



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

Intake

Intake ID: [REDACTED]
 Intake Taken By: [REDACTED] Intake Date/Time: 07/09/2015 01:33 PM [REDACTED]
 Track Assigned: Investigation Priority Assigned: 1
 Screened By: [REDACTED]
 Date Screened: 07/09/2015

Investigation

Investigation ID: [REDACTED]
 First County/Region: [REDACTED]
 Date/Time Assigned: 07/09/2015 05:24 PM
 First Team Leader Assigned: [REDACTED] Date/Time: 07/09/2015 05:24 PM
 First Case Manager: [REDACTED] Date/Time: 07/09/2015 05:24 PM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	Deceased	Abuse Death	Yes	Unknown Participant [REDACTED] Unknown	None

Referent(s)

Referent Name: [REDACTED] Role to Alleged Victim(s): [REDACTED]
 Referent Address: [REDACTED]
 Referent Phone Number: [REDACTED]
 Type of Contact: I-3 Phone
 Notification: E-mail
 Narrative: CHILD IS NOT IN CUSTODY.

Family Case IDs: [REDACTED]
 Open Court Custody/FSS/FCIP No
 Closed Court Custody No

Open: None
 Substantiated: None
 Death: None
 Number of Screen Outs: 0

History (not listed above):
 Closed FSS: 5/26/05-8/31/05, # [REDACTED]



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7/26/07, ASMT# [REDACTED] DEI, No Services Needed

Pending: None
Awaiting Screening: None
Submitted: None

Sex Offender Registry: N/A

DUPLICATE REFERRAL: No

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

Reporter's name/relationship [REDACTED]

This child is not in custody.

Reporter states:

The reporter states that [REDACTED] (25) days, deceased) lived with her [REDACTED] (25) and father, [REDACTED] (26). Also in the home is her sister, [REDACTED] (6).

At 6:24AM today 911 received a call from the mother that she was en route to the hospital because [REDACTED] was not breathing. The family traveled in their car instead of ambulance because they said they were closer to the hospital. There are not any known physical injuries at this time to [REDACTED]

The mother reported that she woke at 4am and fed and burped [REDACTED]. She laid [REDACTED] in the bed between her and the father. The mother said when she woke up at around 6:15am [REDACTED] was not breathing. The baby had dried blood on her face coming from her nostrils. The bed was soiled with the fluid was coming from [REDACTED] nose. The fluid appeared to be milk and blood mixed together. The mother attempted CPR on [REDACTED]. The autopsy for [REDACTED] is pending for tomorrow morning. [REDACTED] was pronounced deceased at 8:54AM this morning at [REDACTED] Hospital. It is unknown if the injuries are consistent with the explanation because the reporter is not medical personnel.

[REDACTED] sibling, [REDACTED] is currently at the hospital with the mother and family. It is unknown if there are other family members to care for [REDACTED]. The reporter did not witness the home environment, but it was witnessed by law enforcement. The reporter was told that the home was clean and there were no known hazards noted. There have not been any other previous instances of a child in the home dying or suffering injuries. DCS has not been involved with the family and there are not any known patterns of neglect in the home. It is unknown at this time if anyone in the family has history with police. The reporter has not been in the home prior to the death.

[REDACTED] County DCS worker [REDACTED] is on the scene and has responded to this incident.

Special Needs or Disabilities: [REDACTED] was born premature at 32 weeks just released from hospital on 7-1-2015

Will the alleged perpetrator(s) have access to the alleged child victim(s) within the next 24 hours? No
Does the alleged child victim(s) have any injuries and if so, what the severity of the injuries: Deceased
Does the alleged child victim(s) need immediate medical care? Yes
Is the non-offending caretaker protective and aware of the concern? Unknown
Is the alleged child victim(s) afraid to remain in the home? Unknown
How are the living conditions of the home? Good



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What's the child's current location/is the child safe at this time? the child is deceased and sibling is with the parents

What's the perpetrator's location at this time? Unknown

Any other safety concerns for the child(ren) or worker who may respond? N/A

Domestic Violence/ Substance abuse or mental health issues present in the home? N/A

Per SDM: Investigation/P1

[REDACTED], CM3 @ 3:31 pm [REDACTED] on 7/9/15.

[REDACTED] and RA notified @ 3:33 pm [REDACTED] on 7/9/15.

County paged by MIR 3.

Recipients	Time Issued	Response Received	Devices	Responses
[REDACTED]	07-09-15 03:38:02 PM	[REDACTED]	07-09-15 03:38:49 PM	[REDACTED]

Received



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

Participant(s)

Name: [REDACTED]

Gender: Female

Date of Birth [REDACTED]

Participant ID: [REDACTED]

SSN:

Race:

Age: 7 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] **Race:** [REDACTED] **Age:** 26 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] **Race:** [REDACTED] **Age:** 27 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN:

Race: Black/African

Age: Deceased

Address: [REDACTED]

Deceased Date: 07/09/2015

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: Unknown Participant [REDACTED] Unknown

Gender:

Date of Birth:

Partipant ID: [REDACTED]

SSN:

Race:

Age:

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

A. Investigation

Case Name: [REDACTED]

Investigation ID: [REDACTED]

Referral Date: 07/09/2015

Assignment Date: 12/04/2015

Street Address: [REDACTED],

City/State/Zip: [REDACTED]

B. Allegation

#	Children's Name	DOB	Specific Allegation for Each Child	Alleged Perpetrator's Name	DOB	Classification	Severe Abuse	Classified By
		SSN			SSN			
1	[REDACTED]	[REDACTED]	Abuse Death	Unknown Participant [REDACTED]	[REDACTED]	Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[REDACTED] 12/18/2015

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: This case came to the attention of the Department on 07/09/15 with allegations of Infant Death for [REDACTED] (28 days). The alleged perpetrator is unknown. Upon further investigation it was determined that the infant death was not associated to any abuse or neglect of the infant. This case is closed as Allegations Unsubstantiated/Perpetrator Unsubstantiated.

D. Case Workers

Case Worker: [REDACTED]

Date: 12/18/2015

Team Leader: [REDACTED]

Date: 12/18/2015

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:

On 7/10/15 at 8:37am On 7/10/15 at 8:37am an autopsy was performed on [REDACTED] at The [REDACTED] County Medical Examiner's Office and DCS Inv. [REDACTED] [REDACTED] and Det. [REDACTED] observed the autopsy by Dr. [REDACTED]. Dr. [REDACTED] advised that there was no known trauma, child abuse, congenital, natural, birth defects, infections and currently pending are toxicology, cultures and micro results.

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

Autopsy reveals

Undetermined cause of death as no congenital anomalies, natural diseases, no signs of trauma and negative toxicology/cultures.

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



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Case Name : [REDACTED]

Investigation ID: [REDACTED]

[REDACTED] in a conference room at [REDACTED] Medical Center. [REDACTED] said that she woke at approximately 4:00 am. [REDACTED] said that she is a light sleeper and heard [REDACTED] "Grunting." [REDACTED] was lying on her back in her bassinet. [REDACTED] was wearing a grey onesie with a pink sleeper (with penguin) and diaper. [REDACTED] said that the room was room temperature, but hot. She said that she tries to keep the room between 72-75 degrees as recommended due to [REDACTED] being a premie and unable to keep her body temperature regulated at this time.

[REDACTED] said that she [REDACTED] 45cc of a 2oz bottle of "[REDACTED]" (baby formula) and burped her. [REDACTED] said that [REDACTED] looked at her, before falling asleep on her chest. [REDACTED] said that she laid [REDACTED] on the bed, between her left-side and the father [REDACTED] who was lying on right-side on his back. [REDACTED] said when she woke up at around 6:15am [REDACTED] was lying on her back, head turned to the side and that when she tried to wake [REDACTED] that she noticed the dried blood on the left side of her face and she was not breathing. [REDACTED] said that she woke [REDACTED] and told him that [REDACTED] was not breathing.

[REDACTED] said that there was blood on the bed that appeared to have come from her nostrils. The bed was soiled with the fluid that came from [REDACTED] nose which appeared to be milk and blood mixed together. [REDACTED] said that she took the sleeper off of [REDACTED] attempted CPR on [REDACTED] with her in her hand and when she did the compressions the thick milk formula started coming out of her nose and mouth. [REDACTED] said that she called her mother and 911 to report that she was on her way to the hospital, because [REDACTED] was not breathing. [REDACTED] stated that she started rescue breathing and chest compressions on [REDACTED] stated that she said, "[REDACTED] is not breathing where is the phone, she is not breathing". [REDACTED] stated that she immediately called the maternal grandmother, [REDACTED], who is an RN and teaches CPR and CNA's at [REDACTED] for help while the father got [REDACTED] (sibling) up from the bed. [REDACTED] stated that while performing CPR on [REDACTED] that a white, milky looking substance came from [REDACTED] nose and mouth and was mixed with the blood. [REDACTED] reports after she called the maternal grandmother that she called 911 and while on the phone with 911 the family (mother, father, sister and [REDACTED] proceeded to the hospital.

[REDACTED] gave a time line of the day before (07/08/15).

[REDACTED] said that she woke up between 6:00am-7:00am to feed the baby and went back to sleep [REDACTED] said that she woke up between 8:30am-9:30am to feed the baby and to send [REDACTED] off with [REDACTED] so he could take her to the [REDACTED]

[REDACTED] said that she left her house between 11:30am-11:35am to go to her mother's house. She left [REDACTED] with her aunt [REDACTED] while she went to her hair appointment that was scheduled for 11:30am.

[REDACTED] said after her hair appointment, she returned to her mother's to check on the baby, who was with [REDACTED] before leaving again, to check on if her car that was ready to be picked up at [REDACTED] it wasn't.

Between 2:00pm-3:00pm [REDACTED] returned to pick up baby and went home using her mother car. [REDACTED] was asleep in the car seat, so she put her in the bassinet.

Her Landlord came to collect the rent and the baby was asleep the whole time.

[REDACTED] said that she woke up [REDACTED] to feed and change her diaper, before she had to leave to pick up [REDACTED] at the [REDACTED] before 5:00pm.

[REDACTED] said after she left the [REDACTED] [REDACTED] she returned to her mother's house to do [REDACTED] laundry. [REDACTED] was up during that time and fell asleep in the car on the way home. When she got home about 7:00pm, she cooked fish.

When [REDACTED] was asked about if [REDACTED] had any medical problem after being released from the hospital on 07/01/15, she said that [REDACTED] had problems with spit up coming from her nose.

SEE OTHER SECTION

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

[REDACTED] ([REDACTED] days,deceased) lived with her mother, [REDACTED] (25) and father, [REDACTED] (26). Also in the home is her sister, [REDACTED] (6).

At 6:24AM today 911 received a call from the mother that she was en route to the hospital because [REDACTED] was not breathing. The family traveled in their car instead of ambulance because they said they were closer to the hospital. There are not any known physical injuries at this time to [REDACTED]

The mother reported that she woke at 4am and fed and burped [REDACTED]. She laid [REDACTED] in the bed between her and the father. The mother said when she woke up at around 6:15am [REDACTED] was not breathing. The baby



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Investigation ID: [REDACTED]

had dried blood on her face coming from her nostrils. The bed was soiled with the fluid was coming from [REDACTED] nose. The fluid appeared to be milk and blood mixed together. The mother attempted CPR on [REDACTED]. The autopsy for [REDACTED] is pending for tomorrow morning. [REDACTED] was pronounced deceased at 8:54AM this morning at [REDACTED] Hospital. It is unknown if the injuries are consistent with the explanation because the reporter is not medical personnel.

[REDACTED] sibling, [REDACTED] is currently at the hospital with the mother and family. It is unknown if there are other family members to care for [REDACTED]. The reporter did not witness the home environment, but it was witnessed by law enforcement. The reporter was told that the home was clean and there were no known hazards noted. There have not been any other previous instances of a child in the home dying or suffering injuries. DCS has not been involved with the family and there are not any known patterns of neglect in the home. It is unknown at this time if anyone in the family has history with police. The reporter has not been in the home prior to the death.

[REDACTED] County DCS worker [REDACTED] is on the scene and has responded to this incident.

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

[REDACTED] said that [REDACTED] had a doctor's appointment on Monday (07/06/015) and the doctor told her that [REDACTED] was doing fine. The doctor told her to would saline drops in [REDACTED] nose to prevent her nose from drying up whenever she had to use the syringe on her nose. [REDACTED] said that she would have to use the syringe about 1-2 times a day, but the last time that she used it on [REDACTED] was about 10:00am after her 2nd feeding. [REDACTED] said that she could hear the congestion in [REDACTED] nose and would wipe the syringe on a receiving blanket (green, yellow, white stripe).

[REDACTED] added that [REDACTED] was born prematurely at 32 weeks (due 7/29/15) and was [REDACTED] days old ([REDACTED] had preeclampsia). On 06/29/15 [REDACTED] was schedule to go home, but her stomach blew up so the doctor ordered to keep her in the hospital to monitor, test and chest X-ray her for "N.E.C." (Necrotizing Enterocolitis). [REDACTED] was allowed to go home on 07/01/2015.

[REDACTED] said that on the morning of 07/09/15 at about 4:00am, he was asleep, but woke up when [REDACTED] was feeding. He said that [REDACTED] usually feeds the baby about every 2 hours and uses an alarm on her phone. He said that [REDACTED] feeds the baby breast milk and [REDACTED] formula. [REDACTED] said that he went back to sleep, at about 6:00am [REDACTED] woke him up and said that [REDACTED] was not breathing.

[REDACTED] said that he was sleeping on the right side; [REDACTED] was in the middle of him and [REDACTED] who was on the left side of their queen size bed. [REDACTED] said when he woke up his elbow touched a wet spot in the bed that appear to bed blood mixed with milk. [REDACTED] said that [REDACTED] was sitting up on the bed saying "the baby is not breathing." [REDACTED] said that he saw blood and milk mixed coming from [REDACTED] nose and mouth. [REDACTED] said that [REDACTED] was holding [REDACTED] and still performing CPR on [REDACTED]. [REDACTED] stated that [REDACTED] was on the phone with 911 while the family got in the truck and drove to the hospital. [REDACTED] stated that she denied ambulance service because the house is approximately 2 blocks from the hospital and it was quicker to head on to the hospital. [REDACTED] stated that she advised 911 that the family was en-route to the hospital and wanted to alert the hospital as to their arrival.

[REDACTED] said that he was in shock, panic and grabbed his step-daughter [REDACTED] to go to the hospital. [REDACTED] said that [REDACTED] usually props the baby up on one of their tempura bed pillows. He said that there is 4-5 tempura pillows on the bed. He said that the bed is a queen pillow top with a 3inch tempura mattress with a fitted sheet and orange comforter.

[REDACTED] (her sister's [REDACTED] home) [REDACTED] is [REDACTED] mother. [REDACTED] said that she is visiting [REDACTED] since 7/03/15 from [REDACTED]. [REDACTED] said that on Monday 7/06/15 she babysat for [REDACTED] and kept [REDACTED] after her doctor's appointment while [REDACTED] went to her WIC appointment at 1:00pm-3:30pm. [REDACTED] stated that this was the first time [REDACTED]



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was out of the home around any other people due to concerns regarding being in exposed to any substances that may cause illness. Ms. [REDACTED] did not observe any abnormal or concerning behaviors with [REDACTED] feeding and Diaper changes were normal.

[REDACTED] said on Tuesday 7/07/15 she kept [REDACTED] at about 11:45am for about 1 hour, while [REDACTED] went to her hair appointment. [REDACTED] said during that time, she fed [REDACTED]

[REDACTED] said on Wednesday 7/08/15 [REDACTED] came to the residence to do her laundry. During that time [REDACTED] had 1 bag of baby clothes to wash. [REDACTED] said that the baby is fed every 2 hours, but she fed [REDACTED] 1 time (she ate well) and had 1 diaper change. [REDACTED] was very alert, looking around and hands reaching out. The alertness was significantly more than the previous days.

[REDACTED] said that she was aware that on Saturday (7/04/15) [REDACTED] had a problem with her body temp dropping.

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 Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	12/15/2015	Contact Method:	
Contact Time:	10:05 AM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	12/15/2015
Completed date:	12/15/2015	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: 12/15/2015 09:05 AM Entered By: [REDACTED]

This case has been reviewed by Investigative Coordinator [REDACTED] and Lead Investigator [REDACTED]. Notification to Regional Director [REDACTED] was provided on this date via email.



Tennessee Department of Children's Services
Case Recording Summary

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

Case Recording Details

Recording ID:	██████████	Status:	Completed
Contact Date:	12/07/2015	Contact Method:	
Contact Time:	11:33 AM	Contact Duration:	
Entered By:	██████████	Recorded For:	
Location:	DCS Office	Created Date:	12/07/2015
Completed date:	12/09/2015	Completed By:	██████████
Purpose(s):	Service Planning		
Contact Type(s):	Case Summary		
Contact Sub Type:	Closing		

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

Narrative Type: Original Entry Date/Time: 12/07/2015 10:33 AM Entered By: ██████████

The Department of Children's Services/Office of Child received this report on July 09, 2015. allegations of Abuse Death was reported secondary to Alleged Child Victim (ACV) ██████████, █ days old female, presented a ██████████ Hospital Emergency Department @ 624am unconscious and unresponsive, pulseless and apneic. ██████████ was pronounced dead at 0711am on July 09, 2015. The alleged perpetrator(s) (AP) were listed as Unknown at the time of the report.

The family has no history with The Department of Children's Services in regards to caregivers; however there is a history for ██████████ (Birth Father) when he was a child. The case was Family Support Services (FSS) for Mr. ██████████ being truant in ██████████ County. This FSS case opened in 2005 was closed and documented as successful with services. In 2007 there was a Child Protective Services Assessment case where Mr. ██████████ was listed as a case participant. This Assessment case was a result of the mother of Mr. ██████████ child was reported to use Marijuana. This case was closed and classified as No Services Needed.

The circumstances surrounding this report came to the attention of the Department of Children's Services following the child, ██████████, being taken to the hospital after she was found unconscious, unresponsive, pulseless and apneic by her mother, ██████████ (Birth mother). The child was in the bed with Ms. ██████████ and Mr. ██████████ when at approximately 615am on July 09, 2015, Ms. ██████████ awoke to find ██████████ lying on her back, her head turned to one side, and dried "blood" around her nose and mouth. At this point, Ms. ██████████ began Cardiopulmonary Resuscitation (CPR). The family home is a few blocks from ██████████ Medical Center and the family choose to get into their car and drive to the hospital, but did call 911 and requested 911 dispatch to alert the hospital of the situation and that CPR was in progress with no change in condition of ██████████. Resuscitative efforts continued at the Emergency Department until 0711am, July 09, 2015 when ██████████ was pronounced dead.

On July 09, 2015 at approximately 9:09 am ██████████, Special Crimes Unit (SCU) ██████████ Police Department (██████████) was contacted and notified of an unresponsive infant at ██████████ Medical Center at ██████████ Healthcare Emergency Room (██████████). Office of Child Safety (OCS) Investigator ██████████ was assigned and responded to the Emergency Department, where Det ██████████ and Inv. ██████████ met with ██████████ Violent Crimes unit Inv ██████████, Officer ██████████ and ██████████ (ME office). ██████████ VCU Inv. ██████████, SCU Inv ██████████ and Officer ██████████ responded to the residence/crime scene at ██████████



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

with Crime Scene Tech, [REDACTED], to process the scene.

Interviews were conducted with family members who live in the home and also extended family members. NOTE: first names will be used due to family members of the same gender having same surname

On 07/09/15 at 8:54am the Medical Examiner's Office reported that a deceased infant, [REDACTED] was brought to the [REDACTED] by her parents after they notified 911 at about 6:24am today. 911 received the call from the mother [REDACTED] stating that she was en-route to the hospital, because [REDACTED] was not breathing. The family traveled in their car instead of ambulance because according to the family they were close enough to the hospital that they could already be at the hospital before the ambulance made it to the residence. There were not any known physical injuries at this time to [REDACTED]

With [REDACTED] (birth Mother)

On 07/09/15 at 9:09am Officer [REDACTED] (ME office), DCS Inv. [REDACTED] and Det. [REDACTED] met with [REDACTED] in a conference room at [REDACTED] Medical Center. [REDACTED] said that she woke at approximately 4:00 am. [REDACTED] said that she is a light sleeper and heard [REDACTED] "Grunting." [REDACTED] was lying on her back in her bassinet. [REDACTED] was wearing a grey onesie with a pink sleeper (with penguin) and diaper. [REDACTED] said that the room was room temperature, but hot. She said that she tries to keep the room between 72-75 degrees as recommended due to [REDACTED] being a preemie and unable to keep her body temperature regulated at this time.

[REDACTED] said that she [REDACTED] 45cc of a 2oz bottle of "[REDACTED]" (baby formula) and burped her. [REDACTED] said that [REDACTED] looked at her, before falling asleep on her chest. [REDACTED] said that she laid [REDACTED] on the bed, between her left-side and the father [REDACTED] who was lying on right-side on his back. [REDACTED] said when she woke up at around 6:15am [REDACTED] was lying on her back, head turned to the side and that when she tried to wake [REDACTED] that she noticed the dried blood on the left side of her face and she was not breathing. [REDACTED] said that she woke [REDACTED] and told him that [REDACTED] was not breathing.

[REDACTED] said that there was blood on the bed that appeared to have come from her nostrils. The bed was soiled with the fluid that came from [REDACTED] nose which appeared to be milk and blood mixed together. [REDACTED] said that she took the sleeper off of [REDACTED] attempted CPR on [REDACTED] with her in her hand and when she did the compression the thick milk formula started coming out of her nose and mouth. [REDACTED] said that she called her mother and 911 to report that she was on her way to the hospital, because [REDACTED] was not breathing. [REDACTED] stated that she started rescue breathing and chest compression on [REDACTED] stated that she said, "[REDACTED] is not breathing, where is the phone, she is not breathing". [REDACTED] stated that she immediately called the maternal grandmother, [REDACTED], who is an RN and teaches CPR and CNA's at [REDACTED] for help while the father got [REDACTED] (sibling) up from the bed. [REDACTED] stated that while performing CPR on [REDACTED] that a white, milky looking substance came from [REDACTED] nose and mouth and was mixed with the blood. [REDACTED] reports after she called the maternal grandmother that she called 911 and while on the phone with 911 the family (mother, father, sister and [REDACTED] proceeded to the hospital.

[REDACTED] gave a time line of the day before (07/08/15).

[REDACTED] said that she woke up between 6:00am-7:00am to feed [REDACTED] and went back to sleep. [REDACTED] said that she woke up between 8:30am-9:30am to feed [REDACTED] and to send [REDACTED] with [REDACTED] so he could take her to the [REDACTED] [REDACTED] said that she left her house between 11:30am-11:35am to go to her mother's house. She left [REDACTED] with her aunt [REDACTED] while she went to her hair appointment that was scheduled for 11:30am.

[REDACTED] said after her hair appointment, she returned to her mother's to check on the baby, who was with [REDACTED] before leaving again, to check on if her car that was ready to be picked up at [REDACTED], but it wasn't.

Between 2:00pm-3:00pm [REDACTED] returned to pick up baby and went home using her mother car. [REDACTED] was asleep in the car seat, so she put her in the bassinet.

Her Landlord came to collect the rent and the baby was asleep the whole time.

[REDACTED] said that she woke up [REDACTED] to feed and change her diaper, before she had to leave to pick up [REDACTED] at the [REDACTED] [REDACTED] before 5:00pm.

[REDACTED] said after she left the [REDACTED] [REDACTED] she returned to her mother's house to do [REDACTED] laundry. [REDACTED] was up during that time and fell asleep in the car on the way home. When she got home about 7:00pm, she cooked fish.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name | [REDACTED]

Case Status: Close

Organization: [REDACTED]

When [REDACTED] was asked about if [REDACTED] had any medical problem after being released from the hospital on 07/01/15, she said that [REDACTED] had problems with spit up coming from her nose. [REDACTED] said that [REDACTED] had a doctor's appointment on Monday (07/06/15) and the doctor told her that [REDACTED] was doing fine. The doctor told her to use saline drops in [REDACTED] nose to prevent her nose from drying up whenever she had to use the syringe on her nose. [REDACTED] said that she would have to use the syringe about 1-2 times a day, but the last time that she used it on [REDACTED] was about 10:00am after her 2nd feeding. [REDACTED] said that she could hear the congestion in [REDACTED] nose and would wipe the syringe on a receiving blanket (green, yellow, white stripe).

[REDACTED] added that [REDACTED] was born prematurely at 32 weeks (due 7/29/15) and was 28 days old [REDACTED] had pre-eclampsia). On 06/29/15 [REDACTED] was schedule to go home, but there was complications so the doctor ordered to keep her in the hospital to monitor, test and perform chest X-ray on her for "N.E.C." (Necrotizing Enterocolitis). [REDACTED] was allowed to go home on 07/01/2015.

With [REDACTED] (birth father)

On 07/09/15 at 11:41am Officer [REDACTED] (ME office), DCS Inv. [REDACTED] and Det. [REDACTED] met with [REDACTED] [REDACTED] in a conference room [REDACTED] Medical Center. [REDACTED] said that on the morning of 07/09/15 at about 4:00am, he was asleep, but woke up when [REDACTED] was feeding [REDACTED]. He said that [REDACTED] usually feeds the baby about every 2 hours and uses an alarm on her phone. He said that [REDACTED] feeds the baby breast milk and [REDACTED] formula. [REDACTED] said that he went back to sleep, at about 6:00am [REDACTED] woke him up and said that [REDACTED] was not breathing.

[REDACTED] said that he was sleeping on the right side; [REDACTED] was in the middle of him and [REDACTED] who was on the left side of their queen size bed. [REDACTED] said when he woke up his elbow touched a wet spot in the bed that appear to be blood mixed with milk. [REDACTED] said that [REDACTED] was sitting up on the bed saying "the baby is not breathing." [REDACTED] said that he saw blood and milk mixed coming from [REDACTED] nose and mouth. [REDACTED] said that [REDACTED] was holding [REDACTED] and still performing CPR on [REDACTED]. [REDACTED] stated that [REDACTED] was on the phone with 911 while the family got in the truck and drove to the hospital [REDACTED] Medical Center). [REDACTED] stated that she denied ambulance service because the house is approximately 2 blocks from the hospital and it was quicker to head on to the hospital. [REDACTED] stated that she advised 911 that the family was en-route to the hospital and wanted to alert the hospital as to their arrival.

[REDACTED] said that he was in shock, panic and grabbed his step-daughter [REDACTED] to go to the hospital.

[REDACTED] said that [REDACTED] usually props the baby up on one of their tempura bed pillows. He said that there are 4-5 tempura pillows on the bed. He said that the bed is a queen pillow top with a 3inch tempura mattress with a fitted sheet and orange comforter.

With [REDACTED] (maternal Aunt)

On 7/09/15 at 3:37pm DCS Inv. [REDACTED] and Det. [REDACTED] met with [REDACTED] at 2120 [REDACTED] (her sister's [REDACTED] home) [REDACTED] is [REDACTED] mother. [REDACTED] said that she is visiting [REDACTED] since 7/03/15 from [REDACTED]

[REDACTED] said that on Monday 7/06/15 she babysat for [REDACTED] and kept [REDACTED] after her doctor's appointment while [REDACTED] went to her WIC appointment at 1:00pm-3:30pm. [REDACTED] stated that this was the first time [REDACTED] was out of the home around any other people due to concerns regarding being in exposed to any substances that may cause illness. Ms. [REDACTED] did not observe any abnormal or concerning behaviors with [REDACTED] feeding and Diaper changes were normal.

[REDACTED] said on Tuesday 7/07/15 she kept [REDACTED] at about 11:45am for about 1 hour, while [REDACTED] went to her hair appointment.

[REDACTED] said during that time, she fed [REDACTED]. [REDACTED] said on Wednesday 7/08/15 [REDACTED] came to the residence to do her laundry. During that time [REDACTED] had 1 bag of baby clothes to wash. [REDACTED] said that the baby is fed every 2 hours, but she fed [REDACTED] 1 time (she ate well) and had 1 diaper change. [REDACTED] was very alert, looking around and hands reaching out. The alertness was significantly more that the previous days.

[REDACTED] said that she was aware of the fact that on Saturday (7/04/15) [REDACTED] had a problem with her body temperature



Tennessee Department of Children's Services
Case Recording Summary

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

dropping, so she put the baby's face on her chest, because her temperature was 97.7-97.97 degrees.

With [REDACTED] (6 yo female sibling)

On 7/09/15 at 4:09pm DCS Inv. [REDACTED] conducted an interview with [REDACTED] said that she is 6 years old and will be in the 2nd grade at [REDACTED] School. [REDACTED] said that on yesterday 7/08/15, she woke up in her bedroom and her mother took her to the Boy's and Girl's club. Mom picked her up from the B&G Club and made fish for dinner, but step-dad was not there. [REDACTED] said before dinner she played with her baby sister in her momma's bedroom. [REDACTED] said that she held [REDACTED] hand and her momma put [REDACTED] beside her on the pillow (white square pillow). [REDACTED] said before dinner, they went to "Nanna (grandmother)" where mom was folding clothing at Nana's house she was playing with her cousins who were at the home. [REDACTED] then said she told her mother that she was hungry and the family left Ms. [REDACTED] home and went to the family home and her mother cooked fish for dinner. [REDACTED] then said that she took a shower and went to bed. The next morning, 07-09-2015, [REDACTED] said that her step father, [REDACTED], came into her room and woke her up and said they were going to the hospital because her sister is sick. [REDACTED] reported that she lives in the home with her mother, sister, and step dad, she reported that she does well in school and likes going to the beauty shop with her mother and getting her hair fixed with braids.

[REDACTED] (maternal grandmother)

Ms. [REDACTED] reported that she was present on 07-08-2015 at her home. Ms. [REDACTED] is visiting Ms. [REDACTED] home. Ms. [REDACTED] reported that [REDACTED] was alert and playing with her hands and more alert. Ms. [REDACTED] reported that this was noticeable due to [REDACTED] normal routine is "Eat, Burp, and Go to Sleep" Ms. [REDACTED] only concern is for the emotional well-being of Ms. [REDACTED] Mother. This is reportedly due to Ms. [REDACTED] having her "tubes Tied" after the birth of [REDACTED] and now she will not be able to have any more children and she wanted her 2 girls. Child was taken to the hospital at approximately 633am on 07-09-2015. Resuscitation efforts were continued at the hospital until approximately 656am (approximately 23 min) Infant pronounced deceased at 711am

At this time there are no indications of any Maltreatment, abuse, or neglect. The other child in the home is 7 years old and made no disclosures of any maltreatment, abuse, or neglect either experienced or witnessed.

On 7/10/15 at 8:37am on 7/10/15 at 8:37am an autopsy was performed on [REDACTED] at The [REDACTED] County Medical Examiner's Office and DCS Inv. [REDACTED] Officer [REDACTED] and Det. [REDACTED] observed the autopsy by Dr. [REDACTED] Dr. [REDACTED] advised that there were no known trauma, child abuse, congenital, natural, birth defects, and infections and currently pending is toxicology, cultures and micro results.

CHILD DEATH/ NEAR DEATH:

- 1) Any unexplained death of a child when the cause of death is unknown or pending an autopsy report.
- 2) Any child death caused by abuse resulting from direct action of the child's caretaker or the consequence of the child's caretaker's failure to stop another person's direct action that resulted in the death of a child. Child deaths are always treated as severe child abuse.
- 3) Any child death that is the result of the caretaker's failure to meet childcare responsibilities. Neglect death is always treated as severe child abuse.
- 4) Near Death - A serious or critical medical condition resulting from child abuse or child sexual abuse, as reported by a physician who has examined the child subsequent to the abuse.

The case in its entirety was presented to [REDACTED] County Child Protection Investigative Team (CPIT) on September 2, 2015. A determination was made that the death of [REDACTED] was not associated to any abuse or neglect. The other child in the home, 7 years old [REDACTED], made no disclosures of any maltreatment, abuse, or neglect either experienced or witnessed.

At this time there is not preponderance of the evidence that meets the criteria of abuse, or neglect.

This case is closed as Allegations Unsubstantiated/Perpetrator Unsubstantiated for the allegation of Child Neglect Death



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	11/12/2015	Contact Method:	
Contact Time:	11:04 AM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	11/19/2015
Completed date:	11/19/2015	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: 11/19/2015 10:07 AM Entered By: [REDACTED]

This case was discussed on this date

Medical records have not been obtained from additional providers/hospital as of yet.
 Inv. [REDACTED] was instructed to contact hospital liaison to facilitate obtaining medical records.

All other task have been completed



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	10/14/2015	Contact Method:	
Contact Time:	03:10 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	10/14/2015
Completed date:	10/14/2015	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: 10/14/2015 02:11 PM Entered By: [REDACTED]

LI [REDACTED] along with Investigator [REDACTED] discussed this case on this date

Medical records from Dr. [REDACTED] was received and still waiting for additional medical records from the hospital



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 09/28/2015 Contact Method:
 Contact Time: 03:39 PM Contact Duration:
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 09/28/2015
 Completed date: 09/28/2015 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: 09/28/2015 02:42 PM Entered By: [REDACTED]
 Discussed this case on this date with Inv. [REDACTED]

Inv. [REDACTED] reported that the releases have been sent to the Primary Care Physician where the child was treated for Rhinorrhea "runny nose".
 Once these records have been received they will be reviewed and case can be placed on the Docket for Child Protection Investigation Team (CPIT) for review and classification.

It is reported that the family does not need or necessarily want any services from Office of Child Safety
 Literature was given to the immediate and extended family for grief counseling



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	09/15/2015	Contact Method:	
Contact Time:	02:05 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	09/15/2015
Completed date:	09/15/2015	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: 09/15/2015 01:08 PM Entered By: [REDACTED]

On this date the Final Autopsy was uploaded into TFACTS into the Investigation under the documents tab.

The manner/cause of death is undetermined, No trauma, no signs of Abuse or neglect, toxicology reports were negative.



Tennessee Department of Children's Services
Case Recording Summary

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

Case Recording Details

Recording ID:	██████████	Status:	Completed
Contact Date:	09/10/2015	Contact Method:	
Contact Time:	10:30 AM	Contact Duration:	
Entered By:	████████████████████	Recorded For:	
Location:	DCS Office	Created Date:	09/10/2015
Completed date:	09/10/2015	Completed By:	████████████████████
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: 09/10/2015 09:34 AM Entered By: ██████████

FAMILY COMPOSITION:

Child: ██████████ DOB: ██████████ DOD: 07/09/2015
 Child: ██████████ DOB: ██████████
 Mother: ██████████ DOB: ██████████
 Birth Father: ██████████ DOB: ██████████
 Addresses: ██████████
 Phone: ██████████

REFERRAL AND REFERENT:

The reporter states that ██████████ (████ days,deceased) lived with her mother ██████████ (25) and father, ██████████ (26). Also in the home is her sister, ██████████ (6).

At 6:24AM today 911 received a call from the mother that she was en route to the hospital because ██████████ was not breathing. The family traveled in their car instead of ambulance because they said they were closer to the hospital. There are not any known physical injuries at this time to ██████████

The mother reported that she woke at 4am and fed and burped ██████████. She laid ██████████ in the bed between her and the father. The mother said when she woke up at around 6:15am ██████████ was not breathing. The baby had dried blood on her face coming from her nostrils. The bed was soiled with the fluid was coming from ██████████ nose. The fluid appeared to be milk and blood mixed together. The mother attempted CPR on ██████████. The autopsy for ██████████ is pending for tomorrow morning. ██████████ was pronounced deceased at 8:54AM this morning at ██████████ Hospital. It is unknown if the injuries are consistent with the explanation because the reporter is not medical personnel.

██████████ sibling, ██████████ is currently at the hospital with the mother and family. It is unknown if there are other family members to care for ██████████. The reporter did not witness the home environment, but it was witnessed by law enforcement. The reporter was told that the home was clean and there were no known hazards noted. There have



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

not been any other previous instances of a child in the home dying or suffering injuries. DCS has not been involved with the family and there are not any known patterns of neglect in the home. It is unknown at this time if anyone in the family has history with police. The reporter has not been in the home prior to the death.

[REDACTED] County DCS worker [REDACTED] is on the scene and has responded to this incident.

CASE ASSIGNMENT:

This case came to the attention of the Department on 07/09/2015 and was assigned to CPSI [REDACTED] on 07/09/2015 as a P1. Severe Abuse Notification is made to the District Attorney's Office by DCS secretarial staff. Notification is made monthly to the Juvenile Court Judge (by DCS secretarial staff) as requested per Juvenile Court Judge [REDACTED]

On 07/09/15 at about 9:09am Det. [REDACTED] was contacted and notified of an unresponsive infant at [REDACTED] Medical Center at [REDACTED] Healthcare Emergency Room ([REDACTED]). CPSI [REDACTED] was assigned and responded to the ER, where Det. [REDACTED] and CPSI met with [REDACTED] Violent Crimes unit Inv. [REDACTED], Officer [REDACTED] and [REDACTED] (ME office), [REDACTED] VCU Inv. [REDACTED], SCU Inv. [REDACTED] and Officer [REDACTED] responded to the residence/crime scene at [REDACTED] with Crime Scene Tech [REDACTED] to process the scene. DCS central intake was notified and referral ([REDACTED]) was made.

On 07/09/15 at 8:54am the Medical Examiner's Office reported that a deceased infant, [REDACTED] was brought to the [REDACTED] by her parents after they notified 911 at about 6:24am today. 911 received the call from the mother [REDACTED] stating that she was en route to the hospital, because [REDACTED] was not breathing. The family traveled in their car instead of ambulance because according to the family they were close enough to the hospital that they could already be at the hospital before the ambulance made it to the residence. There were not any known physical injuries at this time to [REDACTED]

On 07/09/15 at 9:09am Officer [REDACTED] (ME office), DCS Inv. [REDACTED] and Det. [REDACTED] met with [REDACTED] in a conference room at [REDACTED] Medical Center. [REDACTED] said that she woke at approximately 4:00 am. [REDACTED] said that she is a light sleeper and heard [REDACTED] "Grunting." [REDACTED] was lying on her back in her bassinet. [REDACTED] was wearing a grey onesie with a pink sleeper (with penguin) and diaper. [REDACTED] said that the room was room temperature, but hot. She said that she tries to keep the room between 72-75 degrees as recommended due to [REDACTED] being a premie and unable to keep her body temperature regulated at this time.

[REDACTED] said that she [REDACTED] 45cc of a 2oz bottle of "[REDACTED]" (baby formula) and burped her. [REDACTED] said that [REDACTED] looked at her, before falling asleep on her chest. [REDACTED] said that she laid [REDACTED] on the bed, between her left-side and the father [REDACTED] who was lying on right-side on his back. [REDACTED] said when she woke up at around 6:15am [REDACTED] was lying on her back, head turned to the side and that when she tried to wake [REDACTED] that she noticed the dried blood on the left side of her face and she was not breathing. [REDACTED] said that she woke [REDACTED] and told him that [REDACTED] was not breathing.

[REDACTED] said that there was blood on the bed that appeared to have come from her nostrils. The bed was soiled with the fluid that came from [REDACTED] nose which appeared to be milk and blood mixed together. [REDACTED] said that she took the sleeper off of [REDACTED] attempted CPR on [REDACTED] with her in her hand and when she did the compressions the thick milk formula started coming out of her nose and mouth. [REDACTED] said that she called her mother and 911 to report that she was on her way to the hospital, because [REDACTED] was not breathing. [REDACTED] stated that she started rescue breathing and chest compressions on [REDACTED] [REDACTED] stated that she said, "[REDACTED] is not breathing where is the phone, she is not breathing". [REDACTED] stated that she immediately called the maternal grandmother, [REDACTED], who is an RN and teaches CPR and CNA's at [REDACTED] for help while the father got [REDACTED] (sibling) up from the bed. [REDACTED] stated that while performing CPR on [REDACTED] that a white, milky looking substance came from [REDACTED] nose and mouth and was mixed with the blood. [REDACTED] reports after she called the maternal grandmother that she called 911 and while on the phone with 911 the family (mother, father, sister and [REDACTED]) proceeded to the hospital.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

[REDACTED] gave a time line of the day before (07/08/15).
 [REDACTED] said that she woke up between 6:00am-7:00am to feed the baby and went back to sleep. [REDACTED] said that she woke up between 8:30am-9:30am to feed the baby and to send [REDACTED] off with [REDACTED] so he could take her to the [REDACTED] House.
 [REDACTED] said that she left her house between 11:30am-11:35am to go to her mother's house. She left [REDACTED] with her aunt [REDACTED] while she went to her hair appointment that was scheduled for 11:30am.
 [REDACTED] said after her hair appointment, she returned to her mother's to check on the baby, who was with [REDACTED] before leaving again, to check on if her car that was ready to be picked up at [REDACTED], but it wasn't.
 Between 2:00pm-3:00pm [REDACTED] returned to pick up baby and went home using her mother car. [REDACTED] was asleep in the car seat, so she put her in the bassinet.
 Her Landlord came to collect the rent and the baby was asleep the whole time.
 [REDACTED] said that she woke up [REDACTED] to feed and change her diaper, before she had to leave to pick up [REDACTED] at the [REDACTED] House before 5:00pm.

[REDACTED] said after she left the [REDACTED] House she returned to her mother's house to do [REDACTED] laundry. [REDACTED] was up during that time and fell asleep in the car on the way home. When she got home about 7:00pm, she cooked fish.

When [REDACTED] was asked about if [REDACTED] had any medical problem after being released from the hospital on 07/01/15, she said that [REDACTED] had problems with spit up coming from her nose. [REDACTED] said that [REDACTED] had a doctor's appointment on Monday (07/06/015) and the doctor told her that [REDACTED] was doing fine. The doctor told her to would saline drops in [REDACTED] nose to prevent her nose from drying up whenever she had to use the syringe on her nose. [REDACTED] said that she would have to use the syringe about 1-2 times a day, but the last time that she used it on [REDACTED] was about 10:00am after her 2nd feeding. [REDACTED] said that she could hear the congestion in [REDACTED] nose and would wipe the syringe on a receiving blanket (green, yellow, white stripe).

[REDACTED] added that [REDACTED] was born prematurely at 32 weeks (due 7/29/15) and was [REDACTED] days old [REDACTED] had preeclampsia). On 06/29/15 [REDACTED] was schedule to go home, but her stomach blew up so the doctor ordered to keep her in the hospital to monitor, test and chest X-ray her for "N.E.C." (Necrotizing Enterocolitis). [REDACTED] was allowed to go home on 07/01/2015.

On 07/09/15 at 11:41am Officer [REDACTED] (ME office), DCS Inv. [REDACTED] and Det. [REDACTED] met with [REDACTED] in a conference room at [REDACTED] Medical Center. [REDACTED] said that on the morning of 07/09/15 at about 4:00am, he was asleep, but woke up when [REDACTED] was feeding [REDACTED]. He said that [REDACTED] usually feeds the baby about every 2 hours and uses an alarm on her phone. He said that [REDACTED] feeds the baby breast milk and [REDACTED] formula. [REDACTED] said that he went back to sleep, at about 6:00am [REDACTED] woke him up and said that [REDACTED] was not breathing.

[REDACTED] said that he was sleeping on the right side; [REDACTED] was in the middle of him and [REDACTED] who was on the left side of their queen size bed. [REDACTED] said when he woke up his elbow touched a wet spot in the bed that appear to bed blood mixed with milk. [REDACTED] said that [REDACTED] was sitting up on the bed saying "the baby is not breathing." [REDACTED] said that he saw blood and milk mixed coming from [REDACTED] nose and mouth. [REDACTED] said that [REDACTED] was holding [REDACTED] and still performing CPR on [REDACTED]. [REDACTED] stated that [REDACTED] was on the phone with 911 while the family got in the truck and drove to the hospital ([REDACTED] Medical Center). [REDACTED] stated that she denied ambulance service because the house is approximately 2 blocks from the hospital and it was quicker to head on to the hospital. [REDACTED] stated that she advised 911 that the family was en-route to the hospital and wanted to alert the hospital as to their arrival.

[REDACTED] said that he was in shock, panic and grabbed his step-daughter [REDACTED] to go to the hospital.

[REDACTED] said that [REDACTED] usually props the baby up on one of their tempura bed pillows. He said that there is 4-5 tempura pillows on the bed. He said that the bed is a queen pillow top with a 3inch tempura mattress with a fitted sheet and orange comforter.

On 7/09/15 at 3:37pm DCS Inv. [REDACTED] and Det. [REDACTED] met with [REDACTED] at [REDACTED] Avenue (her sister's [REDACTED] home) [REDACTED] is [REDACTED] mother. [REDACTED] said that she is visiting



Tennessee Department of Children's Services
Case Recording Summary

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

[REDACTED] since 7/03/15 from [REDACTED].

[REDACTED] said that on Monday 7/06/15 she babysat for [REDACTED] and kept [REDACTED] after her doctor's appointment while [REDACTED] went to her WIC appointment at 1:00pm-3:30pm. [REDACTED] stated that this was the first time [REDACTED] was out of the home around any other people due to concerns regarding being in exposed to any substances that may cause illness. Ms. [REDACTED] did not observe any abnormal or concerning behaviors with [REDACTED] feeding and Diaper changes were normal.

[REDACTED] said on Tuesday 7/07/15 she kept [REDACTED] at about 11:45am for about 1 hour, while [REDACTED] went to her hair appointment.

[REDACTED] said during that time, she fed [REDACTED]. [REDACTED] said on Wednesday 7/08/15 [REDACTED] came to the residence to do her laundry. During that time [REDACTED] had 1 bag of baby clothes to wash. [REDACTED] said that the baby is fed every 2 hours, but she fed [REDACTED] 1 time (she ate well) and had 1 diaper change. [REDACTED] was very alert, looking around and hands reaching out. The alertness was significantly more that the previous days.

[REDACTED] said that she was aware of the fact that on Saturday (7/04/15) [REDACTED] had a problem with her body temperature dropping, so she put the baby's face on her chest, because her temperature was 97.7-97.97 degrees.

On 7/09/15 at 4:09pm DCS Inv. [REDACTED] conducted an interview with [REDACTED] said that she is 6 years old and will be in the 2nd grade at [REDACTED] Elementary School. [REDACTED] said that on yesterday 7/08/15, she woke up in her bedroom and her mother took her to the Boy's and Girl's club. Mom picked her up from the [REDACTED] Club and made fish for dinner, but step-dad was not there. [REDACTED] said before dinner she played with her baby sister in her momma's bedroom. [REDACTED] said that she held [REDACTED] hand and her momma put [REDACTED] beside her on the pillow (white square pillow). [REDACTED] said before dinner, they went to "Nanna (grandmother)" where mom was folding clothing at Nana's house she was playing with her cousins who were at the home. [REDACTED] then said she told her mother that she was hungry and the family left Ms. [REDACTED] home and went to the family home and her mother cooker fish for dinner. [REDACTED] then said that she took a shower and went to bed. The next morning, 07-09-2015, [REDACTED] said that her step father, [REDACTED], came into her room and woke her up and said they were going to the hospital because her sister is sick.

[REDACTED] reported that she lives in the home with her mother, sister, and step dad, she reported that she does good in school and likes going to the beauty shop with her mother and getting her hair fixed with braids.

Ms. [REDACTED] reported that she was present on 07-08-2015 at her home. Ms. [REDACTED] is visiting Ms. [REDACTED] home. Ms. [REDACTED] reported that [REDACTED] was alert and playing with her hands and more alert. Ms. [REDACTED] reported that this was noticeable due to [REDACTED] normal routine is "Eat, Burp, and Go to Sleep" Ms. [REDACTED] only concern is for the emotional well-being of Ms. [REDACTED] Birth Mother. This is reportedly due to Ms. [REDACTED] having her "tubes Tied" after the birth of [REDACTED] and now she will not be able to have any more children and she wanted her 2 girls.

Child was taken to the hospital at approximately 633am on 07-09-2015. Resuscitation efforts were continued at the hospital until approximately 656am (approximately 23 min) Infant pronounced deceased at 711am

Currently Law Enforcement is conducting an investigation in conjunction with Office of Child Safety. Detective [REDACTED] with [REDACTED] Police Major Crimes division and Detective [REDACTED] with Special Crimes are assigned to the investigation.

At this time there are no indications of any Maltreatment, abuse, or neglect. The other child in the home is 7 years old and made no disclosures of any maltreatment, abuse, or neglect either experienced or witnessed.

On 7/10/15 at 8:37am On 7/10/15 at 8:37am an autopsy was performed on [REDACTED] at The [REDACTED] County Medical Examiner's Office and DCS Inv. [REDACTED] Officer [REDACTED] and Det. [REDACTED] observed the autopsy by Dr. [REDACTED] Dr. [REDACTED] advised that there was no known trauma, child abuse, congenital, natural, birth defects, infections and currently pending are toxicology, cultures and micro results.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

CPIT/CLASSIFICATION

07/09/2015 at 09:15 am Child Protective Investigation Team (CPIT) was convened with [REDACTED] Det. [REDACTED]. It was determined that CPSI and [REDACTED] would interview all parties and observe the autopsy.

Those present at the CPIT team meeting were:

[REDACTED], LI
 [REDACTED] Supervisor
 [REDACTED] Supervisor
 a member of the DA's office
 Mr. [REDACTED], Juvenile Court Team Member
 [REDACTED], Mental Health Team Member
 [REDACTED], Child Advocacy Representative
 Dr. [REDACTED] Hospital
 [REDACTED], DCS Attorney

CLASSIFICATION:

Closing Summary: This case came to the attention of the Department on 07/09/15 with allegations of Infant Death for [REDACTED] (28 days). The alleged perpetrator is unknown. Upon further investigation it was determined that the infant death was not associated to any abuse or neglect of the infant. This case is closed as Allegations Unsubstantiated/Perpetrator Unsubstantiated.

740: A copy of the Classification and Summary will be submitted to TL [REDACTED] for review. Upon approval, a copy is then sent by TL [REDACTED] to the Juvenile Court Judge.

Policy states:

CHILD DEATH/ NEAR DEATH:

- 1) Any unexplained death of a child when the cause of death is unknown or pending an autopsy report.
- 2) Any child death caused by abuse resulting from direct action of the child's caretaker or the consequence of the child's caretaker's failure to stop another person's direct action that resulted in the death of a child. Child deaths are always treated as severe child abuse.
- 3) Any child death that is the result of the caretaker's failure to meet childcare responsibilities. Neglect death is always treated as severe child abuse.
- 4) Near Death - A serious or critical medical condition resulting from child abuse or child sexual abuse, as reported by a physician who has examined the child subsequent to the abuse.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 09/02/2015 Contact Method: Face To Face
 Contact Time: 09:00 AM Contact Duration:
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 09/10/2015
 Completed date: 09/10/2015 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): CPIT (Child Protective Investigative Team)
 Contact Sub Type:

Children Concerning

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/10/2015 09:33 AM Entered By: [REDACTED]

Those present at the CPIT team meeting were:

[REDACTED], LI
 [REDACTED] Supervisor
 [REDACTED] Supervisor
 a member of the DA's office
 [REDACTED], Juvenile Court Team Member
 [REDACTED], Mental Health Team Member
 [REDACTED], Child Advocacy Representative
 Dr [REDACTED] Hospital
 [REDACTED], DCS Attorney

CLASSIFICATION:

Closing Summary: This case came to the attention of the Department on 07/09/15with allegations of Infant Death for [REDACTED] ([REDACTED] days). The alleged perpetrator is unknown. Upon further investigation it was determined that the infant death was not associated to any abuse or neglect of the infant. This case is closed as Allegations Unsubstantiated/Perpetrator Unsubstantiated.

740: A copy of the Classification and Summary will be submitted to TL [REDACTED] for review. Upon approval, a copy is then sent by TL [REDACTED] to the Juvenile Court Judge.

Policy states:

CHILD DEATH/ NEAR DEATH:

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



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

always treated as severe child abuse.

4) Near Death - A serious or critical medical condition resulting from child abuse or child sexual abuse, as reported by a physician who has examined the child subsequent to the abuse.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	08/25/2015	Contact Method:	
Contact Time:	04:50 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	08/25/2015
Completed date:	08/25/2015	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: 08/25/2015 03:55 PM Entered By: [REDACTED]

LI [REDACTED] Along with Inv. [REDACTED] discussed this case on this date

Final autopsy was obtained today and the results were Accidental, no signs of abuse, toxicology was negative and no suspicion of maltreatment

The Autopsy will be uploaded into TFACTS

Family reported that they do not need any additional services from the Department.

Through the investigation, there has been no identifiable needs that the department would need to take any action steps.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	08/05/2015	Contact Method:	
Contact Time:	03:08 PM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	08/05/2015
Completed date:	08/05/2015	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: 08/05/2015 02:14 PM Entered By: [REDACTED]

Discussed this case on this date.

At this time The Department has not received any official documentation as to the cause of death. Although a verbal cause of death was said to be "natural causes" following the autopsy.

The other child in the home is safe and the department has no concerns with this child

Literature was given to the family, including the grandmother, regarding resources for grief counseling.

This case will remain open pending the results of the autopsy.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 07/10/2015 Contact Method: Face To Face
 Contact Time: 08:30 AM Contact Duration:
 Entered By: [REDACTED] Recorded For:
 Location: Other Community Site Created Date: 07/15/2015
 Completed date: 07/15/2015 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Collateral Contact,Medical Exam,Notation
 Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 07/15/2015 08:57 AM Entered By: [REDACTED],

On 7/10/15 at 8:37am an autopsy was preformed on [REDACTED] at The [REDACTED] County Medical Examiner's Office [REDACTED] DCS Inv. [REDACTED] Officer [REDACTED] and [REDACTED] observed the autopsy by Dr. [REDACTED] Dr. [REDACTED] advised that there was no known trauma, child abuse, congenital, natural, birth defects, infections and currently pending are toxicology, cultures and micro results.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 07/09/2015 Contact Method:
 Contact Time: 01:33 PM Contact Duration:
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 12/09/2015
 Completed date: 12/09/2015 Completed By: [REDACTED]
 Purpose(s): Permanency, Safety - Child/Community, Service Planning, Well Being
 Contact Type(s): Notation
 Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 12/09/2015 11:23 AM Entered By: [REDACTED]

CPSI completed the Safety assessment, the result is safe.

A copy of this assessment tool is located within the hard 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: 07/09/2015 Contact Method: Face To Face
 Contact Time: 09:15 AM Contact Duration:
 Entered By: [REDACTED] Recorded For:
 Location: Hospital Created Date: 07/15/2015
 Completed date: 07/15/2015 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,Medical Exam,Notation,Parent/Caretaker Interview,Sibling Interview/Observation
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/15/2015 08:47 AM Entered By: [REDACTED]

On 07/09/15 at about 9:09am Det [REDACTED] was contacted and notified of an unresponsive infant at [REDACTED] Medical Center at [REDACTED] Healthcare Emergency Room ([REDACTED]). CPSI [REDACTED] was assigned and responded to the ER, where Det. [REDACTED] and CPSI met with [REDACTED] Violent Crimes unit Inv. [REDACTED], Officer [REDACTED] and [REDACTED] (ME office). [REDACTED] VCU Inv. [REDACTED], SCU Inv. [REDACTED] and Officer [REDACTED] responded to the residence/crime scene at [REDACTED] with Crime Scene Tech [REDACTED] to process the scene. DCS central intake was notified and referral ([REDACTED] was made.

On 07/09/15 at 8:54am the Medical Examiner's Office reported that a deceased infant, [REDACTED] was brought to the [REDACTED] by her parents after they notified 911 at about 6:24am today. 911 received the call from the mother [REDACTED] stating that she was en route to the hospital, because [REDACTED] was not breathing. The family traveled in their car instead of ambulance because according to the family they were close enough to the hospital that they could already be at the hospital before the ambulance made it to the residence. There were not any known physical injuries at this time to [REDACTED]

On 07/09/15 at 9:09am Officer [REDACTED] (ME office), DCS Inv [REDACTED] and Det. [REDACTED] met with [REDACTED] in a conference room at [REDACTED] Medical Center. [REDACTED] said that she woke at approximately 4:00 am. [REDACTED] said that she is a light sleeper and heard [REDACTED] "Grunting." [REDACTED] was lying on her back in her bassinet. [REDACTED] was wearing a grey onesie with a pink sleeper (with penguin) and diaper. [REDACTED] said that the room was room temperature, but hot. She said that she tries to keep the room between 72-75 degrees as recommended due to [REDACTED] being a premie and unable to keep her body temperature regulated at this time.

[REDACTED] said that she [REDACTED] 45cc of a 2oz bottle of "[REDACTED]" (baby formula) and burped her. [REDACTED] said that [REDACTED] looked at her, before falling asleep on her chest. [REDACTED] said that she laid [REDACTED] on the bed, between her left-side and the father [REDACTED] who was lying on right-side on his back. [REDACTED] said when she woke up at around 6:15am [REDACTED] was lying on her back, head turned to the side and that when she tried to wake [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

that she noticed the dried blood on the left side of her face and she was not breathing. [REDACTED] said that she woke [REDACTED] and told him that [REDACTED] was not breathing.

[REDACTED] said that there was blood on the bed that appeared to have come from her nostrils. The bed was soiled with the fluid that came from [REDACTED] nose which appeared to be milk and blood mixed together. [REDACTED] said that she took the sleeper off of [REDACTED] attempted CPR on [REDACTED] with her in her hand and when she did the compressions the thick milk formula started coming out of her nose and mouth. [REDACTED] said that she called her mother and 911 to report that she was on her way to the hospital, because [REDACTED] was not breathing. [REDACTED] stated that she started rescue breathing and chest compressions on [REDACTED] [REDACTED] stated that she said, "[REDACTED] is not breathing where is the phone, she is not breathing". [REDACTED] stated that she immediately called the maternal grandmother, [REDACTED], who is an RN and teaches CPR and CNA's at [REDACTED] for help while the father got [REDACTED] (sibling) up from the bed. [REDACTED] stated that while performing CPR on [REDACTED] that a white, milky looking substance came from [REDACTED] nose and mouth and was mixed with the blood. [REDACTED] reports after she called the maternal grandmother that she called 911 and while on the phone with 911 the family (mother, father, sister and [REDACTED] proceeded to the hospital.

[REDACTED] gave a time line of the day before (07/08/15). [REDACTED] said that she woke up between 6:00am-7:00am to feed the baby and went back to sleep [REDACTED] said that she woke up between 8:30am-9:30am to feed the baby and to send [REDACTED] off with [REDACTED] so he could take her to the [REDACTED] [REDACTED] said that she left her house between 11:30am-11:35am to go to her mother's house. She left [REDACTED] with her aunt [REDACTED] while she went to her hair appointment that was scheduled for 11:30am. [REDACTED] said after her hair appointment, she returned to her mother's to check on the baby, who was with [REDACTED] before leaving again, to check on if her car that was ready to be picked up at [REDACTED], but it wasn't. Between 2:00pm-3:00pm [REDACTED] returned to pick up baby and went home using her mother car. [REDACTED] was asleep in the car seat, so she put her in the bassinet. Her Landlord came to collect the rent and the baby was asleep the whole time. [REDACTED] said that she woke up [REDACTED] to feed and change her diaper, before she had to leave to pick up [REDACTED] at the [REDACTED] [REDACTED] before 5:00pm.

[REDACTED] said after she left the [REDACTED] [REDACTED] she returned to her mother's house to do [REDACTED] laundry. [REDACTED] was up during that time and fell asleep in the car on the way home. When she got home about 7:00pm, she cooked fish.

When [REDACTED] was asked about if [REDACTED] had any medical problem after being released from the hospital on 07/01/15, she said that [REDACTED] had problems with spit up coming from her nose. [REDACTED] said that [REDACTED] had a doctor's appointment on Monday (07/06/15) and the doctor told her that [REDACTED] was doing fine. The doctor told her to would saline drops in [REDACTED] nose to prevent her nose from drying up whenever she had to use the syringe on her nose. [REDACTED] said that she would have to use the syringe about 1-2 times a day, but the last time that she used it on [REDACTED] was about 10:00am after her 2nd feeding. [REDACTED] said that she could hear the congestion in [REDACTED] nose and would wipe the syringe on a receiving blanket (green, yellow, white stripe).

[REDACTED] added that [REDACTED] was born prematurely at 32 weeks (due 7/29/15) and was [REDACTED] days old [REDACTED] had preeclampsia). On 06/29/15 [REDACTED] was schedule to go home, but her stomach blew up so the doctor ordered to keep her in the hospital to monitor, test and chest X-ray her for "N.E.C." (Necrotizing Enterocolitis). [REDACTED] was allowed to go home on 07/01/2015.

On 07/09/15 at 11:41am Officer [REDACTED] (ME office), DCS Inv. [REDACTED] and Det. [REDACTED] met with [REDACTED] in a conference room at [REDACTED] Medical Center. [REDACTED] that on the morning of 07/09/15 at about 4:00am, he was asleep, but woke up when [REDACTED] was feeding [REDACTED]. He said that [REDACTED] usually feeds the baby about every 2 hours and uses an alarm on her phone. He said that [REDACTED] feeds the baby breast milk and [REDACTED] formula. [REDACTED] said that he went back to sleep, at about 6:00am [REDACTED] woke him up and said that [REDACTED] was not breathing.

[REDACTED] said that he was sleeping on the right side; [REDACTED] was in the middle of him and [REDACTED] who was on the left side of their queen size bed. [REDACTED] said when he woke up his elbow touched a wet spot in the bed that appear to bed blood mixed with milk. [REDACTED] said that [REDACTED] was sitting up on the bed saying "the baby is not breathing." [REDACTED] said that he saw blood and milk mixed coming from [REDACTED] nose and mouth. [REDACTED] said that [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

was holding [REDACTED] and still performing CPR on [REDACTED] stated that [REDACTED] was on the phone with 911 while the family got in the truck and drove to the hospital ([REDACTED] Medical Center). [REDACTED] stated that she denied ambulance service because the house is approximately 2 blocks from the hospital and it was quicker to head on to the hospital. [REDACTED] stated that she advised 911 that the family was en-route to the hospital and wanted to alert the hospital as to their arrival.

[REDACTED] said that he was in shock, panic and grabbed his step-daughter [REDACTED] to go to the hospital.

[REDACTED] said that [REDACTED] usually props the baby up on one of their tempura bed pillows. He said that there is 4-5 tempura pillows on the bed. He said that the bed is a queen pillow top with a 3inch tempura mattress with a fitted sheet and orange comforter.

On 7/09/15 at 3:37pm DCS Inv. [REDACTED] and Det [REDACTED] met with [REDACTED] at [REDACTED] Avenue (her sister's [REDACTED] home) [REDACTED] is [REDACTED] mother. [REDACTED] said that she is visiting [REDACTED] since 7/03/15 from [REDACTED]

[REDACTED] said that on Monday 7/06/15 she babysat for [REDACTED] and kept [REDACTED] after her doctor's appointment while [REDACTED] went to her WIC appointment at 1:00pm-3:30pm. [REDACTED] stated that this was the first time [REDACTED] was out of the home around any other people due to concerns regarding being in exposed to any substances that may cause illness. Ms. [REDACTED] did not observe any abnormal or concerning behaviors with [REDACTED] feeding and Diaper changes were normal.

[REDACTED] said on Tuesday 7/07/15 she kept [REDACTED] at about 11:45am for about 1 hour, while [REDACTED] went to her hair appointment.

[REDACTED] said during that time, she fed [REDACTED] [REDACTED] said on Wednesday 7/08/15 [REDACTED] came to the residence to do her laundry. During that time [REDACTED] had 1 bag of baby clothes to wash. [REDACTED] said that the baby is fed every 2 hours, but she fed [REDACTED] 1 time (she ate well) and had 1 diaper change. [REDACTED] was very alert, looking around and hands reaching out. The alertness was significantly more that the previous days.

[REDACTED] said that she was aware of the fact that on Saturday (7/04/15) [REDACTED] had a problem with her body temperature dropping, so she put the baby's face on her chest, because her temperature was 97.7-97.97 degrees.

On 7/09/15 at 4:09pm DCS Inv [REDACTED] conducted an interview with [REDACTED] said that she is 6 years old and will be in the 2nd grade at [REDACTED] Elementary School. [REDACTED] said that on yesterday 7/08/15, she woke up in her bedroom and her mother took her to the Boy's and Girl's club. Mom picked her up from the B&G Club and made fish for dinner, but step-dad was not there. [REDACTED] said before dinner she played with her baby sister in her momma's bedroom. [REDACTED] said that she held [REDACTED] hand and her momma put [REDACTED] beside her on the pillow (white square pillow). [REDACTED] said before dinner, they went to "Nanna (grandmother)" where mom was folding clothing at Nana's house she was playing with her cousins who were at the home. [REDACTED] then said she told her mother that she was hungry and the family left Ms. [REDACTED] home and went to the family home and her mother cooker fish for dinner. [REDACTED] then said that she took a shower and went to bed. The next morning, 07-09-2015, [REDACTED] said that her step father [REDACTED], came into her room and woke her up and said they were going to the hospital because her sister is sick.

[REDACTED] reported that she lives in the home with her mother, sister, and step dad, she reported that she does good in school and likes going to the beauty shop with her mother and getting her hair fixed with braids.

Narrative Type: Addendum 2 Entry Date/Time: 07/15/2015 08:53 AM Entered By: [REDACTED]

Child was taken to the hospital at approximately 633am on 07-09-2015. Resuscitation efforts were continued at the hospital until approximately 656am (approximately 23 min) Infant pronounced deceased at 711am

Currently Law Enforcement is conducting an investigation in conjunction with Office of Child Safety. Detective [REDACTED] with [REDACTED] Police Major Crimes division and Detective [REDACTED] with Special Crimes are assigned to the Investigation.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

At this time there are no indications of any Maltreatment, abuse, or neglect. The other child in the home is 7 years old and made no disclosures of any maltreatment, abuse, or neglect either experienced or witnessed.

Narrative Type: Addendum 1 Entry Date/Time: 07/15/2015 08:52 AM Entered By: [REDACTED]

Ms. [REDACTED] reported that she was present on 07-08-2015 at her home. Ms. [REDACTED] is visiting Ms. [REDACTED] home. Ms. [REDACTED] reported that [REDACTED] was alert and playing with her hands and more alert. Ms. [REDACTED] reported that this was noticeable due to [REDACTED] normal routine is "Eat, Burp, and Go to Sleep" Ms. [REDACTED] only concern is for the emotional well-being of Ms. [REDACTED] Birth Mother. This is reportedly due to Ms. [REDACTED] having her "tubes Tied" after the birth of [REDACTED] and now she will not be able to have any more children and she wanted her 2 girls.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]
 Case Status: Close

Case Name: [REDACTED]
 Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 07/09/2015 Contact Method: Face To Face
 Contact Time: 09:05 AM Contact Duration:
 Entered By: [REDACTED] Recorded For:
 Location: Hospital Created Date: 07/15/2015
 Completed date: 07/15/2015 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: 07/15/2015 08:45 AM Entered By: [REDACTED],
 07/09/2015 at 09:15 apm Child Protective Investigation Team (CPIT) was convened with [REDACTED] Det. [REDACTED]. It was
 determined that CPSI and [REDACTED] would interview all parties and observe the 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: 07/09/2015 Contact Method:
Contact Time: 09:00 AM Contact Duration:
Entered By: [REDACTED] Recorded For:
Location: DCS Office Created Date: 07/15/2015
Completed date: 07/15/2015 Completed By: [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
Contact Type(s): Case Summary
Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 07/15/2015 08:43 AM Entered By: [REDACTED]
FAMILY COMPOSITION:

Child: [REDACTED] DOB: [REDACTED] DOD: 07/09/2015
Child: [REDACTED] DOB: [REDACTED]
Mother: [REDACTED] DOB: [REDACTED] SSN: [REDACTED]
Birth Father: [REDACTED] DOB: [REDACTED] SSN: [REDACTED]
Addresses: [REDACTED]
Phone: [REDACTED]

REFERRAL AND REFERENT:

The reporter states that [REDACTED] ([REDACTED] days,deceased) lived with her mother, [REDACTED] (25) and father, [REDACTED] (26). Also in the home is her sister, [REDACTED] (6).

At 6:24AM today 911 received a call from the mother that she was en route to the hospital because [REDACTED] was not breathing. The family traveled in their car instead of ambulance because they said they were closer to the hospital. There are not any known physical injuries at this time to [REDACTED]

The mother reported that she woke at 4am and fed and burped [REDACTED]. She laid [REDACTED] in the bed between her and the father. The mother said when she woke up at around 6:15am [REDACTED] was not breathing. The baby had dried blood on her face coming from her nostrils. The bed was soiled with the fluid was coming from [REDACTED] nose. The fluid appeared to be milk and blood mixed together. The mother attempted CPR on [REDACTED]. The autopsy for [REDACTED] is pending for tomorrow morning. [REDACTED] was pronounced deceased at 8:54AM this morning at [REDACTED] Hospital. It is unknown if the injuries are consistent with the explanation because the reporter is not medical personnel.

[REDACTED] sibling, [REDACTED] is currently at the hospital with the mother and family. It is unknown if there are other family members to care for [REDACTED]. The reporter did not witness the home environment, but it was witnessed by law enforcement. The reporter was told that the home was clean and there were no known hazards noted. There have



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Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

not been any other previous instances of a child in the home dying or suffering injuries. DCS has not been involved with the family and there are not any known patterns of neglect in the home. It is unknown at this time if anyone in the family has history with police. The reporter has not been in the home prior to the death.

[REDACTED] County DCS worker [REDACTED] is on the scene and has responded to this incident.

CASE ASSIGNMENT:

This case came to the attention of the Department on 07/09/2015 and was assigned to CPSI [REDACTED] on 07/09/2015 as a P1. Severe Abuse Notification is made to the District Attorney's Office by DCS secretarial staff. Notification is made monthly to the Juvenile Court Judge (by DCS secretarial staff) as requested per Juvenile Court Judge [REDACTED]



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Assessment

Family Name: [REDACTED]

TN DCS Intake ID #: [REDACTED]

County: [REDACTED]

Worker:

Date of Referral: 7/9/15 1:33 PM

Date of Assessment: 7/9/15 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.



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SDM™ Safety Assessment

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

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

Section 2: Safety Interventions

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

Non-Protective Custody Interventions:

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

Protective Custody Interventions:

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



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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: _____