Method:	
Contact Time:	02:20 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	[REDACTED]
Location:		Created Date:	08/07/2015
Completed date:	08/07/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

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

Narrative Type: Original      Entry Date/Time: 08/07/2015 02:20 PM      Entered By: [REDACTED]  
 This case has been reviewed by [REDACTED] and has been approved for closure.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/07/2015

Contact Method:

Contact Time: 02:20 PM

Contact Duration:

Entered By: [REDACTED]

Recorded For: [REDACTED]

Location:

Created Date: 08/07/2015

Completed date: 08/07/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 08/07/2015 02:20 PM      Entered By: [REDACTED]

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



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 05/28/2015

Contact Method:

Contact Time: 01:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/05/2015

Completed date: 06/05/2015

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 06/05/2015 03:51 PM      Entered By: [REDACTED]

Case Conference

[REDACTED] has completed the case and submitted for review.



**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:	System Completed
Contact Date:	05/28/2015	Contact Method:	
Contact Time:	12:10 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	05/28/2015
Completed date:	06/28/2015	Completed By:	System Completed
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: 05/28/2015 12:11 PM Entered By: [REDACTED]

**CASE SUMMARY:**

1. Referral assigned to Child Protective Services Investigator [REDACTED] alleging Neglect Death. The Alleged Child Victim (ACV) was [REDACTED], and the Alleged Perpetrators (AP) are [REDACTED]. This family had no history with the Department of Children's Services (DCS). The only history was of [REDACTED] as a juvenile.

2. Synopsis of Event: CPSI was unable to interview the victim because he is deceased. [REDACTED] reported last night, she fed [REDACTED] at about 9 or 9:30 and put him in his swing and he fell asleep. At 10pm, both parents took a shower and then they had some friends over and [REDACTED] was playing cards and she was watching tv. [REDACTED] woke up and [REDACTED] held him on his lap while he slept then about 1am they all went to bed [REDACTED] spoiled and he doesn't like sleeping in his crib so she puts him in their big bed [REDACTED] sleeps on the left, she in the middle and then they made an area for the baby with blankets so the baby couldn't roll off with other blankets. They had a wedge pillow that they used to keep the baby from rolling on his side but that was in the wash so [REDACTED] just rolled up a blanket and put it behind his back and she thought that would keep the baby from rolling but it didn't work. At 5:12, [REDACTED] woke up for work and she got up to pee and that was when she checked on the baby. She noticed right away that he was very pale and his lips were blue. She said she knew that he was already dead right then. She yelled for [REDACTED] to come and he checked the baby and didn't know what to do so he called her father, [REDACTED] who told them to call 911 and he did. She doesn't remember much after that except the police and EMT's working on [REDACTED] and taking him to the hospital next. They arrived shortly after that and at about 6:15 they told them that [REDACTED] was gone. She states that she has been hysterical since. Crying and crying. She can't believe that [REDACTED] is gone and that she won't have him to love and hold and watch him grow up.

[REDACTED] states that he had the baby asleep on his lap around 10 pm while he was playing cards with friends. He states that the family went to bed around 1 am and at that time, [REDACTED] put the baby to sleep in their big bed like they always do. The baby is spoiled and cries if they try to put him in his own bed so they put him in their bed. They are careful and check on him frequently. He got up at 5:12 am this morning and the next thing he knew, [REDACTED] was screaming for him to come quick because the baby was blue. He called her father, [REDACTED], because he didn't know what to do. [REDACTED] told him to call 911 immediately so he did. The police and EMS came around 5:25 and took the baby to the hospital. He said he can't talk about this situation and just wants to get [REDACTED] home where she can rest because she is blaming herself for the baby's death because she put the blankets around him.



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

Case Id: ██████████

Case Name: ██████████

Case Status: Close

Organization: ██████████

3. Investigator involved on the case was ██████████ investigated the death led by ██████████ received a copy of the Sudden Unexplained Infant Death Investigation form completed by ██████████. It states that the parents put the infant down for the night at about 1am and that was the last time he was seen alive. They found him unresponsive in the same bed with a blanket near the infant's face, nose, or mouth. The child was sharing a bed with both of his parents at the time. The parents slept with the infant and woke to the infant unresponsive. Time of death at ██████████ was 6:13am. The death was listed as accidental.

4. Interviews conducted: ██████████ parents, ██████████. The collaterals, ██████████ (brother to ██████████ (support to the family), ██████████ (brother to ██████████ (friend to ██████████ (cousin), ██████████ (sister to ██████████ (maternal grandparents)

5. Details of interviews: ██████████, (2) daughter of ██████████ with her grandmother, ██████████ and also observed ██████████ (2) who was being held by his aunt ██████████. Both children are too young to contribute to this investigation. Both children appeared healthy and well-cared for by other family members. Neither child was at the home of ██████████ and ██████████ the night they were doing drugs and partying. Neither child will be part of this investigation.

Interview with ██████████ DOB ██████████, SS# ██████████ DOB: ██████████ maternal grandparents, private, hospital visitation room: They were contacted at around 5:15am by ██████████ the parent's found the baby unresponsive in their bed. They instructed them to call 911 and then the grandparents came to the hospital to be with their daughter, ██████████. They have had her son, ██████████ DOB: ██████████ since he was about 4 months old because ██████████ was only 18 and went through severe post-partum depression. They don't have legal custody but have started talking about getting custody now that ██████████ has died. They were unaware of any drug usage and didn't really have any concerns regarding the way ██████████ parented except that they would run hot and cold with parenting. They would want to spend time with ██████████ and then not call for a couple weeks. ██████████ calls ██████████ mom, not ██████████. They are going to file for custody after the funeral for ██████████ now that they were told by ██████████ that they failed their drug tests today. The grandparents watched the baby, ██████████ from Friday to Sunday, when ██████████ brought the baby back to the parent's at their apartment. They now feel that they should have just kept the baby and he would still be alive. They had hoped that ██████████ would mature with this baby and be able to be a good mother to him but they are very disappointed in her and ██████████. She had been in trouble before with drugs and was arrested but they thought that she had given that all up. They intend to seek permanent legal custody of ██████████ as soon as possible. Their address is ██████████

Interview with ██████████, brother to ██████████ lives at home with his parents and attends ██████████. His DOB: ██████████. His girlfriend, ██████████ was also present. ██████████ spoke with both ██████████ both of which had extensive contact with ██████████, and they had no concerns regarding the way that they parented any of their children. They knew how much they loved ██████████ and how excited they were when he was born. They both cherished him and loved him very much.

The family identified ██████████ as a support. She was also present at this time. Her address is ██████████. ██████████ spoke with her regarding the family. She states that ██████████ are great parents and she has never had any concerns regarding the way that they have parented any of their children. She states that ██████████ was very happy to find out he was going to have another child, especially when he found out it was going to be a boy, he was very proud. ██████████ was there when the baby was born and even cut the cord. He is a great father. She states that ██████████ father, ██████████ lives in ██████████. He hasn't been very involved with his son, ██████████. The last time she saw the family was last week, before Thanksgiving because she has been sick and she didn't want to get the baby sick at Thanksgiving. She likes to kiss on him and didn't want to give him her sickness. She states that she is a brittle diabetic and needs to rest because this has all been too much for her to handle. She can't believe the baby is gone and started to cry. She was very angry and yelled at ██████████ when the parents were asked to take drug screens.

Interview with ██████████ brother to ██████████ private: He states that he loves his brother and



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

has never been concerned about the way he parents his kids. He just saw the family at Thanksgiving and felt that they were being great parents and had no concerns. His address is [REDACTED] They are a very close family and [REDACTED] would ask if they needed anything.

Interview with [REDACTED], friend to [REDACTED] her address is [REDACTED] [REDACTED] She has been friends with [REDACTED] since they both attended [REDACTED] at [REDACTED] so like 5 or 6 years they have been friends. She hasn't seen the family since [REDACTED] was born but she never had any concerns regarding the way that [REDACTED] [REDACTED] has parented their other children. She is not aware of any drug usage.

Interview with cousin, [REDACTED]: Her address is [REDACTED] [REDACTED] and also present was her boyfriend, [REDACTED] They both have spent alot of time with and are very close to [REDACTED] [REDACTED] They voiced no concerns with the way that they were raising their son, [REDACTED] They both knew that they each had other children that they were raising but they were both very young when they were born. They stated that they loved [REDACTED] very much and wanted the best for him. They would not have done anything to hurt him. They are all very devastated by the loss today and can't believe he is gone.

Interview with [REDACTED] sister to [REDACTED] private: She has been taking care of [REDACTED] so the family could be here at the hospital with [REDACTED] Her DOB: [REDACTED] and her SS# [REDACTED] she has two children, [REDACTED] DOB: [REDACTED] DOB: [REDACTED] She and her children live with her parents, [REDACTED] [REDACTED] She just recently split with her husband and was welcomed back home by her parents. Her parents are raising [REDACTED] oldest son, [REDACTED] because [REDACTED] wasn't ready to be a mother but they had always hoped that she would do some growing up and take him back. She had no concerns with any drug usage with the parents and felt that they were just young.

Phone Call with [REDACTED] on 5/18/2015: [REDACTED] spoke with [REDACTED] in regards to the case. IC asked if the parents appeared impaired during the interviews. He reported that the parents didn't seem impaired to him and they were talking to him fine. He reported that there is no way to say that the drugs impaired them. He felt that their admissions were pretty strong. The parents admitted and they found some drugs. They found some marijuana in the parent's room where the baby was sleeping. He reported that the parents told him that they smoked with some friends outside the home. He stated that he would speak with the DA again about this case.

Phone Call with [REDACTED] on 5/18/2015: [REDACTED] spoke with [REDACTED] (maternal grandfather) on this date. IC inquired about custody of [REDACTED] He reported that they haven't went to court yet due to having to pay the court fee. He reported that he has a Power of Attorney over the child at this time. He reported that the mother hasn't taken the child from the home but he has allowed her to visit [REDACTED] at his house. He stated that at this point [REDACTED] is his child and he will be going to court soon to get custody of him.

6. Policy- Work Aid 1-CPS Categories and Definitions of Abuse/Neglect- Child Death- 1. Any unexplained death of a child when the cause of death is unknown or pending an autopsy report or 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.

7. Child Protective Investigation Team, CPIT- [REDACTED] [REDACTED] presented on 4/9/2015. The team was in agreement that the case should be closed as AUPU, Allegation Unsubstantiated, Perpetrator Unsubstantiated. [REDACTED] [REDACTED] and the Attorney General were in agreement as well.

8. [REDACTED] received the autopsy report on 3/20/2015 from [REDACTED] [REDACTED] [REDACTED] The cause of death is probable suffocation. The contributory cause of death is co-sleeping with adults. The manner of death is accident. Circumstances of death potentially hazardous sleeping arrangement.

9. Closing and classification [REDACTED] [REDACTED] is classifying the case as Allegation Unsubstantiated and Perpetrator Unsubstantiated for neglect death; Allegation Substantiated and Perpetrator Substantiated for drug exposed infant. The alleged perpetrators are mother, [REDACTED] [REDACTED] father [REDACTED]



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

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Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

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Policy- Work Aid 1-CPS Categories and Definitions of Abuse/Neglect- Child Death- 1. Any unexplained death of a child when the cause of death is unknown or pending an autopsy report or 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. In this case, the cause of death is probable suffocation.

DCS policy defines Drug Exposed Infant (age 0 to 1 year old) and Drug Exposed Child (over the age of 1 year) as an infant/child who has been exposed to a drug or chemical substance as verified by a positive drug screen or has been exposed to a drug or chemical substance that could adversely affect his/her physical, mental or emotional functioning. This includes drugs or chemical substances administered or given to children, children exposed to or living within close physical proximity to where drugs or chemical substances are manufactured or care takers use of drugs or chemical substances that impairs the ability to meet child care responsibilities.

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



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	05/28/2015	Contact Method:	Correspondence
Contact Time:	12:09 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	05/27/2015
Completed date:	05/28/2015	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Notification of Classification		
Contact Sub Type:	Letter A - Notice of Indication to Perpetrator		

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

Narrative Type: Original      Entry Date/Time: 05/27/2015 09:20 PM      Entered By: [REDACTED]

Due Process Letter  
emailed  
[REDACTED]

[REDACTED] emailed the Substantiated Perpetrator Letter A and attachment was completed and due process is initiated.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID:	[REDACTED]	Status:	Created In Error
Contact Date:	05/27/2015	Contact Method:	
Contact Time:	08:15 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	05/27/2015
Completed date:	05/27/2015	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: 05/27/2015 08:19 PM      Entered By: [REDACTED]

Classification

[REDACTED] is classifying the case as Allegation Unsubstantiated and Perpetrator Allegation Substantiated and Perpetrator Substantiated for drug exposed infant. The alleged perpetrators are mother, [REDACTED] father, [REDACTED]

Policy- Work Aid 1-CPS Categories and Definitions of Abuse/Neglect- Child Death- 1. Any unexplained death of a child when the cause of death is unknown or pending an autopsy report or 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.

DCS policy defines Drug Exposed Infant (age 0 to 1 year old) and Drug Exposed Child (over the age of 1 year) as an infant/child who has been exposed to a drug or chemical substance as verified by a positive drug screen or has been exposed to a drug or chemical substance that could adversely affect his/her physical, mental or emotional functioning. This includes drugs or chemical substances administered or given to children, children exposed to or living within close physical proximity to where drugs or chemical substances are manufactured or care takers use of drugs or chemical substances that impairs the ability to meet child care responsibilities.

Narrative Type: Created In Error      Entry Date/Time: 05/28/2015 12:25 PM      Entered By: [REDACTED]

All the classification wasn't entered incorrectly.



**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: 05/27/2015

Contact Method:

Contact Time: 08:15 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 05/28/2015

Completed date: 05/28/2015

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: 05/28/2015 12:24 PM      Entered By: [REDACTED]

Classification

[REDACTED] is classifying the case as Allegation Unsubstantiated and Perpetrator Unsubstantiated for neglect death; Allegation Substantiated and Perpetrator Substantiated for drug exposed infant. The alleged perpetrators are mother, [REDACTED] father, [REDACTED]

Policy- Work Aid 1-CPS Categories and Definitions of Abuse/Neglect- Child Death- 1. Any unexplained death of a child when the cause of death is unknown or pending an autopsy report or 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.

DCS policy defines Drug Exposed Infant (age 0 to 1 year old) and Drug Exposed Child (over the age of 1 year) as an infant/child who has been exposed to a drug or chemical substance as verified by a positive drug screen or has been exposed to a drug or chemical substance that could adversely affect his/her physical, mental or emotional functioning. This includes drugs or chemical substances administered or given to children, children exposed to or living within close physical proximity to where drugs or chemical substances are manufactured or care takers use of drugs or chemical substances that impairs the ability to meet child care responsibilities.



**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: 05/18/2015

Contact Method: Phone Call

Contact Time: 04:30 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 05/18/2015

Completed date: 05/18/2015

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: 05/18/2015 04:49 PM      Entered By: [REDACTED]

Phone Call

[REDACTED] spoke with [REDACTED] (maternal grandfather) on this date. IC inquired about custody of [REDACTED]. He reported that they haven't went to court yet due to having to pay the court fee. He reported that he has a Power of Attorney over the child at this time. He reported that the mother hasn't taken the child from the home but he has allowed her to visit [REDACTED] at his house. He stated that at this point [REDACTED] is his child and he will be going to court soon to get custody of him.



**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: 05/18/2015

Contact Method: Phone Call

Contact Time: 02:30 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 05/18/2015

Completed date: 05/18/2015

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: 05/18/2015 03:04 PM      Entered By: [REDACTED]

Phone Call

[REDACTED] spoke with [REDACTED] in regards to the case. IC asked if the parents appeared impaired during the interviews. He reported that the parents didn't seem impaired to him and they were talking to him fine. He reported that there is no way to say that the drugs impaired them. He felt that their admissions were pretty strong. The parents admitted and they found some drugs. They found some marijuana in the parent's room where the baby was sleeping. He reported that the parents told him that they smoked with some friends outside the home. He stated that he would speak with the DA again about this case.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 05/18/2015

Contact Method:

Contact Time: 01:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED].

Recorded For:

Location:

Created Date: 05/18/2015

Completed date: 05/18/2015

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: 05/18/2015 03:48 PM      Entered By: [REDACTED]

Attempt Phone Call

[REDACTED] [REDACTED] contacted [REDACTED] [REDACTED] on this date and received no answer. IC left a message on both of there cellphones.



**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: 04/21/2015

Contact Method:

Contact Time: 10:15 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/21/2015

Completed date: 04/21/2015

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: 04/21/2015 10:19 AM Entered By: [REDACTED]

**CASE SUMMARY:**

1. Referral assigned to Child Protective Services [REDACTED] alleging Neglect Death. The Alleged Child Victim (ACV) was [REDACTED], and the Alleged Perpetrators (AP) are [REDACTED]. This family had no history with the Department of Children's Services (DCS). The only history was of [REDACTED] as a juvenile.

2. Synopsis of Event: CPSI was unable to interview the victim because he is deceased. [REDACTED] reported last night, she fed [REDACTED] at about 9 or 9:30 and put him in his swing and he fell asleep. At 10pm, both parents took a shower and then they had some friends over and [REDACTED] was playing cards and she was watching tv. [REDACTED] woke up and [REDACTED] held him on his lap while he slept then about 1am they all went to bed. [REDACTED] is spoiled and he doesn't like sleeping in his crib so she puts him in their big bed. [REDACTED] sleeps on the left, she in the middle and then they made an area for the baby with blankets so the baby couldn't roll off with other blankets. They had a wedge pillow that they used to keep the baby from rolling on his side but that was in the wash so [REDACTED] just rolled up a blanket and put it behind his back and she thought that would keep the baby from rolling but it didn't work. At 5:12 [REDACTED] woke up for work and she got up to pee and that was when she checked on the baby. She noticed right away that he was very pale and his lips were blue. She said she knew that he was already dead right then. She yelled for [REDACTED] come and he checked the baby and didn't know what to do so he called her father, [REDACTED] who told them to call 911 and he did. She doesn't remember much after that except the police and EMT's working on [REDACTED] and taking him to the hospital next. They arrived shortly after that and at about 6:15 they told them that [REDACTED] was gone. She states that she has been hysterical since. Crying and crying. She can't believe that [REDACTED] is gone and that she won't have him to love and hold and watch him grow up.

[REDACTED] states that he had the baby asleep on his lap around 10 pm while he was playing cards with friends. He states that the family went to bed around 1 am and at that time, [REDACTED] put the baby to sleep in their big bed like they always do. The baby is spoiled and cries if they try to put him in his own bed so they put him in their bed. They are careful and check on him frequently. He got up at 5:12 am this morning and the next thing he knew, [REDACTED] was screaming for him to come quick because the baby was blue. He called her father [REDACTED], because he didn't know what to do. [REDACTED] told him to call 911 immediately so he did. The police and EMS came around 5:25 and took the baby to the hospital. He said he can't talk about this situation and just wants to get [REDACTED] home where she can rest because she is blaming herself for the baby's death because she put the blankets around him.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

3. Investigator involved on the case was [REDACTED]. The [REDACTED] investigated the death led by [REDACTED]. [REDACTED] received a copy of the Sudden Unexplained Infant Death Investigation form completed by [REDACTED]. It states that the parents put the infant down for the night at about 1am and that was the last time he was seen alive. They found him unresponsive in the same bed with a blanket near the infant's face, nose, or mouth. The child was sharing a bed with both of his parents at the time. The parents slept with the infant and woke to the infant unresponsive. Time of death at [REDACTED] was 6:13am. The death was listed as accidental.

4. Interviews conducted: [REDACTED] parents, [REDACTED]. The collaterals, [REDACTED] (brother to [REDACTED] (support to the family), [REDACTED] (brother to [REDACTED] (friend to [REDACTED] (cousin), [REDACTED] (sister to [REDACTED] & [REDACTED] (maternal grandparents)

5. Details of interviews: [REDACTED] observed [REDACTED] (2) daughter of [REDACTED] with her grandmother, [REDACTED] and also observed [REDACTED] (2) who was being held by his aunt [REDACTED]. Both children are too young to contribute to this investigation. Both children appeared healthy and well-cared for by other family members. Neither child was at the home of [REDACTED] and [REDACTED] the night they were doing drugs and partying. Neither child will be part of this investigation.

Interview with [REDACTED] DOB [REDACTED], SS# [REDACTED] and [REDACTED] DOB: [REDACTED] SS# [REDACTED] maternal grandparents, private, hospital visitation room: They were contacted at around 5:15am by [REDACTED] when the parent's found the baby unresponsive in their bed. They instructed them to call 911 and then the grandparents came to the hospital to be with their daughter, [REDACTED]. They have had her son, [REDACTED] DOB: [REDACTED] since he was about 4 months old because [REDACTED] was only 18 and went through severe post-partum depression. They don't have legal custody but have started talking about getting custody now that [REDACTED] has died. They were unaware of any drug usage and didn't really have any concerns regarding the way [REDACTED] parented except that they would run hot and cold with parenting. They would want to spend time with [REDACTED] and then not call for a couple weeks. [REDACTED] calls [REDACTED] mom, not [REDACTED]. They are going to file for custody after the funeral for [REDACTED] now that they were told by [REDACTED] that they failed their drug tests today. The grandparents watched the baby, [REDACTED] from Friday to Sunday, when [REDACTED] brought the baby back to the parent's at their apartment. They now feel that they should have just kept the baby and he would still be alive. They had hoped that [REDACTED] would mature with this baby and be able to be a good mother to him but they are very disappointed in her and [REDACTED]. She had been in trouble before with drugs and was arrested but they thought that she had given that all up. They intend to seek permanent legal custody of [REDACTED] as soon as possible. Their address is [REDACTED].

Interview with [REDACTED], brother to [REDACTED] lives at home with his parents and attends [REDACTED]. His DOB: [REDACTED]. His girlfriend, [REDACTED] was also present. [REDACTED] spoke with both [REDACTED] both of which had extensive contact with [REDACTED] and they had no concerns regarding the way that they parented any of their children. They knew how much they loved [REDACTED] and how excited they were when he was born. They both cherished him and loved him very much.

The family identified [REDACTED] as a support. She was also present at this time. Her address is [REDACTED], [REDACTED] spoke with her regarding the family. She states that [REDACTED] are great parents and she has never had any concerns regarding the way that they have parented any of their children. She states that [REDACTED] was very happy to find out he was going to have another child, especially when he found out it was going to be a boy, he was very proud. [REDACTED] was there when the baby was born and even cut the cord. He is a great father. She states that [REDACTED] father, [REDACTED] lives in [REDACTED]. He hasn't been very involved with his son, [REDACTED]. The last time she saw the family was last week, before Thanksgiving because she has been sick and she didn't want to get the baby sick at Thanksgiving. She likes to kiss on him and didn't want to give him her sickness. She states that she is a brittle diabetic and needs to rest because this has all been too much for her to handle. She can't believe the baby is gone and started to cry. She was very angry and yelled at [REDACTED] when the parents were asked to take drug screens.

Interview with [REDACTED] brother to [REDACTED] private: He states that he loves his brother and



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

has never been concerned about the way he parents his kids. He just saw the family at Thanksgiving and felt that they were being great parents and had no concerns. His address is [REDACTED] They are a very close family and [REDACTED] would ask if they needed anything.

Interview with [REDACTED], friend to [REDACTED] her address is [REDACTED] She has been friends with [REDACTED] since they both attended [REDACTED] at [REDACTED] so like 5 or 6 years they have been friends. She hasn't seen the family since [REDACTED] was born but she never had any concerns regarding the way that [REDACTED] [REDACTED] has parented their other children. She is not aware of any drug usage.

Interview with cousin, [REDACTED]: Her address is [REDACTED] and also present was her boyfriend, [REDACTED] They both have spent alot of time with and are very close to [REDACTED] [REDACTED] They voiced no concerns with the way that they were raising their son, [REDACTED] They both knew that they each had other children that they were raising but they were both very young when they were born. They stated that they loved [REDACTED] very much and wanted the best for him. They would not have done anything to hurt him. They are all very devastated by the loss today and can't believe he is gone.

Interview with [REDACTED] sister to [REDACTED] private: She has been taking care of [REDACTED] so the family could be here at the hospital with [REDACTED] Her DOB: [REDACTED] her SS# [REDACTED] she has two children, [REDACTED] DOB: [REDACTED] [REDACTED] DOB: [REDACTED]. She and her children live with her parents, [REDACTED] [REDACTED] She just recently split with her husband and was welcomed back home by her parents. Her parents are raising [REDACTED] oldest son, [REDACTED] because [REDACTED] wasn't ready to be a mother but they had always hoped that she would do some growing up and take him back. She had no concerns with any drug usage with the parents and felt that they were just young.

6. Policy- Work Aid 1-CPS Categories and Definitions of Abuse/Neglect- Child Death- 1. Any unexplained death of a child when the cause of death is unknown or pending an autopsy report or 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.

7. Child Protective Investigation Team, CPIT-[REDACTED] [REDACTED] presented on 4/9/2015. The team was in agreement that the case should be closed as AUPU, Allegation Unsubstantiated, Perpetrator Unsubstantiated. [REDACTED] [REDACTED] and the Attorney General were in agreement as well.

8. [REDACTED] received the autopsy report on 3/20/2015 from [REDACTED] [REDACTED] [REDACTED] The cause of death is probable suffocation. The contributory cause of death is co-sleeping with adults. The manner of death is accident. Circumstances of death potentially hazardous sleeping arrangement.

9. Closing and classification -The case will be closed and classified as AUPU for the allegation of Child Neglect Death. In this case, the cause of death is probable suffocation.



**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: 04/10/2015

Contact Method:

Contact Time: 05:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/17/2015

Completed date: 04/17/2015

Completed By: [REDACTED]

Purpose(s): Well Being

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 04/17/2015 05:03 PM      Entered By: [REDACTED].

Medical Records

[REDACTED] received the medical records from the pediatrician from [REDACTED] [REDACTED] on this date. The medical records are enclosed inside of the case file.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/09/2015

Contact Method: Face To Face

Contact Time: 02:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 04/10/2015

Completed date: 04/10/2015

Completed By: [REDACTED]

Purpose(s): Service Planning

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

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 04/10/2015 03:24 PM      Entered By: [REDACTED]

CPIT

[REDACTED] presented the case on this date to CPIT. The CPIT Team agreed to close the case as AUPU due to the incident being an accident. A copy of the CPIT form has been placed into the file.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 04/02/2015

Contact Method:

Contact Time: 11:49 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/02/2015

Completed date: 04/02/2015

Completed By: [REDACTED]

Purpose(s): Well Being

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 04/02/2015 11:51 AM      Entered By: [REDACTED]

[REDACTED] requested the medical records on this date from the child's pediatrician.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 03/24/2015

Contact Method:

Contact Time: 06:32 PM

Contact Duration: Less than 15

Entered By: [REDACTED].

Recorded For:

Location:

Created Date: 03/26/2015

Completed date: 03/26/2015

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 03/26/2015 06:33 PM      Entered By: [REDACTED]

Case Status

[REDACTED] contacted [REDACTED] on this date to inform him about the autopsy. He informed this LI that he hadn't received a copy and requested a copy to be faxed. [REDACTED] discussed the autopsy with him and he stated that he was still going to discuss the case with the DA.

Next Steps: present to CPIT, follow up with detective



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 03/20/2015

Contact Method:

Contact Time: 06:50 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 03/20/2015

Completed date: 03/20/2015

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: 03/20/2015 06:57 PM      Entered By: [REDACTED]

Autopsy Report

[REDACTED] received the autopsy report on this date from [REDACTED] [REDACTED] [REDACTED]. The cause of death is probable suffocation. The contributory cause of death is co-sleeping with adults. The manner of death is accident. Circumstances of death potentially hazardous sleeping arrangement. A copy of the autopsy has been placed in the file.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/23/2015

Contact Method:

Contact Time: 09:55 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/23/2015

Completed date: 02/23/2015

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 02/23/2015 09:59 AM      Entered By: [REDACTED]

Case Conference

[REDACTED] conducted a case conference on this date with [REDACTED] [REDACTED]. Investigator is still awaiting the autopsy. The assigned detective is going to re-interview the parents and possibly present the case to grand jury.

Next Steps: follow up with detective, present to CPIT



**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: 02/19/2015

Contact Method: Phone Call

Contact Time: 02:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/20/2015

Completed date: 02/20/2015

Completed By: [REDACTED]

Purpose(s): Well Being

Contact Type(s): Alleged Perpetrator Interview

Contact Sub Type:

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

[REDACTED]

**Narrative Details**

Narrative Type: Original Entry Date/Time: 02/20/2015 09:25 AM Entered By: [REDACTED]

[REDACTED] called the [REDACTED] mother, to verify her son, [REDACTED] birthdate as [REDACTED]. [REDACTED] requested that she and her husband [REDACTED], come in for a drug screen today. She states that [REDACTED] has not started counseling yet as recommended by [REDACTED]. She states that they continue to be homeless and are staying with friends. Her son, [REDACTED] remains with her mother, [REDACTED]. She has not had contact with them for a month or so.

[REDACTED] left a voice message for [REDACTED] regarding the investigation.

Next Step: Drug screen AP.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/10/2015

Contact Method: Phone Call

Contact Time: 03:42 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/10/2015

Completed date: 02/10/2015

Completed By: [REDACTED]

Purpose(s): Well Being

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 02/10/2015 03:43 PM      Entered By: [REDACTED]

[REDACTED] [REDACTED] called the Medical Examiner's Office in [REDACTED] [REDACTED] to check on the status of the autopsy. It is still incomplete.

Next Step: Follow up with the family



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED] Status: Completed  
 Contact Date: 02/10/2015 Contact Method: Attempted Phone Call  
 Contact Time: 03:27 PM Contact Duration: Less than 05  
 Entered By: [REDACTED] Recorded For:  
 Location: Created Date: 02/10/2015  
 Completed date: 02/10/2015 Completed By: [REDACTED]  
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being  
 Contact Type(s): Parent/Caretaker Interview  
 Contact Sub Type:

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

[REDACTED]

**Narrative Details**

Narrative Type: Original Entry Date/Time: 02/10/2015 03:31 PM Entered By: [REDACTED]

[REDACTED] contacted the maternal grandmother, [REDACTED] to see if she had gotten legal custody of [REDACTED] or if they had done the power of attorney yet, because they never came back to the office to have the form completed here.

Next Step: Follow up with family



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	02/06/2015	Contact Method:	Face To Face
Contact Time:	01:00 PM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	02/06/2015
Completed date:	02/06/2015	Completed By:	[REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Alleged Perpetrator Interview		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 02/06/2015 02:18 PM Entered By: [REDACTED]

[REDACTED] made a face to face to follow up with the family. Present were [REDACTED] [REDACTED] [REDACTED] [REDACTED] had called them this morning and asked them to come in for drug screens. [REDACTED] stated that they got married in December but didn't really tell anyone that they did because everyone is still very upset about [REDACTED] sudden death. She has not changed her name yet. They are still staying with different friends so are basically homeless.

[REDACTED] submitted to a random drug screen and was positive for Benzodiazepines. She states that she has a prescription from the [REDACTED] for Ambien and Fluoxetine (Effexa ?). She has been attending counseling services there as well.

[REDACTED] submitted to a random drug screen and was positive for marijuana and Benzodiazepines. He does not have a valid prescription. [REDACTED] again suggested that he needs to be in counseling and he said he realizes that now. He has been trying to deal with the loss of their son without getting the help that was suggested. [REDACTED] provided a list of counselors in the area and also provided a list of grief support groups in the area. [REDACTED] also asked that he get a drug and alcohol assessment with [REDACTED] and provided the contact number.

Both parents expressed that they have been trying to reach the Detective assigned to their case. [REDACTED] provided his name, [REDACTED] and his phone [REDACTED] [REDACTED] also encouraged them to call and talk at least to CPSI instead of self medicating.

Next Step: Follow up with family



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED] Status: Completed  
 Contact Date: 02/05/2015 Contact Method: Phone Call  
 Contact Time: 11:00 AM Contact Duration: Less than 05  
 Entered By: [REDACTED] Recorded For:  
 Location: Created Date: 02/05/2015  
 Completed date: 02/05/2015 Completed By: [REDACTED]  
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being  
 Contact Type(s): Alleged Perpetrator Interview,Collateral Contact  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/05/2015 11:50 AM Entered By: [REDACTED]

[REDACTED] called the [REDACTED] and left a voice mail. [REDACTED] called the father, [REDACTED], and he states that he is working outside of the [REDACTED]. He states that he and [REDACTED] got married on December 23rd and they forgot to tell CPSI on the last visit. He will try to get with [REDACTED] and come up to the office today for a drug screen. He states that they are still basically homeless.

Next Step: Follow up with family

Narrative Type: Addendum 2 Entry Date/Time: 02/05/2015 12:17 PM Entered By: [REDACTED]

[REDACTED] also called the other detective that was on the scene, [REDACTED] requesting that he write out a statement regarding this case and also provide the names of all the first responders to the scene. The police and the EMS. He stated that he can provide that ASAP.

Narrative Type: Addendum 1 Entry Date/Time: 02/05/2015 12:15 PM Entered By: [REDACTED]

[REDACTED] also left a voice mail for the grandmother, [REDACTED] who has custody of [REDACTED] other daughter, [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: 02/04/2015 Contact Method: Face To Face  
 Contact Time: 02:00 PM Contact Duration: Less than 05  
 Entered By: [REDACTED] Recorded For:  
 Location: DCS Office Created Date: 02/04/2015  
 Completed date: 02/04/2015 Completed By: [REDACTED]  
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being  
 Contact Type(s): CPIT (Child Protective Investigative Team)  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/04/2015 05:23 PM Entered By: [REDACTED]

[REDACTED] received copies of the photos taken by the responding police officers from 12/04/2014 of the victims home and belongings. Also received copies of the police reports, parents interviews and interviews from first responders. Per [REDACTED], the parents both admitted to smoking marijuana laced with either cocaine, methamphetamines and/or both. They did not disclose where the narcotics came from but only stated that a female friend supplied them with the narcotics. A search of the apartment revealed two separate containers (pill bottle, tupperware) with small amounts of marijuana inside, a cigarillo package and a grinder. [REDACTED] is meeting with both parents next week for another formal interview. Also a statement from [REDACTED] stating that she witnessed the above search and seizure of items.

Statement from the first responder, [REDACTED]

He entered the home and found the infant unresponsive and started CPR until paramedics arrived. He noticed a strong aroma of marijuana in the home. The home was cluttered with clothes strewn all over the bedroom and babies' room and crib. The ACV had been found unresponsive in the parents bed with a blanket covering its mouth and nose like the infant had rolled over and was unable to roll back off of its face according to the parents.

Next Step: follow up with parents



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 01/20/2015

Contact Method: Phone Call

Contact Time: 09:45 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 01/20/2015

Completed date: 01/20/2015

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: 01/20/2015 09:47 AM Entered By: [REDACTED]

[REDACTED] called the Medical Examiner's office, [REDACTED] the autopsy is still incomplete.

[REDACTED] called [REDACTED] he has not completed his report or met with the parents again yet.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 01/15/2015

Contact Method: Phone Call

Contact Time: 09:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 01/17/2015

Completed date: 01/17/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

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

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 01/17/2015 08:05 PM      Entered By: [REDACTED]

[REDACTED] called the medical examiner, the autopsy is not completed yet.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 01/13/2015

Contact Method:

Contact Time: 09:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/21/2015

Completed date: 02/21/2015

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 02/21/2015 01:16 PM      Entered By: [REDACTED]

Case Conference

[REDACTED] conducted a case conference on this date with [REDACTED] [REDACTED] [REDACTED] [REDACTED] is still waiting on autopsy.



## Tennessee Department of Children's Services

## Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED] Status: Completed  
 Contact Date: 01/08/2015 Contact Method: Face To Face  
 Contact Time: 12:00 PM Contact Duration: Less than 30  
 Entered By: [REDACTED] Recorded For:  
 Location: DCS Office Created Date: 01/08/2015  
 Completed date: 01/08/2015 Completed By: [REDACTED]  
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being  
 Contact Type(s): Alleged Perpetrator Interview,Parent/Caretaker Interview  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 01/08/2015 11:51 AM Entered By: [REDACTED]

[REDACTED] made a face to face to follow up with the family. Present were [REDACTED] AP/father, [REDACTED] AP/Mother, and [REDACTED]

[REDACTED] submitted to a random drug screen and was negative for all substances [REDACTED] submitted to a random drug screen and was positive for marijuana and faded for Benzodiazepines. [REDACTED] provided another resource list due to the fact that the parents have not completed any of the tasks of the permanency plan: parenting class, drug and alcohol assessment and follow recommendations. They also expressed the fact that they could use counseling to deal with the loss of their infant son, [REDACTED] provided information regarding a grief/loss counselors and a support group in the area for parents that have lost a child. They also did a Power of Attorney form for [REDACTED] giving the grandparents the right to seek medical attention and educational decisions. [REDACTED] also stated that they are giving [REDACTED] parents legal custody until they are sure that no charges are going to be filed against them for the death of their son. They were going to the juvenile court after they leave here.

Next step: follow up with family.

Narrative Type: Addendum 1 Entry Date/Time: 01/17/2015 07:59 PM Entered By: [REDACTED]

[REDACTED] questioned each parent regarding their normal sleeping patterns with their infant son, prior to his passing. Both parents state that the infant, [REDACTED] slept in the large bed that they shared every night. They stated that he would not sleep in his own bed and had become spoiled so that they had to put him in the bed with them. [REDACTED] on the left, then [REDACTED] then the baby on the right edge. They had fashioned pillows so that he couldn't roll off and usually had a wedge pillow that he slept with to keep him on his side, but on the morning that he died, they had put it in the wash and had a rolled up blanket to try to keep him on his side. [REDACTED] stated that obviously, that didn't work because she found him not breathing on his stomach the morning 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: 01/08/2015

Contact Method: Phone Call

Contact Time: 09:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 01/17/2015

Completed date: 01/17/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

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

Contact Sub Type:

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

[REDACTED]

**Narrative Details**

Narrative Type: Original      Entry Date/Time: 01/17/2015 08:03 PM      Entered By: [REDACTED]

[REDACTED] called [REDACTED] [REDACTED] [REDACTED] [REDACTED] He does not have the report ready for examination but will try to get it out to [REDACTED] [REDACTED] as soon as possible.

Next Step: Follow up with family



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 01/07/2015

Contact Method: Face To Face

Contact Time: 02:00 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 01/07/2015

Completed date: 01/07/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

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

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 01/07/2015 04:11 PM      Entered By: [REDACTED]

[REDACTED] spoke with [REDACTED] of the [REDACTED] prior to CPIT. He states that he is meeting with both parents next week to try to get them to discuss the case more in detail. He feels that he will be able to get both parents charged due to the drug usage. He will update CPSI next week.

Next Step: Follow up with family.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED] Status: Completed  
 Contact Date: 01/07/2015 Contact Method: Attempted Face To Face  
 Contact Time: 12:00 PM Contact Duration: Less than 05  
 Entered By: [REDACTED] Recorded For:  
 Location: Family Home Created Date: 01/07/2015  
 Completed date: 01/07/2015 Completed By: [REDACTED]  
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being  
 Contact Type(s): Alleged Perpetrator Interview,Parent/Caretaker Interview  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 01/07/2015 04:08 PM Entered By: [REDACTED]

[REDACTED] went to the family home at [REDACTED] and no one lives in the apartment any longer. [REDACTED] called the AP, [REDACTED] and she stated that she just couldn't go back and live in that apartment after [REDACTED] died. She and [REDACTED] are still together, but they are basically homeless and moving around to different homes. She refused to give a home address. [REDACTED] requested that she and [REDACTED] present themselves at the DCS office to be drug screened.

Next Step: Follow up with [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: 01/05/2015

Contact Method: Phone Call

Contact Time: 10:20 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 01/05/2015

Completed date: 01/05/2015

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact, Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 01/05/2015 10:23 AM      Entered By: [REDACTED]

[REDACTED] returned a phone call from the paternal grandfather, [REDACTED]. He was requesting more information regarding obtaining a Power of Attorney for [REDACTED] other child, for which they have had physical custody of for years. They are also interested in filing with the [REDACTED] Juvenile Court for legal guardianship as well. He will call when they are able to come into the office with [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: 01/05/2015

Contact Method: Phone Call

Contact Time: 10:11 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 01/05/2015

Completed date: 01/05/2015

Completed By: [REDACTED]

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

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

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 01/05/2015 10:13 AM      Entered By: [REDACTED]

[REDACTED] called the detective assigned to this case, [REDACTED] he has not had a chance to get copies of all the reports to [REDACTED] as of today, but he states that he will work on it soon.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 01/05/2015

Contact Method: Phone Call

Contact Time: 10:05 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 01/05/2015

Completed date: 01/05/2015

Completed By: [REDACTED]

Purpose(s): Well Being

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 01/05/2015 10:06 AM      Entered By: [REDACTED]

[REDACTED] contacted the Medical Examiner [REDACTED] the autopsy results are 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: 12/11/2014

Contact Method:

Contact Time: 09:44 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 12/11/2014

Completed date: 12/11/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/11/2014 09:54 AM Entered By: [REDACTED]

Case Conference

[REDACTED] conducted a case conference on this date with [REDACTED]. Investigator received this case on 12/2/2014 as a P1 Neglect Death. The victim is [REDACTED] (2 mos) and the alleged perps are [REDACTED] (father) [REDACTED] (mother). Investigator went to the hospital to meet response on the case. Investigator interviewed several family members as collateral at the hospital. Investigator interviewed both parents and they reported that they would test clean on a drug screen. The mother tested positive for coc, meth, thc, amp, & bar. The father tested positive for coc, meth, thc, amp, and benzo. Investigator reported that both parents eyes where blood shot red and seemed impair. The parents provided inconsistent stories for the death of the infant. A home visit was conducted and the home weeped the smell of marijuana. The parents each have a two year old that doesn't reside in the home. Investigator completed a perm plan with the family to outline services. The detective is going to interview the parents again. LI and Investigator contacted legal regarding the next steps of the case. LI contacted IC regarding the conversation with legal.

Next Steps: present to CPIT, follow up with family, copy of autopsy

Narrative Type: Addendum 1 Entry Date/Time: 05/19/2015 04:06 PM Entered By: [REDACTED]

[REDACTED] spoke with [REDACTED] in regards to the case. IC asked if the parents appeared impaired during the interviews. He reported that the parents didn't seem impaired to him and they were talking to him fine.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/09/2014

Contact Method: Attempted Phone Call

Contact Time: 02:58 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 12/09/2014

Completed date: 12/09/2014

Completed By: [REDACTED]

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

Contact Type(s): Alleged Perpetrator Interview,Notation

Contact Sub Type:

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

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

[REDACTED] contacted the family to do a follow-up visit. [REDACTED] left a voice mail requesting a call back regarding services.

A permanency plan was completed for the family.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/09/2014

Contact Method: Phone Call

Contact Time: 08:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 01/17/2015

Completed date: 01/17/2015

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

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

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 01/17/2015 08:02 PM Entered By: [REDACTED]

[REDACTED] called [REDACTED] for a copy of the police report and the report of the first responders comments. He doesn't have it ready yet. He will work on it and get it to [REDACTED] so that [REDACTED] can also contact the first responders for comments.

Next Step: Follow up with family, copy of autopsy and police reports.



**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:

Contact Time: 09:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 12/09/2014

Completed date: 12/09/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 12/09/2014 12:16 PM      Entered By: [REDACTED]

[REDACTED] completed the Initial Safety SDM Assessment. One or more immediate harm factors are present, and one or more protecting interventions #1-8 have been planned or taken. Based on protecting interventions, no protective custody action is necessary at this time. The ACV is deceased and the half sibling is living with the maternal grandparents. They are filing for custody.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/03/2014

Contact Method: Correspondence

Contact Time: 05:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 12/03/2014

Completed date: 12/03/2014

Completed By: [REDACTED]

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

Contact Type(s): Referent Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/03/2014 05:19 PM Entered [REDACTED]

Notification of the referral was mailed to the referent.

[REDACTED] called the referent. They had nothing to add to the existing information on the referral.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/03/2014

Contact Method: Phone Call

Contact Time: 12:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 12/03/2014

Completed date: 12/03/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

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

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/03/2014 03:41 PM Entered By: [REDACTED]

[REDACTED] called [REDACTED] regarding the victim's autopsy. It was not done yesterday but is planned for today. The autopsy is being performed by [REDACTED]

Narrative Type: Addendum 1 Entry Date/Time: 12/03/2014 05:17 PM Entered By: [REDACTED]

The police did add a request for the Medical Examiner to do a toxicology on the infant to see if there are any drugs in his system since both parents tested positive for multiple substances.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/03/2014

Contact Method:

Contact Time: 10:49 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 12/03/2014

Completed date: 12/03/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/03/2014 10:50 AM Entered By: [REDACTED]

**Background Check**

Child Protective Services Investigator [REDACTED] [REDACTED] received the records check from the [REDACTED] [REDACTED] and completed SSMS checks on all perpetrators. There was not SSMS history. The local background checks revealed the following:

[REDACTED] As a minor in 2009-Simple Possession, Tampering with evidence, and Possession of drug Paraphernalia, Evading Arrest, Driving on Suspended license and Theft over 1,000.00. The charges of Assault Kidnapping, Aggravated Robbery, Theft under 500.00, Driving on Suspended license and Possession of Paraphernalia were dropped. November 2011-VOP, 12/29/2011-Drugs, Unlawful drug para/use and Activity, drug mfg/del/sale/pos. Schedule VI. 6/24/2013-Domestic Assault, 10/28/2013-VOP

[REDACTED] Clear.

This CPSI completed checks on all perpetrators at the following websites:

TN Sex Offender - negative

National Sex Offender - negative

TN Felony Offender - negative

Out of State Probation Registry - negative

TN Meth Offender negative

Abuse Registry - negative



**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: 12:30 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 12/03/2014

Completed date: 12/03/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 12/03/2014 12:44 PM      Entered By: [REDACTED]

[REDACTED] completed the Notice of Child Death/Near Death Form #CS-0635 and forwarded it to [REDACTED]



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/02/2014

Contact Method: Correspondence

Contact Time: 12:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 12/03/2014

Completed date: 12/03/2014

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/03/2014 11:26 AM Entered By: [REDACTED]

[REDACTED] received a copy of the complete medical records from [REDACTED] stating that the baby, [REDACTED] was pronounced dead at 6:13am by [REDACTED] the death was listed as accidental. The complete records are in the permanent file.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/02/2014

Contact Method: Correspondence

Contact Time: 10:39 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 12/03/2014

Completed date: 12/03/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

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

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/03/2014 11:39 AM Entered By: [REDACTED]

[REDACTED] received a copy of the Sudden Unexplained Infant Death Investigation form completed by [REDACTED]. It states that the parents put the infant down for the night at about 1am and that was the last time he was seen alive. They found him unresponsive in the same bed with a blanket near the infant's face, nose, or mouth. The child was sharing a bed with both of his parents at the time. The parents slept with the infant and woke to the infant unresponsive. Time of death at [REDACTED] was 6:13am. The death was listed as accidental.



**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: Face To Face

Contact Time: 08:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 12/03/2014

Completed date: 12/03/2014

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview,Sibling Interview/Observation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/03/2014 05:23 PM Entered By: [REDACTED]

[REDACTED] observed [REDACTED], (2) daughter of [REDACTED] with her grandmother, [REDACTED] and also observed [REDACTED] (2) who was being held by his aunt [REDACTED]. Both children are too young to contribute to this investigation. Both children appeared healthy and well-cared for by other family members. Neither child was at the home of [REDACTED] [REDACTED] the night they were doing drugs and partying. Neither child will be part of this investigation.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED] Status: Completed  
 Contact Date: 12/02/2014 Contact Method: Face To Face  
 Contact Time: 07:49 AM Contact Duration: Less than 04 Hour  
 Entered By: [REDACTED] Recorded For:  
 Location: Hospital Created Date: 12/02/2014  
 Completed date: 12/03/2014 Completed By: [REDACTED]  
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being  
 Contact Type(s): Alleged Perpetrator Interview,Collateral Contact,Initial ACV Face To Face,Parent/Caretaker Interview,Sibling Interview/Observation  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/02/2014 03:31 PM Entered By: [REDACTED]

Child Protective Services [REDACTED] made a face to face to initiate the investigation, a [REDACTED] Present were the parents and AP [REDACTED] mother, [REDACTED], father, maternal grandparents, [REDACTED] cousin [REDACTED] friends, paternal grandmother, [REDACTED] siblings to the mother, [REDACTED]

[REDACTED] were also present at the hospital upon arrival. [REDACTED] stated that when they were at the family's apartment, he detected a strong odor of marijuana and would like the parents to both be drug tested. He stated that the father, [REDACTED] was acting very jittery and nervous when asked about the marijuana aroma. The father started pacing and wanting to leave the hospital. [REDACTED] was concerned at that time that the father would try to use someone else's urine for the drug screen [REDACTED] states that the infant's death looks as though it were accidental. The child was sleeping in the bed with the parents and rolled over into the blanket and suffocated. He stated that the parent's have been appropriate since and are genuinely mourning the loss of their infant son, [REDACTED]

In order to engage the family, CPSI explained the current report made to the Tennessee Department of Children's Services and the MRS/Assessment process. CPSI also provided the family with a brochure describing the Multiple Response Approach. CPSI explained all forms and engaged the family during the paperwork process. The custodian signed the Clients Rights Handbook Signature Page, Native American Heritage Veto Verification, Health Insurance Portability and Accountability Act (HIPAA) Acknowledgement form, Notice of Equal Access to Programs and Services, and the Release of Information. CPSI obtained signed acknowledgements of such and copies have been placed into the file.

The ACV [REDACTED] was observed at the hospital, but the child was deceased. Pictures were taken and are in the permanent file.

Interview with the mother, [REDACTED] AP, separate and private:



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

[REDACTED] states that she has a two year old son, [REDACTED] who does not live with her but lives with her parents, [REDACTED] in [REDACTED]. She states that she visits him but he hasn't lived with her since he was about 4 months old. She states that she was too young to take good care of [REDACTED] and her parents offered and he has stayed ever since. His father is [REDACTED] and he lives in [REDACTED] somewhere, but they have no contact. He doesn't pay support. Her son, [REDACTED] lives with her parents. They babysat for the baby all weekend and the baby just came back home Sunday night, to give them a break. She lives at [REDACTED] with her boyfriend, [REDACTED]. Last night, she fed [REDACTED] at about 9 or 9:30 and put him in his swing and he fell asleep. At 10pm, both parents took a shower and then they had some friends over and [REDACTED] was playing cards and she was watching tv. [REDACTED] woke up and [REDACTED] held him on his lap while he slept then about 1am they all went to bed. [REDACTED] is spoiled and he doesn't like sleeping in his crib so she puts him in their big bed. [REDACTED] sleeps on the left, she in the middle and then they made an area for the baby with blankets so the baby couldn't roll off with other blankets. They had a wedge pillow that they used to keep the baby from rolling on his side but that was in the wash so [REDACTED] just rolled up a blanket and put it behind his back and she thought that would keep the baby from rolling but it didn't work. At 5:12, [REDACTED] woke up for work and she got up to pee and that was when she checked on the baby. She noticed right away that he was very pale and his lips were blue. She said she knew that he was already dead right then. She yelled for [REDACTED] to come and he checked the baby and didn't know what to do so he called her father, [REDACTED] who told them to call 911 and he did. She doesn't remember much after that except the police and EMT's working on [REDACTED] and taking him to the hospital next. They arrived shortly after that and at about 6:15 they told them that [REDACTED] was gone. She states that she has been hysterical since. Crying and crying. She can't believe that [REDACTED] is gone and that she won't have him to love and hold and watch him grow up. [REDACTED] denies any drug usage. At this time, [REDACTED] submitted to a random drug screen. While waiting for the results, she stated that she is extremely ADD and took an Adderall, but doesn't have a current prescription. She also stated that she had a panic attack yesterday and so she took a valium, she doesn't have a prescription for the valium either. [REDACTED] tested positive for Amphetamines, Barbiturates, Cocaine, Methamphetamine, and THC/Cannabinoids. She did admit to smoking THC and that it may have been laced with Cocaine. She said she thought that the Adderall would test for Methamphetamines. [REDACTED] explained that Adderall would test for Amphetamines not Methamphetamines. She started crying and stated that she would never do anything to hurt her baby and that the marijuana she smoked must have had other drugs in it. She states that she and her mother do not get along at all and they fight constantly. Her mom gets in her business and won't leave her alone. They have had her son almost since he was born. He doesn't live with [REDACTED]. She hasn't given her parents custody but doing a POA was discussed today.

She states that a normal day goes like this: 5am or so, [REDACTED] would get up for work and she would get up to use the restroom and check on the baby, and they would continue sleeping until the [REDACTED] would wake up. Yesterday he was sick so he was fussy and didn't sleep much throughout the day but most days he would sleep through the night and get up about 7am, eat then go back to sleep for an hour or two. About 9 am they would get up for the day, she would bathe him and put him in his swing and he would watch the lights and be content while she showered. They would spend some time cuddling after her shower then he would eat about 11 and go down for a nap until about 2pm. He would wake up and eat again and lay on his blanket for awhile, while she got some lunch, they would cuddle again and he would sleep or coo. She loved that time with her son. At about 4 or 5, [REDACTED] would come home and they would go for a walk with the baby in the stroller then have dinner. Many times they would watch tv or play cards with friends. At about 9 or so, [REDACTED] would eat and go down for the night. She tried to put him in his crib but he didn't like it and was spoiled so he would end up in their bed every night. They were very careful to give him plenty of room in the bed and had made an area for him to sleep in with the blankets rolled up and he had a wedge pillow to keep him on his side.

CPSI along with the family obtained the following information regarding all family members in order to assess the family's strengths and possible needs/risk:

Pediatrician: [REDACTED]

Are children current on immunizations: Yes, he just got his first shots last week on Wednesday.

Mental Health: No one in this family has any mental health issues

Physical Health/disability: No one in this family has any physical health issues, except for the paternal grandmother, [REDACTED]

[REDACTED] mother is diabetic, Type I.

Medications: No one in this family is prescribed any medications.

Domestic Violence: There is no history of domestic violence with this family.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Alcohol/Drug Use: There is no alcohol/drug abuse in this family.

Department History: This family does not have any department history, except for [REDACTED] was on probation as a juvenile and showed up in JJ.

Police History: Both parents have been on probation in the past. [REDACTED] states that she was on probation for drug possession.

[REDACTED] refused to stated why he was on probation.

Employment: [REDACTED] has been a stay at home mom and [REDACTED] states that he works for [REDACTED]

Education Level of Adults: [REDACTED]-GED, [REDACTED] none.

Government Assistance: Tenn Care, food stamps

Primary Caretaker history of abuse/neglect: There is no history of abuse/neglect with either caretaker.

At this time, the family feels that they are able to address all safety/permanence/well-being needs at this time.

Interview with the father, [REDACTED] private and separate:

[REDACTED] states that he had the baby asleep on his lap around 10 pm while he was playing cards with friends. He states that the family went to bed around 1 am and at that time, [REDACTED] put the baby to sleep in their big bed like they always do. The baby is spoiled and cries if they try to put him in his own bed so they put him in their bed. They are careful and check on him frequently. He got up at 5:12 am this morning and the next thing he [REDACTED] was screaming for him to come quick because the baby was blue. He called her father, [REDACTED], because he didn't know what to do. [REDACTED] told him to call 911 immediately so he did. The police and EMS came around 5:25 and took the baby to the hospital. He said he can't talk about this situation and just wants to get [REDACTED] home where she can rest because she is blaming herself for the baby's death because she put the blankets around him. He denies any drug usage and at first refused to be drug screened stating that it wasn't right to do this on the day that his baby died. He said that it wasn't his probation Officer so he didn't have to do a drug test. [REDACTED] explained that he would be considered positive for everything and at that time, He did submit to a random drug screen with a male hospital staff member witnessing. [REDACTED] was positive for Amphetamines, Cocaine, Benzodiazepines, Methamphetamines and THC/Cannabinoids. He states that the only reason [REDACTED] is positive is because he was kissing on her a lot. He states that he smoked marijuana and it must have been laced with the other substances. He states he was on probation in the past as a juvenile. He was charged with Simple Possession, Tampering with evidence, and Possession of drug Paraphernalia, Evading Arrest, Driving on Suspended license and Theft over 1,000.00. He states that he does have another child, [REDACTED] DOB: [REDACTED] who resides with her mother, [REDACTED] at [REDACTED]

Interview with [REDACTED] DOB: [REDACTED] [REDACTED] DOB: [REDACTED] maternal grandparents, private, hospital visitation room:

They were contacted at around 5:15am by [REDACTED] when the parent's found the baby unresponsive in their bed. They instructed them to call 911 and then the grandparents came to the hospital to be with their daughter, [REDACTED] They have had her son, [REDACTED] DOB: [REDACTED] he was about 4 months old because [REDACTED] was only 18 and went through severe post-partum depression. They don't have legal custody but have started talking about getting custody now that [REDACTED] has died. They were unaware of any drug usage and didn't really have any concerns regarding the way [REDACTED] parented except that they would run hot and cold with parenting. They would want to spend time with [REDACTED] and then not call for a couple weeks. [REDACTED] calls [REDACTED] mom, not [REDACTED] They are going to file for custody after the funeral for [REDACTED] now that they were told by [REDACTED] that they failed their drug tests today. The grandparents watched the baby, [REDACTED] from Friday to Sunday, when [REDACTED] brought the baby back to the parent's at their apartment. They now feel that they should have just kept the baby and he would still be alive. They had hoped that [REDACTED] would mature with this baby and be able to be a good mother to him but they are very disappointed in her and [REDACTED] She had been in trouble before with drugs and was arrested but they thought that she had given that all up. They intend to seek permanent legal custody of [REDACTED] as soon as possible. Their address is [REDACTED]

Interview with [REDACTED], brother to [REDACTED]

[REDACTED] lives at home with his parents and attends [REDACTED] His DOB: [REDACTED] His girlfriend, [REDACTED] was also present. [REDACTED] spoke with both [REDACTED] both of which had extensive contact with [REDACTED] they had no concerns regarding the way that they parented any of their children.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

They knew how much they loved [REDACTED] and how excited they were when he was born. They both cherished him and loved him very much.

The family identified [REDACTED] as a support. She was also present at this time. Her address is [REDACTED]. [REDACTED] spoke with her regarding the family. She states that [REDACTED] are great parents and she has never had any concerns regarding the way that they have parented any of their children. She states that [REDACTED] was very happy to find out he was going to have another child, especially when he found out it was going to be a boy, he was very proud. [REDACTED] was there when the baby was born and even cut the cord. He is a great father. She states that [REDACTED] father, [REDACTED] lives in [REDACTED]. He hasn't been very involved with his son, [REDACTED]. The last time she saw the family was last week, before Thanksgiving because she has been sick and she didn't want to get the baby sick at Thanksgiving. She likes to kiss on him and didn't want to give him her sickness. She states that she is a brittle diabetic and needs to rest because this has all been too much for her to handle. She can't believe the baby is gone and started to cry. She was very angry and yelled at [REDACTED] when the parents were asked to take drug screens.

Interview with [REDACTED] brother to [REDACTED] private:

He states that he loves his brother and has never been concerned about the way he parents his kids. He just saw the family at Thanksgiving and felt that they were being great parents and had no concerns. His address is [REDACTED]. They are a very close family and [REDACTED] would ask if they needed anything.

Interview with [REDACTED], friend to [REDACTED] her address is [REDACTED]. She has been friends with [REDACTED] since they both attended [REDACTED] at [REDACTED] so like 5 or 6 years they have been friends. She hasn't seen the family since [REDACTED] born but she never had any concerns regarding the way that [REDACTED] has parented their other children. She is not aware of any drug usage.

Interview with cousin, [REDACTED]:

Her address is [REDACTED] and also present was her boyfriend, [REDACTED]. They both have spent a lot of time with and are very close to [REDACTED]. They voiced no concerns with the way that they were raising their son, [REDACTED]. They both knew that they each had other children that they were raising but they were both very young when they were born. They stated that they loved [REDACTED] very much and wanted the best for him. They would not have done anything to hurt him. They are all very devastated by the loss today and can't believe he is gone.

Interview with [REDACTED] sister to [REDACTED] private:

She has been taking care of [REDACTED] so the family could be here at the hospital with [REDACTED]. Her DOB: [REDACTED] and her SS#: [REDACTED], she has two children, [REDACTED] DOB: [REDACTED] [REDACTED] DOB: [REDACTED]. She and her children live with her parents, [REDACTED]. She just recently split with her husband and was welcomed back home by her parents. Her parents are raising [REDACTED] oldest son, [REDACTED] because [REDACTED] wasn't ready to be a mother but they had always hoped that she would do some growing up and take him back. She had no concerns with any drug usage with the parents and felt that they were just young.

[REDACTED] traveled to the family home with [REDACTED] [REDACTED] along with both parents [REDACTED]. [REDACTED] showed the Detectives where they kept their blunts. He described that they were aware that the THC was laced with Cocaine and Meth because they got it from a female friend and brought it back to their apartment. They refused to state who the drugs were received from or how they knew that other drugs were in the THC. The drugs were confiscated by police as evidence. The apartment was cluttered. No visible safety hazards were observed. Pictures were taken and are in the permanent file.

CPSI observed

Document: photos were taken, and they are in the file

1. Interactions between mother/father and child, [REDACTED] [REDACTED] witnessed both parents saying goodbye to their son after he passed away. The interactions seemed loving and appropriate. Both parents were crying and upset about the



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

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

loss of their son.

2. Observation and presentation - no slurred speech, injuries, developmental delays or handicaps, of either parent were observed. Both parents were in shock and crying so the level of impairment was hard to determine. Both parents failed their drug screen for 5 substances.

3. Observation of physical environment - inside was cluttered. The family bed was observed and pictures are in the permanent file as well. The home is an apartment.

Next Step: Autopsy

Narrative Type: Addendum 1    Entry Date/Time: 12/03/2014 12:49 PM    Entered By: [REDACTED]

[REDACTED] consulted with [REDACTED] and with Legal Staff regarding the safety of the other child that belongs to [REDACTED]. Since [REDACTED] son, [REDACTED] was in physical custody of the grandparents at the time that the parent were using/abusing drugs it was decided that DCS would have no reason to do a safety placement with the child at this time. The child has resided with the maternal grandparents. A Family Permanency Plan was done with the both parents stating that they needed to have a drug and alcohol Assessment and follow the recommendations of said assessment. They both need to complete a parenting class.



**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: Phone Call

Contact Time: 07:05 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 12/02/2014

Completed date: 12/02/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

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

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 12/02/2014 03:27 PM      Entered By: [REDACTED]

Convene CPIT

Child Protective Services [REDACTED] [REDACTED] [REDACTED] faxed the referral to [REDACTED] [REDACTED] in order to convene the Child Protective Investigative Team (CPIT). [REDACTED] was assigned to this investigation. [REDACTED] called and will meet him and [REDACTED] at [REDACTED] [REDACTED]



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED] Status: Completed  
 Contact Date: 12/02/2014 Contact Method:  
 Contact Time: 07:00 AM Contact Duration: Less than 05  
 Entered By: [REDACTED] Recorded For:  
 Location: Created Date: 12/02/2014  
 Completed date: 12/02/2014 Completed By: [REDACTED]  
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being  
 Contact Type(s): Case Summary  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/02/2014 03:23 PM Entered By: [REDACTED]

**Case Assignment**

Child Protective Services [REDACTED] was assigned this case alleging Neglect Death. It was assigned as a P(1), Investigative case. The referral was assessed and assigned by [REDACTED] Response is due on 12/03/2014.

**Referral Summary:**

[REDACTED] passed away on 12/2/2014 at approximately 6:20am. It is believed that everyone in the home was asleep prior to finding the child not breathing. The mother woke up and found that [REDACTED] was not breathing, then contacted 911. The firefighters were the first to respond on the scene. It is reported that firefighters performed CPR on the child, however [REDACTED] did not recover. EMS transported the child to [REDACTED]. The doctor pronounced [REDACTED] dead. The doctor has not stated as to the reason for the child's death. The doctor's name is unknown. It is believed that the child was sleeping in the bed with the family. It is believed that the child rolled over and suffocated himself with a blanket on the bed. There are no injuries on [REDACTED]. It is not believed that alcohol or drugs were a part of the child's demise. It is not believed that [REDACTED] had any prior medical conditions prior to his death. It is not believed that there are any mental issues, domestic violence or any issues with alcohol and drugs that the referent is aware of. There are no known patterns of abuse in the home. It is unknown if there are previous instances of child fatality in the home or of [REDACTED] suffering from a serious injury. The parents have spoken to law enforcement. No one has been arrested. It is not believed that either the mother or the father are going to have any charges at the time of the report. The mother and the father do not have a history with law enforcement that the referent is aware of. It is not believed that the death was caused by abuse or neglect. An autopsy has not been completed at the time of the report. It is unknown where or when the autopsy will take place.

This CPSI verified the family's history of involvement with DCS through a search of TFACTS and the following history was found:

No TFACTS history was located for these parents. The only history was of [REDACTED] as a juvenile.

Initial Family Composition:



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

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Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

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[REDACTED] 2 months) resided with his mother, [REDACTED] father, [REDACTED] No one else resides in the home with the family.

Notification of referral was sent to the Judge. Notification of this referral was sent to the District Attorney.



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

**Assessment**

Family Name: [REDACTED] TN DCS Intake ID #: [REDACTED]  
 County: [REDACTED] Worker: [REDACTED]  
 Date of Referral: 12/2/14 6:22 AM Date of Assessment: 12/3/14 12:00 AM  
 Assessment Type: Initial Number of Children in the Household: 1

**Section 1: Immediate Harm Factors**

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

Yes No

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



## Tennessee Department of Children's Services

### SDM™ Safety Assessment

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

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

#### Section 2: Safety Interventions

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

#### Non-Protective Custody Interventions:

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

#### Protective Custody Interventions:

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



Tennessee Department of Children's Services  
SDM™ Safety Assessment

Section 3: Safety Decision

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

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

Children Removed

Children Not Removed

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

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

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

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