



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

Intake

Intake ID: [REDACTED]
Intake Taken By: [REDACTED] Intake Date/Time: 06/02/2013 06:50 AM CT
Track Assigned: Investigation Priority Assigned: 1
Screened By: [REDACTED]
Date Screened: 06/02/2013

Investigation

Investigation ID: [REDACTED]
First County/Region: [REDACTED]
Date/Time Assigned : 06/03/2013 10:31 AM
First Team Leader Assigned: [REDACTED] Date/Time 06/02/2013 12:00 AM
First Case Manager [REDACTED] Date/Time 06/02/2013 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	0 Yrs	Neglect Death	Yes	Unknown Participant [REDACTED] Unknown	None

Referent(s)

Referent Name: [REDACTED] Role to Alleged Victim(s): [REDACTED]

Referent Address:

Referent Phone Number:

Type of Contact: I-3 Phone

Notification: None

Narrative: TFACTS: No History Found

Open Court Custody/FSS/FCIP: None found

Prior INV/ASMT of Abuse: None found
Prior INV/ASMT of Neglect: None found

Screen Out: None found

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



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

Note: All address information is located under the oldest child victims name

Reporters name/relationship: [REDACTED]

Reporter states [REDACTED] (1 month, 7days) resided with her mother, [REDACTED], and her father, [REDACTED]. The mother has two other children, [REDACTED] (age 6) and [REDACTED] (age 7) who are currently visiting their father for the summer.

[REDACTED] was transported to [REDACTED] on June 2, 2013, around 4:30 A.M. because she was not breathing.

The mother reported that [REDACTED] woke up between 12:00 and 12:30 A.M. this morning. The mother fed [REDACTED] a bottle and then played with her. The mother put [REDACTED] back in her bassinet. [REDACTED] got real fussy so the mother put her in bed with her. The mother woke up around 4:00 A.M. The mother said she noticed [REDACTED] head was turned to the side and noticed one of her eyes looked funny. [REDACTED] did not seem to be breathing well. The mother dialed 911 and screamed for the child's father. The mother said the father started CPR. Officers arrived and took over CPR. EMS arrived and continued CPR and transported [REDACTED] to the hospital.

Officers transported the parents to the hospital in the police car. CPR was performed by doctors on [REDACTED] when she arrived to the hospital. [REDACTED] passed away at 4:58 A.M. on June 2, 2013.

No bruising or injuries were noted as being seen on [REDACTED]. [REDACTED] was born 10 weeks early according to the parents. The parents said [REDACTED] was discharged from [REDACTED] Hospital on May 31, 2013. The parents said [REDACTED] was not sent home with any supportive needs. The mother said she was supposed to follow up with [REDACTED] pediatrician this coming Monday, 6-3-13.

An Officer reported the father had one child who died from SIDS; however, the officer did not say when that happened. That child's name is not known.

The Youth Service Division detectives are currently interviewing the parents. The medical examiner investigator is at the hospital as well. The officers are requesting the immediate assistance of a CPS worker due to the death of [REDACTED].

The mother's sister, [REDACTED], is at the hospital. [REDACTED] can be reached at [REDACTED].

This is all the information the reporter had to report at this time.

Per SDM: Investigative Track/Priority 1 - [REDACTED] CM 3 on 6-2-13 at 7:38 A.M.

[REDACTED] County paged at 7:38 A.M. Event [07]Group Started ([REDACTED]), Status: [07]Group Started, [REDACTED]

[REDACTED] on call supervisor for [REDACTED] County responded at 7:49 A.M. on 06/02/2013. [REDACTED], CM2

Child Fatality Group and Child Fatality Notification EI DCS Group notified. Email sent to: [REDACTED]
[REDACTED]
[REDACTED]



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

Participant(s)

Name: [REDACTED]

Gender: Male

Date of Birth:

Participant ID: [REDACTED]

SSN:

Race: Black/African

Age:

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Name: [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN:

Race: Unable to

Age: 0 Yrs

Address: [REDACTED]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

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:

Partipant ID: [REDACTED]

SSN:

Race: White

Age:

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

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

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: Race: Age: 7 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: Race: Age: 6 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

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: 06/02/2013

Assignment Date: 06/02/2013

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]	Neglect Death	Unknown Participant [REDACTED]	[REDACTED]	Allegation Unfounded / Perpetrator Unfounded	Yes	[REDACTED] 09/30/2013

C. Disposition Decision

Disposition Decision:

Comments:

D. Case Workers

Case Worker: [REDACTED]

Date: 10/02/2013

Team Leader: [REDACTED]

Date: 10/02/2013

E. Investigation Summary

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

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

The infant child [REDACTED] (DOB: [REDACTED]) was deceased (6/2/2013) prior to the investigation with Children Protective Services.

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

6/2/2013

[REDACTED] stated that her daughter 1 month old [REDACTED] was born 2 1/2 months early. She stated that she remained in [REDACTED] hospital for a month. She stated that [REDACTED] was released from the hospital to go home on Friday May 31, 2013. She stated that the family went home from the hospital. [REDACTED] stated on Saturday June 1, 2013 she and [REDACTED] visited the child's maternal grandmother [REDACTED]. She stated from her mother's home they visited with [REDACTED] brother at his home, a friend at [REDACTED] and then with paternal cousin at his home. She stated while at the park, [REDACTED] choking on some mucus. [REDACTED] stated it appeared that [REDACTED] had a hard time breathing. She stated that [REDACTED] suctioned [REDACTED] mouth.

She stated that the family arrived home between 8:30 p.m and 9:00 p.m. she stated that she fed and changed the baby's diaper and put her down to sleep in the bassinet around 9:45 p.m.. She stated that [REDACTED] woke up around midnight for her feeding. She stated that she changed her clothes and fed her. She stated at this feeding [REDACTED] didn't drink all of her milk. She stated that she swaddled her in her blanket and laid her down



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

Case Name : ██████████

Investigation ID: ██████████

in the bassinet between 12:30 a.m. and 1:00 a.m. She stated that ██████████ to was making a grunting sound and appeared not to be very comfortable. She stated that she picked her up and swaddled her tightly. She stated that she laid her on her back in between she and ██████████. ██████████ stated that she woke up to check on the baby but can't remember what time. She stated that she remembers the police saying that ██████████ dies around 4:00 a.m. She stated that she picked ██████████ up and kissed her on the forehead. She stated that she unswaddled her and noticed that her head was cold and she was unresponsive. She stated that she panicked and was screaming. She stated that ██████████ had waken up and he took ██████████ from her and began CPR while she called 911.

██████████ stated that she has no history with the department. She stated that there is no history of domestic violence between her and ██████████. She stated she nor her children have any medical conditions. No one in the household takes any medication. She stated that she has no criminal history. She stated that she is a State employee who works at a correctional facility. She does not have any history of mental health disease. She has no history of drug abuse. ██████████ agreed to a drug screen and passed

6/2/2013

██████████ stated that ██████████ was released from the hospital on Friday May 31, 2013. He stated that the family went home from the hospital. He stated that on Saturday the family visted with several family and friends. He stated that he went to see his brother, went to ██████████ to see a friend and his cousin before the family returned home. He stated that nothing out of the ordinary happened while the family was out. He stated that they arrived home around 8:00 p.

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

There is no alleged perpetrator in this case. The autopsy report is pending

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

6/2/2013

██████████ (1 month, 7days) resided with her mother, ██████████, and her father, ██████████. The mother has two other children, ██████████ (age 6) and ██████████ (age 7) who are currently visiting their father for the summer.

██████████ was transported to ██████████ Hospital on June 2, 2013, around 4:30 A.M. because she was not breathing.

The mother reported that ██████████ woke up between 12:00 and 12:30 A.M. this morning. The mother fed ██████████ a bottle and then played with her. The mother put ██████████ back in her bassinet. ██████████ got real fussy so the mother put her in bed with her. The mother woke up around 4:00 A.M. The mother said she noticed ██████████ head was turned to the side and noticed one of her eyes looked funny. ██████████ did not seem to be breathing well. The mother dialed 911 and screamed for the childs father. The mother said the father started CPR. Officers arrived and took over CPR. EMS arrived and continued CPR and transported ██████████ to the hospital.

Officers transported the parents to the hospital in the police car. CPR was performed by doctors on ██████████ when she arrived to the hospital. ██████████ passed away at 4:58 A.M. on June 2, 2013.

No bruising or injuries were noted as being seen on ██████████. ██████████ was born 10 weeks early according to the parents. The parents said ██████████ was discharged from ██████████ Hospital on May 31, 2013. The parents said ██████████ was not sent home with any supportive needs. The mother said she was supposed to follow up with ██████████ pediatrician this coming Monday, 6-3-13.

An Officer reported the father had one child who died from SIDS; however, the officer did not say when that happened. That child's name is not known.



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

Case Name : ██████████

Investigation ID: ██████████

The Youth Service Division detectives are currently interviewing the parents. The medical examiner investigator is at the hospital as well. The officers are requesting the immediate assistance of a CPS worker due to the death of ██████████

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

6/7/2013

CPSI arrived to the medical examiners office with TC ██████████, Detective ██████████ and her supervisor Sargent ██████████.

The medical examiner informed the team that the infant ██████████ had a lateral rib fracture that was more than likely caused by the father ██████████ performing CPR to the chest with 3 fingers and then the response unit performing CPR with 2 fingers. The medical examiner stated that during the ambulance ride it is possible that they used their hands to perform CPR. There were no other injuries noted. The toxicology report will provide more information once it comes back.

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



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 10/03/2013

Contact Method:

Contact Time: 03:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 10/03/2013

Completed date: 10/03/2013

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 10/03/2013 03:06 PM Entered By: [REDACTED]

Case is being closed on this date as AUPU. Case was reviewed by RID [REDACTED]. Case is pending final autopsy results.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/21/2013

Contact Method:

Contact Time: 02:03 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/21/2013

Completed date: 09/21/2013

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: 09/21/2013 02:04 PM Entered By: [REDACTED]

CPSI requested medical records from [REDACTED] and [REDACTED] Hospital



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/21/2013

Contact Method:

Contact Time: 01:37 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/21/2013

Completed date: 09/21/2013

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: 09/21/2013 01:39 PM Entered By: [REDACTED]

Mandatory Statement for Case Recordings

"Daily notice of referral pursuant to TCA 37-105 sent to Juvenile Court and Law Enforcement as applicable per local protocol."

CM recd referral as a P1 Neglect Death

TNKids history checked/prior referrals researched and attached to case file.

Family has no history with DCS.

TFACTS: No History Found

Open Court Custody/FSS/FCIP: None found

Prior INV/ASMT of Abuse: None found

Prior INV/ASMT of Neglect: None found

Screen Out: None found

Current referral states:

Reporter states [REDACTED] (1 month, 7days) resided with her mother, [REDACTED], and her father, [REDACTED]. The mother has two other children, [REDACTED] (age 6) and [REDACTED] (age 7) who are currently visiting their father for the summer.

[REDACTED] was transported to [REDACTED] Hospital on June 2, 2013, around 4:30 A.M. because she was not breathing.

The mother reported that [REDACTED] woke up between 12:00 and 12:30 A.M. this morning. The mother fed [REDACTED] a bottle and then played with her. The mother put [REDACTED] back in her bassinnet. [REDACTED] got real fussy so the mother



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

put her in bed with her. The mother woke up around 4:00 A.M. The mother said she noticed [REDACTED] head was turned to the side and noticed one of her eyes looked funny. [REDACTED] did not seem to be breathing well. The mother dialed 911 and screamed for the child's father. The mother said the father started CPR. Officers arrived and took over CPR. EMS arrived and continued CPR and transported [REDACTED] to the hospital.

Officers transported the parents to the hospital in the police car. CPR was performed by doctors on [REDACTED] when she arrived to the hospital. [REDACTED] passed away at 4:58 A.M. on June 2, 2013.

No bruising or injuries were noted as being seen on [REDACTED]. [REDACTED] was born 10 weeks early according to the parents. The parents said [REDACTED] was discharged from [REDACTED] Hospital on May 31, 2013. The parents said [REDACTED] was not sent home with any supportive needs. The mother said she was supposed to follow up with [REDACTED] pediatrician this coming Monday, 6-3-13.

An Officer reported the father had one child who died from SIDS; however, the officer did not say when that happened. That child's name is not known.

The Youth Service Division detectives are currently interviewing the parents. The medical examiner investigator is at the hospital as well. The officers are requesting the immediate assistance of a CPS worker due to the death of [REDACTED].

Plan of action: Confer with supervisor, research TNKids/ case file history & attach to file. Interview/observe victim & sibling, interview collaterals & referent, home/school visit, confer with assigned detective, discuss/obtain signatures on HIPAA & authorization forms, Native American Indian/ Hispanic heritage inquiry. Convene CPIT and Schedule Forensic / Our Kids Exam. Background checks will be requested.

Clients Rights Handbook, HIPAA Notice of Privacy Practices - Client Acknowledgment, HIPAA Authorization for Release of Protected Health Information, Notification of Equal Access to programs and Services and Grievance Procedures, Native American Heritage Veto Verification, Authorization for Release of Information and HIPAA Protected Health Information

Case Summary: The mother admitted to co-sleeping with daughter [REDACTED]. [REDACTED] stated that he wasn't aware that [REDACTED] was in the bed until [REDACTED] observed the infant unresponsive and she started to scream. [REDACTED] performed CPR on the infant child until paramedics arrived.

The medical examiner stated the infant [REDACTED] had a lateral rib fracture that was more than likely caused by the father [REDACTED] performing CPR to the chest with 3 fingers and then the response unit performing CPR with 2 fingers. The medical examiner stated that during the ambulance ride it is possible that they used their hands to perform CPR. There were no other injuries noted. The toxicology report will provide more information once it comes back.

CM will request to close case as follows: AUPU
Pending the autopsy report

Victim was deceased prior to the investigation.

Counseling services and contacts were provided to the family.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

CPIT convened /staffed.

Medical records: Requested 9/21/2013

All Parties interviewed. Parents agree to protect.

Home/school visits completed.

Background checks requested/ attached to file.

Case will be submitted for closure immediately on 9/21/13



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/19/2013

Contact Method: Phone Call

Contact Time: 03:30 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/21/2013

Completed date: 09/21/2013

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]; [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/21/2013 12:27 PM Entered By: [REDACTED]

CPSI spoke with [REDACTED] by phone. CPSI asked how she had been doing since the loss of her daughter, [REDACTED]. [REDACTED] stated that she has been taking it one day at a time. She stated she has been struggling since she lost her job. She stated that she lost her job with the Department of corrections because she wasn't supposed to be dating a felon that is currently on parole. She stated that [REDACTED] was never an inmate where she was working so she didn't know that she still had to report to her superiors. She stated to make a long story short her boss gave her the option to resign or to get fired and she resigned. She stated now she has been trying to get on with the Sheriff's Department. She stated that [REDACTED] is working at a trash company. She stated that she has spoken with her children and has tried to be as truthful with them as she can. CPSI informed [REDACTED] that CPSI did see the children at school on today. She stated the children are aware of why she lost her job. She stated that she has told them that mommy may not be able to get those extra things that they were able to get when she was working. She stated that she is concerned about [REDACTED]. She stated that she feels that he may need some counseling. She stated before [REDACTED] passed away [REDACTED] was excited about life and now he doesn't really care about anything. She stated that she has seen a big change in him. She asked that CPSI provide some contacts for counseling. She stated since she resigned from her job she doesn't have insurance and the children are now on TNCare. CPSI informed [REDACTED] that some resources would be made available for her and her family.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/19/2013

Contact Method: Attempted Phone Call

Contact Time: 03:15 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/21/2013

Completed date: 09/21/2013

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]; [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/21/2013 12:31 PM Entered By: [REDACTED]

[REDACTED] and [REDACTED] left messages for CPSI with there new contact information [REDACTED]).



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 09/19/2013 Contact Method: Attempted Face To Face
 Contact Time: 02:33 PM Contact Duration: Less than 05
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 09/21/2013
 Completed date: 09/21/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Parent/Caretaker Interview
 Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]; [REDACTED]; [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/21/2013 12:09 PM Entered By: [REDACTED]

CPSI went by the home of [REDACTED] and [REDACTED] for a follow up home visit at [REDACTED].
 There was no one home. CPSI left a card with contact information.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/19/2013

Contact Method: Face To Face

Contact Time: 02:15 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: School

Created Date: 09/21/2013

Completed date: 09/21/2013

Completed By: [REDACTED]

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

Contact Type(s): Sibling Interview/Observation

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]; [REDACTED]; [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/21/2013 12:06 PM Entered By: [REDACTED]

CPSI spoke with [REDACTED] and [REDACTED] at [REDACTED] Elementary School. CPSI spoke to the children together. [REDACTED] is the more outspoken of the two.

To better engage with [REDACTED] CPSI asked [REDACTED] who lived in the home. CPSI felt that asking [REDACTED] the first question would allow him to be more receptive to speak. [REDACTED] stated that his mother, [REDACTED] (moms boyfriend), his brother [REDACTED] and himself. [REDACTED] stated the family also has a dog.

CPSI asked both boys if they have a sister. [REDACTED] stated that they had a sister named [REDACTED] but she died. He stated that when his sister died he and [REDACTED] were at their father's house in [REDACTED] for the summer. He stated that he and his brother [REDACTED] didn't go to their sisters funeral. He stated that he and his brother came back to [REDACTED] days before school started. CPSI asked how where things at home when they got back. [REDACTED] stated that his mother lost her job because [REDACTED] had been in jail before. He stated that his mom is trying to get a job with the Sherriffs Department. [REDACTED] stated that [REDACTED] works at a trash company. CPSI asked [REDACTED] and [REDACTED] if they had any question for CPSI. Neither [REDACTED] nor [REDACTED] had any questions. CPSI observed the boys to be very handsome and neatly dressed in school attire. There were no safety concerns. There were no visible marks or bruises to the children.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/18/2013

Contact Method: Attempted Phone Call

Contact Time: 03:46 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/21/2013

Completed date: 09/21/2013

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]; [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/21/2013 01:37 PM Entered By: [REDACTED]

CPSI attempted to contact both [REDACTED] and [REDACTED] by phone ([REDACTED] / [REDACTED]) but there numbers have been disconnected.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/20/2013

Contact Method:

Contact Time: 02:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/05/2013

Completed date: 09/05/2013

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/05/2013 02:57 PM Entered By: [REDACTED]

Case conference was held on this date by TL [REDACTED] and CPSA [REDACTED].



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/05/2013

Contact Method: Attempted Phone Call

Contact Time: 11:12 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/21/2013

Completed date: 09/21/2013

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/21/2013 12:40 PM Entered By: [REDACTED]

CPSI attempted to contact [REDACTED] by phone [REDACTED] but the phone had been disconnected.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 08/05/2013

Contact Method: Attempted Phone Call

Contact Time: 11:11 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/21/2013

Completed date: 09/21/2013

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]; [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/21/2013 12:38 PM Entered By: [REDACTED]

CPSI attempted to contact [REDACTED] by phone [REDACTED] but the number had been disconnected.



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: 06/11/2013

Contact Method: Phone Call

Contact Time: 03:17 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/21/2013

Completed date: 09/21/2013

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]; [REDACTED]; [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/21/2013 01:26 PM Entered By: [REDACTED]

CPSI spoke with [REDACTED] by phone. She informed CPSI that [REDACTED] funeral was on 6/8/13. She stated that her job paid for the funeral. [REDACTED] and [REDACTED] wanted an update of the case. CPSI informed the parents that the Department was awaiting the autopsy report and the case will remain open until then.

CPSI asked [REDACTED] if the [REDACTED] and [REDACTED] were present for the funeral. She stated that she and [REDACTED] both decided it would be best that they not be in attendance. She stated that the boys were still in [REDACTED] with their father.



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:	06/09/2013	Contact Method:	Attempted Phone Call
Contact Time:	01:11 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	09/21/2013
Completed date:	09/21/2013	Completed By:	[REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning**Participant(s)**

[REDACTED]; [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/21/2013 01:22 PM Entered By: [REDACTED]
 CPSI received a voice mail from [REDACTED] asking to return the call at [REDACTED] for an update of the case.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 06/07/2013

Contact Method: Face To Face

Contact Time: 01:15 PM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location: Other Caretaker Home

Created Date: 09/21/2013

Completed date: 09/21/2013

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/21/2013 01:18 PM Entered By: [REDACTED]

CPSI arrived to the medical examiners office with TC [REDACTED], Detective [REDACTED] and her supervisor Sargent [REDACTED].

The medical examiner informed the team that the infant [REDACTED] had a lateral rib fracture that was more than likely caused by the father [REDACTED] performing CPR to the chest with 3 fingers and then the response unit performing CPR with 2 fingers. The medical examiner stated that during the ambulance ride it is possible that they used their hands to perform CPR. There were no other injuries noted. The toxicology report will provide more information once it comes back.



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: 06/04/2013

Contact Method:

Contact Time: 10:56 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/19/2013

Completed date: 06/19/2013

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: 06/19/2013 08:52 AM Entered By: [REDACTED]

TC [REDACTED] sent CPSI an email wanting to be notified of when CPSI is scheduled to meet with Detectives and the medical examiner.

Narrative Type: Addendum 1 Entry Date/Time: 06/19/2013 09:02 AM Entered By: [REDACTED]

CPSI was notified shortly after CPSI and TC corresponded through email that the medical examiners meeting will take place on Friday at 1:00 p.m. TC [REDACTED] replied and said that she would be present on Friday.



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: 06/03/2013

Contact Method: Attempted Phone Call

Contact Time: 04:14 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/21/2013

Completed date: 09/21/2013

Completed By: [REDACTED]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/21/2013 12:36 PM Entered By: [REDACTED]

CPSI called [REDACTED]. There was no answer. CPSI left a message checking on [REDACTED] and to see if she needed anything from the Deaprtment. CPSI left contact information.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 06/03/2013

Contact Method:

Contact Time: 12:04 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/19/2013

Completed date: 06/19/2013

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: 06/19/2013 08:50 AM Entered By: [REDACTED]

CPSI received a revised copy of the fatality form from TL [REDACTED] to be submitted to central office.



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: 06/03/2013

Contact Method: Phone Call

Contact Time: 12:02 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/03/2013

Completed date: 06/03/2013

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/03/2013 05:29 PM Entered By: [REDACTED]

Detective [REDACTED] contacted CPSI [REDACTED] by phone and stated that the autopsy was just completed and it was reported that there was no trauma to the child except for the bruising of the infants chest from CPR.



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: 06/02/2013

Contact Method: Face To Face

Contact Time: 12:01 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 06/03/2013

Completed date: 06/03/2013

Completed By: [REDACTED]

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

Contact Type(s): Sibling Interview/Observation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 06/03/2013 05:09 PM Entered By: [REDACTED]

[REDACTED] ([REDACTED] office number) is the CPSI worker in [REDACTED] who was on call this weekend for [REDACTED] County, [REDACTED]. He sent the sheriff's department to [REDACTED] home do complete a welfare check and they saw the boys and confirmed that they were going to be in [REDACTED] care for the duration of the summer.

There were no reported concerns of the children.

Narrative Type: Addendum 1 Entry Date/Time: 06/19/2013 09:19 AM Entered By: [REDACTED]

CPSA [REDACTED] spoke to the father by phone. She stated that it appeared that she may have woken [REDACTED] --he works nights which is probably why he didnt answer for [REDACTED]. CPSA got contact information for [REDACTED]; [REDACTED] (he can't remember the zip) [REDACTED] County. CPSA called [REDACTED] CPS to request a courtesy. CPSA explained to [REDACTED] briefly about the CPS case here in TN. CPSA explained that the case involved the [REDACTED] baby but did not give ANY details about why. CPSA told him to contact the mother to ask her what was going on.

[REDACTED] said he has his 2 boys for the remainder of the summer.



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: 06/02/2013

Contact Method: Face To Face

Contact Time: 10:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 09/21/2013

Completed date: 09/21/2013

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/21/2013 12:51 PM Entered By: [REDACTED]

CPSI spoke with [REDACTED] who is the sister of [REDACTED]. She stated that words cannot express the sadness that she is feeling for her sister. She stated that it seemed just like yesterday she was planning the baby shower. She stated that her sister has plenty of support from her siblings and extended family. She stated at this time her sister wished to grieve in private. She stated that the family will pull together and do what is needed to have a nice funeral for [REDACTED]. She stated that she is thankful that her nephews went home to witness the passing of their sister. She stated [REDACTED] and [REDACTED] are visiting with their father in [REDACTED] for the summer.

Narrative Type: Addendum 1 Entry Date/Time: 09/21/2013 02:02 PM Entered By: [REDACTED]

CPSI wanted to make note that this interview was with [REDACTED] who is the sister of [REDACTED]. [REDACTED] is the mother of [REDACTED].



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 06/02/2013

Contact Method: Face To Face

Contact Time: 09:50 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 09/21/2013

Completed date: 09/21/2013

Completed By: [REDACTED]

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

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/21/2013 12:58 PM Entered By: [REDACTED]

CPSI spoke with [REDACTED]. She is the mother of [REDACTED]. She was present when CPSI arrived to the home. She stated that her heart is heavy. She stated that she feels sad for her son. She stated that this is the second child that he has lost. She stated that [REDACTED] had a son to die from a crib death. She stated that her grandson at the time was only 2 months old. She stated for another child to die is devastating to the family. She stated that the family has to be strong for one another at this time and pull together so that [REDACTED] can have a proper home going celebration.



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: 06/02/2013 Contact Method: Face To Face
 Contact Time: 09:05 AM Contact Duration: Less than 02 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 06/03/2013
 Completed date: 06/03/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Parent/Caretaker Interview
 Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]; [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 06/03/2013 05:06 PM Entered By: [REDACTED]

[REDACTED] stated that her daughter 1 month old [REDACTED] was born 2 1/2 months early. She stated that she remained in [REDACTED] hospital for a month. She stated that [REDACTED] was released from the hospital to go home on Friday May 31,2013. She stated that the family went home from the hospital. [REDACTED] stated on Saturday June 1, 2013 she and [REDACTED] visited the child's maternal grandmother [REDACTED]. She stated from her mother's home they visited with [REDACTED] brother at his home, a friend at [REDACTED] and then with paternal cousin at his home. She stated while at the park, [REDACTED] choking on some mucus. [REDACTED] stated it appeared that [REDACTED] had a hard time breathing. She stated that [REDACTED] suctioned [REDACTED] mouth.

She stated that the family arrived home between 8:30 p.m and 9:00 p.m. she stated that she fed and changed the baby's diaper and put her down to sleep in the bassinet around 9:45 p.m.. She stated that [REDACTED] woke up around midnight for her feeding. She stated that she changed her clothes and fed her. She stated at this feeding [REDACTED] didn't drink all of her milk. She stated that she swaddled her in her blanket and laid her down in the bassinet between 12:30 a.m. and 1:00 a.m. She stated that [REDACTED] to was making a grunting sound and appeared not to be very comfortable. She stated that she picked her up and swaddled her tightly. She stated that she laid her on her back in between she and [REDACTED]. [REDACTED] stated that she woke up to check on the baby but can't remember what time. She stated that she remembers the police saying that [REDACTED] dies around 4:00 a.m. She stated that she picked [REDACTED] up and kissed her on the forehead. She stated that she unswaddled her and noticed that her head was cold and she was unresponsive. She stated that she panicked and was screaming. She stated that [REDACTED] had waken up and he took [REDACTED] from her and began CPR while she called 911.

[REDACTED] stated that she has no history with the department. She stated that there is no history of domestic violence between her and [REDACTED]. She stated she nor her children have any medical conditions. No one in the household takes any medication. She stated that she has no criminal history. She stated that she is a State employee who works at a correctional facility. She does not have any history of mental health disease. She has no history of drug abuse. [REDACTED] agreed to a drug screen and passed

Narrative Type: Addendum 1 Entry Date/Time: 09/21/2013 02:01 PM Entered By: [REDACTED]

CPSI asked [REDACTED] some questions regarding the family's dynamics. She stated that she has never had any DCS History. She stated that she has no criminal history because if she did she wouldn't be able to work at the correctional facility. She stated that she has no history of drug use or domestic violence. She stated that She and [REDACTED] have been in a relationship



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

for a year. She stated that her other 2 children (6) [REDACTED] and (7) [REDACTED] are with there father [REDACTED] in [REDACTED] for the summer. She stated that the children have no medical conditions. She stated that both children are under the care of [REDACTED]. [REDACTED] stated she has no history of mental health. She stated she has no medical conditions. She stated that her children attend [REDACTED].



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 06/02/2013 Contact Method: Face To Face
 Contact Time: 09:05 AM Contact Duration: Less than 02 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 06/03/2013
 Completed date: 06/03/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Parent/Caretaker Interview
 Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]; [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 06/03/2013 05:07 PM Entered By: [REDACTED]

[REDACTED] stated that [REDACTED] was released from the hospital on Friday May 31, 2013. He stated that the family went home from the hospital. He stated that on Saturday the family visited with several family and friends. He stated that he went to see his brother, went to [REDACTED] to see a friend and his cousin before the family returned home. He stated that nothing out of the ordinary happened while the family was out. He stated that they arrived home around 8:00 p.m. He stated that he went into the bedroom to watch basketball. He stated that [REDACTED] was tending to the baby. He stated that [REDACTED] came into the bedroom with the baby wanting to watch something different on television. He stated that he went to the living room to continue to watch the game. He stated that he also took the baby with him to the living room to feed her ([REDACTED] while [REDACTED] ate and pumped for breast milk. He stated that he fed the baby between 9:30 p.m. and 10:00 p.m. [REDACTED] stated that the basketball game ended around 10:30 p.m. and then he went to the bedroom and fell asleep shortly after. He stated that he was asleep through out the night while [REDACTED] got up to feed and change her. He stated that he was awakened by [REDACTED] screaming and saying that the baby was non responsive. he stated that he took [REDACTED] from [REDACTED] and began CPR while [REDACTED] called 911. he stated once the ambulance and police arrived they took over.

[REDACTED] stated that he has no history with The Department. He stated that he has past history of drug abuse. he stated that his drug of choice was marijuana. he stated that he has a criminal history that consist of being in prison for 2nd degree murder and robbery charges. he stated that he has been out of jail almost a year. he stated that he is currently on probation until October of 2013. He stated that in 1992 he had a son ([REDACTED]) pass away from crib death. He stated that he has 2 adult children that reside out of state. [REDACTED] declined taking a drug screen and admitted that he would more than likely be positive for marijuana.



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: 06/02/2013 Contact Method: Attempted Face To Face
 Contact Time: 09:05 AM Contact Duration: Less than 05
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 09/30/2013
 Completed date: 09/30/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Initial ACV Face To Face
 Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/30/2013 04:06 PM Entered By: [REDACTED]

The infant child [REDACTED] was deceased upon CPSI [REDACTED] receiving the case.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 06/02/2013

Contact Method:

Contact Time: 09:02 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 06/03/2013

Completed date: 06/03/2013

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: 06/03/2013 05:18 PM Entered By: [REDACTED]

Detective [REDACTED] and Detective [REDACTED] were on the scene when CPSI [REDACTED] arrived to the [REDACTED] and [REDACTED] home. The reenactment had been completed upon arrival.



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: 06/02/2013

Contact Method:

Contact Time: 07:20 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/21/2013

Completed date: 09/21/2013

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: 09/21/2013 02:13 PM Entered By: [REDACTED]

[REDACTED] (1 month, 7days) resided with her mother, [REDACTED], and her father, [REDACTED]. The mother has two other children, [REDACTED] (age 6) and [REDACTED] (age 7) who are currently visiting their father for the summer.

[REDACTED] was transported to [REDACTED] Hospital on June 2, 2013, around 4:30 A.M. because she was not breathing.

The mother reported that [REDACTED] woke up between 12:00 and 12:30 A.M. this morning. The mother fed [REDACTED] a bottle and then played with her. The mother put [REDACTED] back in her bassinet. [REDACTED] got real fussy so the mother put her in bed with her. The mother woke up around 4:00 A.M. The mother said she noticed [REDACTED] head was turned to the side and noticed one of her eyes looked funny. [REDACTED] did not seem to be breathing well. The mother dialed 911 and screamed for the child's father. The mother said the father started CPR. Officers arrived and took over CPR. EMS arrived and continued CPR and transported [REDACTED] to the hospital.

Officers transported the parents to the hospital in the police car. CPR was performed by doctors on [REDACTED] when she arrived to the hospital. [REDACTED] passed away at 4:58 A.M. on June 2, 2013.

No bruising or injuries were noted as being seen on [REDACTED]. [REDACTED] was born 10 weeks early according to the parents. The parents said [REDACTED] was discharged from [REDACTED] Hospital on May 31, 2013. The parents said [REDACTED] was not sent home with any supportive needs. The mother said she was supposed to follow up with [REDACTED] pediatrician this coming Monday, 6-3-13.

An Officer reported the father had one child who died from SIDS; however, the officer did not say when that happened. That child's name is not known.

The Youth Service Division detectives are currently interviewing the parents. The medical examiner investigator is at the hospital as well. The officers are requesting the immediate assistance of a CPS worker due to the death of [REDACTED].



Tennessee Department of Children's Services
SDM™ Safety Assessment

Assessment

Family Name: [REDACTED]

TN DCS Intake ID #: [REDACTED]

County: [REDACTED]

Worker:

Date of Referral: 6/2/13 6:50 AM

Date of Assessment: 6/2/13 12:00 AM

Assessment Type: Initial Closing Other

Number of Children in the Household: 3

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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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: _____