



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

Case # 2013.101

Intake #:	██████████	Investigation #:	██████████	Date of Referral:	12/03/2013
Type: (Please check one)	<input checked="" type="checkbox"/> DEATH	<input type="checkbox"/> NEAR DEATH	Date of Death/Near Death:	12/06/2013	
Child's Name:	██████████	DOB:	██████████	Person ID:	██████████
Gender:	<input checked="" type="checkbox"/> Male	<input type="checkbox"/> Female	Race/Ethnicity:	Hispanic or Latino	Region: ██████████
Parents' Names:	Mother: ██████████	Father: ██████████			
Alleged Perpetrator's Name:	██████████	Relationship to Victim:	Babysitter-non-relative		
Child in custody at time of incident?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	Adjudication:		
If child is in DCS custody, list placement type and name:					

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

The Department received a referral alleging the following ██████████ (2 months) is in the custody of his parents, ██████████ and ██████████. The family is Hispanic, but does speak English. There is a babysitter that keeps the child during the day named ██████████. The family reports that they have no prior involvement with the Tennessee Department of Children Services. The ██████████ 3 year old daughter named ██████████ is with ██████████ at this time.

On December 3, 2013 ██████████ contact 911 when the infant became rigid after drinking some milk. ██████████ claimed that the infant "looked stiff" and was not breathing well. EMT responded and took the infant to ██████████ Hospital. Infant was then transported to ██████████ Children's Hospital for further evaluation. Upon a CT scan being done, it was discovered that the infant has a subdural hematoma. There are no other physical signs of trauma. It is unknown what caused the injuries or where the injuries occurred.

The infant is currently in the ICU and in critical condition. The family has no explanation as to how the child received the injuries. The doctors talked ██████████ by the phone and she was unable to give an explanation either. ██████████ stated that at 3:30 PM the infant took a little milk, but not as much as normal and that is when she notice him becoming rigid. The infant had been with ██████████ since 7 AM this morning.

██████████ has two children of her own. There have been no reasons not to trust ██████████ with the children.

Both parents are tearful and aware that the Tennessee Department of Children Services is being contacted at this time. The infant is in critical condition and testing is still being conducted.

On 12/08/2013 the department received another referral on the family stating the following: The children, ██████████ (age 2 months) and ██████████ (age 3) live with their mother, ██████████ and father, ██████████. The family is Hispanic but does speak English.

██████████ babysitter, ██████████ (estimated age 20) watches ██████████ during the day.

A previous report was made (Intake # ██████████ regarding the babysitter, ██████████ and her interaction with ██████████. The report was made on December 3, 2013. The previous report stated that on December 3, 2013, ██████████ was watching ██████████ and ██████████ reportedly contacted Law Enforcement after ██████████ became rigid after drinking some milk. ██████████ claimed that the child was not breathing well and appeared stiff. EMT responded and transported ██████████ to ██████████ Community Hospital. ██████████ was then transferred to ██████████ Children's Hospital for further evaluation. Medical personnel performed a CT scan on ██████████ where it was discovered he had suffered from a subdural hematoma. No other physical signs of trauma were found.

Per previous report (Intake # ██████████ it was unknown what caused the injuries or where the injuries occurred. Neither ██████████ nor ██████████ were able to provide an explanation of what could have caused the injury. ██████████ reported that at 3:30 P.M. ██████████ took a little milk and soon after she noticed his body becoming "rigid". ██████████ was in ██████████ care since 7:00 A.M on 12/03/2013. ██████████ has been in the ICU at ██████████ Children's Hospital since December 3, 2013 in critical condition.

Through the DCS investigation, DCS discovered the babysitter, ██████████ had admitted to being overwhelmed the day of December 3, 2013. The referent stated that ██████████ had four children, ██████████ (age 3), an Unknown 11 month old, and two month old, ██████████ in her care. ██████████ reported to DCS that all of the children were

crying and that she felt overwhelmed. [redacted] admitted to shaken [redacted] at that time. [redacted] also reported that it was after she had shaken [redacted] that he started to appear rigid and stiff.

[redacted] 11 and [redacted] entered state custody on December 5, 2013, however the petition was dropped and he was returned into [redacted] and [redacted] custody. [redacted] has remained at [redacted] Hospital in critical care. [redacted] died this morning, December, 7, 2013 at 4:28 A.M. The referent was not able to provide the official diagnosis or official cause of death.

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

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

**Describe (in detail) interview with family:**

CPSI [redacted] went to [redacted] and arrived at approximately 3.30am on 12/04/2013. CPSI [redacted] confirmed that [redacted] (ACV) had a subdural hematoma with the medical staff at [redacted] Medical Center. An interview with the biological mother [redacted] was conducted. Ms. [redacted] stated that she changed [redacted] diaper at 4am on 12/3/2013 and then he ate a 6oz bottle. Ms. [redacted] proceeded by staving her and the children took her husband to PT around 6am, and she dropped [redacted] and [redacted] off at the babysitter, Ms. [redacted] home around 7:15 am. Ms. [redacted] stated she left [redacted] in the car seat due to him being sleep. Ms. [redacted] stated that Ms. [redacted] has been watching [redacted] since June 2012 and has been caring for [redacted] since November 2, 2013. Ms. [redacted] reported that [redacted] was acting normal and she had interacted with him all morning before dropping him off with Ms. [redacted]. Ms. [redacted] was certain that she or her husband did nothing to harm [redacted]. Ms. [redacted] also reported that she didn't witness any tramua happening to [redacted] while in her care. Ms. [redacted] also stated that Ms. [redacted] would never do anything to hurt her children and the family was a good family. Ms. [redacted] was reluctant to give Ms. [redacted] address or contact information. Ms. [redacted] talked about how Ms. [redacted] gave her a baby shower before [redacted] was born.

CPSI [redacted] was unable to interview the father, Mr. [redacted] due to him traveling back to [redacted] to get [redacted] from the babysitter, Ms. [redacted]. Detective [redacted] CPIT [redacted] was able to locate the father and proceeded to transport him to [redacted] to be interviewed regarding the referral. [redacted] was interviewed several times for an extended period of time by Det. [redacted] and once by CM3 [redacted]. During the interview CM3 [redacted] asked Mr. [redacted] if he suspected any wrong doing by the babysitter, [redacted] and [redacted]. [redacted] stated that he and his wife trusted her and that she loved the children like they were her own children. He stated that she would never do anything to harm them and they feel that the children are safe with her. This was another reason why he left his daughter [redacted] with the babysitter while they attended to [redacted] at [redacted]. Mr. [redacted] did not immediately pick up his daughter upon returning to [redacted]. He met with his sister in law to allow her to obtain entry into their home and went to his work to inform his command of his sons status. After leaving his job he picked up [redacted] and transported her to the home to remain with the sister in law. Mr. [redacted] reported that he would never do anything to harm his children. He stated that he does play with his son and bounce him on his knee and swings him around but he always protects his head when doing so. Mr. [redacted] stated that it is always done in a playing manner. Mr. [redacted] also reported that when he went to PT he had not seen a change in [redacted] behavior.

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

CPSI [redacted] responded to the P1 referral on 12/06/2013 at approximately 3.30 am. CPSI [redacted] conducted the interview with the biological mother and observed [redacted]. CPSI [redacted] remained at the hospital with the family until 12/06/2013, approximately 8 pm, at which CPSI [redacted] took over the investigation to complete the intake paperwork and transport [redacted] 3 y/o, to her resource home.

<b>Describe disposition of body (Death):</b>			
Name of Medical Examiner/Coroner:	N/A	Was autopsy requested?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Did CPS open an investigation on this Death/Near Death?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes		
Was there DCS involvement at the time of Death/Near Death?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes		
Type:	Physical Abuse	Case #:	[redacted]

**Describe law enforcement or court involvement, if applicable:**

CPIT was convened and Detective [redacted] was contacted prior to CPSI [redacted] attending to the family at [redacted]. Detective [redacted] was informed that the babysitter, [redacted] resided on the [redacted] side of [redacted] and therefore he was not able to go to her home and interview her. Detective [redacted] did contact the CID Unit on [redacted] concerning this investigation and requested that they would interview Mrs. [redacted]. Detective [redacted] did interview Mrs. [redacted] at the [redacted] Police Station on 12/05/2013 with CID presence. Ms. [redacted] wrote a statement which you will find attached.

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

[redacted] (3 yr.) and [redacted] was initially bought into State custody to ensure the safety of the child. The Alleged Perpatrator [redacted] was interviewed on 12/05/2013 by Detective [redacted] where she disclosed her involmnet and admitted to shaking the child while babysitting him on 12/03/2013. On 12/06/2013 the custody order was non-suited and [redacted] was able to return to her family and say her final good-byes to her brother [redacted]. Referral was called into [redacted] Hotline on [redacted] concerning her two children's safety, unknown 11 months and unknown 3 year old. Referral # [redacted].

Name: [redacted]	Age: 3
Name: Unknown (babysitter child Ms. [redacted])	Age: 3
Name: Unknown (babysitter child Ms. [redacted])	Age: 11 months,
Name:	Age:
Name:	Age:

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

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

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

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

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

ATTACH a copy of the TFACTS Incident Report or if TFACTS is inoperable, DCS Form CS-0496, Serious Incident Report to this notice.  No  Yes

Email to: [Child-Fatality-Notification EI-DCS](#)  
within forty-eight (48) hours of notification

Include subject line (in RED): **CHILD DEATH [secure email] or CHILD NEAR DEATH [secure email]**

Intake #:	[REDACTED]	Investigation #:	[REDACTED]	Date of Referral:	2/20/2013	Case #	2013-101

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

*Distribution: Child's Case File*

CS-0635, Rev. 08/13

RD 2993

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

**Intake**

Intake ID: [REDACTED]  
 Intake Taken By: [REDACTED] Intake Date/Time: 12/07/2013 10:17 AM CT  
 Track Assigned: Investigation Priority Assigned: 1  
 Screened By: [REDACTED]  
 Date Screened: 12/07/2013

**Investigation**

Investigation ID: [REDACTED]  
 First [REDACTED] Region [REDACTED]  
 Date/Time Assigned : 12/09/2013 11:50 AM  
 First Team Leader Assigned: [REDACTED] Date/Time 12/09/2013 12:00 AM  
 First Case Manager [REDACTED] Date/Time 12/09/2013 12:00 AM

**Allegations**

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	7 Mos	Abuse Death	Yes	[REDACTED]	Other Non-relative

**Referent(s)**

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

Referent Address:

Referent Phone Number: [REDACTED]

Type of Contact: I-3 Phone

Notification: None

Narrative: Note: Per TFACTS the child currently has an open court custody case. Per TL [REDACTED] the petition was dropped and the child was placed back in the custody of the parents.

TFACTS:

Family Case ID: [REDACTED]

Open Court Custody: Yes/Case ID [REDACTED]

Child: [REDACTED] Effective Date: 12-4-2013/FSW [REDACTED]

Child: [REDACTED] Effective Date: 12-4-2013/FSW [REDACTED]

Closed Court Custody None found

Open CPS Yes

Submitted Intake # [REDACTED] 12-3-2013 [REDACTED] (No FSW assigned).



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

Fatality None found

Indicated: None found

Screened out None found

History (not listed above): None found

Notification: None  
School/ Daycare: N/A  
Native American Descent: Unknown  
Directions: N/A

Reporters name/relationship: [REDACTED]

Reporter states:

The children, [REDACTED] (age 2 months) and [REDACTED] (age 3) live with their mother, [REDACTED] and father, [REDACTED]. The family is Hispanic but does speak English.

[REDACTED] babysitter, [REDACTED] (estimated age 20) watches [REDACTED] during the day.

A previous report was made (Intake # [REDACTED] regarding the babysitter, [REDACTED] and her interaction with [REDACTED]. The report was made on December 3, 2013. The previous report stated that on December 3, 2013, [REDACTED] was watching [REDACTED] and [REDACTED] reportedly contacted Law Enforcement after [REDACTED] became rigid after drinking some milk. [REDACTED] claimed that the child was not breathing well and appeared stiff. EMT responded and transported [REDACTED] to [REDACTED] Community Hospital. [REDACTED] was then transferred to [REDACTED] Childrens Hospital for further evaluation. Medical personnel performed a CT scan on [REDACTED] where it was discovered he had suffered from a subdural hematoma. No other physical signs of trauma were found.

Per previous report (Intake # [REDACTED] it was unknown what caused the injuries or where the injuries occurred. Neither [REDACTED] nor [REDACTED] were able to provide an explanation of what could have caused the injury. [REDACTED] reported that at 3:30 P.M. [REDACTED] took a little milk and soon after she noticed his body becoming rigid. [REDACTED] was in [REDACTED] care since 7:00 A.M. on 12/03/2013. [REDACTED] has been in the ICU at [REDACTED] Childrens Hospital since December 3, 2013 in critical condition.

Through the DCS investigation, DCS discovered the babysitter, [REDACTED] had admitted to being overwhelmed the day of December 3, 2013. The referent stated that [REDACTED] had three children, [REDACTED] (age 3), an Unknown 11 month old, and two month old, [REDACTED] in her care. [REDACTED] reported to DCS that all of the children were crying and that she felt overwhelmed. [REDACTED] admitted to have shaken [REDACTED] at that time. [REDACTED] also reported that it was after she had shaken [REDACTED] that he started to appear rigid and stiff.

[REDACTED] entered state custody on December 5, 2013, however the petition was dropped and he was returned into [REDACTED] and [REDACTED] custody. [REDACTED] has remained at [REDACTED] Hospital in critical care. [REDACTED] died this morning, December, 7, 2013 at 4:23 A.M. The referent was not able to provide the official diagnosis or official cause of death.

It is unknown when the autopsy will take place.

[REDACTED] had no known special needs or disabilities.

Per SDM: Investigative Track, P1 - [REDACTED] CM 3 on 12-7-2013 at 11:33 A.M.



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

Child Death Group notified, email notification sent to [REDACTED]

[REDACTED]

[REDACTED] paged - Time Issued: 11:36:55 AM

[REDACTED]

12-07-13 11:36:55 AM CST

12-07-13 11:37:55 AM CST

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:** [REDACTED]      **Race:** [REDACTED]      **Age:** 3 Yrs (Est)

**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:** [REDACTED]      **Race:** [REDACTED]      **Age:** 31 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  
Tennessee Child Abuse Hotline Summary**

**Name:** [REDACTED]

**Gender:** Male

**Date of Birth:** [REDACTED]

**Partipant ID:** [REDACTED]

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

**Address:** [REDACTED]

**Deceased Date:** [REDACTED]

**School/ ChildCare Comments:** [REDACTED]

**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]

**Partipant ID:** [REDACTED]

**SSN:** [REDACTED]      **Race:** White      **Age:** 7 Mos

**Address:** [REDACTED]

**Deceased Date:** [REDACTED]

**School/ ChildCare Comments:** [REDACTED]

**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:** [REDACTED]

**Partipant ID:** [REDACTED]

**SSN:** [REDACTED]      **Race:** [REDACTED]      **Age:** 20 Yrs (Est)

**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**  
**Child Protective Service Investigation Summary**  
**and Classification Decision of Child Abuse/Neglect Referral**

**A. Investigation**

Case Name: [REDACTED]  
 Referral Date: 12/07/2013  
 Street Address: [REDACTED]  
 City/State/Zip: [REDACTED]

Investigation ID: [REDACTED]  
 Assignment Date: 12/09/2013

**B. Allegation**

#	Children's Name	DOB	Specific Allegation for Each Child	Alleged Perpetrator's Name	DOB	Classification	Severe Abuse	Classified By
		SSN			SSN			Classified Date
1	[REDACTED]	[REDACTED]	Abuse Death	[REDACTED]	[REDACTED]	Unable to Complete	Yes	[REDACTED] 03/06/2014

**C. Disposition Decision**

Disposition Decision: Assessed and Closed

Comments: This case is being classified as (unable to complete) due to policy 14.7 this classification is appropriate due to the incident occurring in another state and does not have the ability or authority to formally identify a perpetrator.

**D. Case Workers**

Case Worker: [REDACTED]  
 Team Leader: [REDACTED]

Date: 03/11/2014  
 Date: 03/11/2014

**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:**

[REDACTED] past away at 4:23am on December 7th 2013.

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

Medical documentation stated non-accidental abusive head trauma.

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

Ms. [REDACTED] confessed that [REDACTED] (ACV) was crying and screaming. She stated that she was trying to get her homework finished along with taking care of [REDACTED] (the sister). She stated that she picked up the child and rocked him way to hard. She stated that it took her less than a second to realize that what she did was completely wrong so she put the baby in the swing. She stated that he stretched out and turned cherry red. She stated that she picked him up and his body gave out. She stated that she called the mother and then the ambulance.



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

Case Name : [REDACTED]

Investigation ID: [REDACTED]

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

According to the referral [REDACTED] (the babysitter) contacted 911 when the infant ([REDACTED] 2 months) looked stiff and was not breathing well. EMT responded and took the infant to [REDACTED]. The infant was then transported to [REDACTED]. Upon a CT scan being done, it was discovered that the infant has a subdural hematoma. There are no other physical signs of trauma. The infant is currently in the ICU and in critical condition. The family has no explanation as to how the child received the injuries. The doctors talked to [REDACTED] by phone and were unable to give an explanation either.

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

No further evidence.

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



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

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 03/11/2014

Contact Method:

Contact Time: 02:30 PM

Contact Duration: Less than 15

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/11/2014

Completed date: 03/11/2014

Completed By: [REDACTED] [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/11/2014 02:46 PM Entered By: [REDACTED] [REDACTED]

Mrs. [REDACTED] called the department and stated that she changed her mind and that she spoke with her attorney. She stated that if the department wants to come to her home that the department will need to speak with her attorney.

CPSI [REDACTED] spoke with Mr. [REDACTED] at Social Services on post. It was reported that the family is receiving services. Mr. [REDACTED] is seeking mental health services and Mrs. [REDACTED] is participating in marriage and family counseling.



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

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

**Case Recording Details**

Recording ID: [REDACTED]	Status: Completed
Contact Date: 03/07/2014	Contact Method: Phone Call
Contact Time: 09:23 AM	Contact Duration: Less than 15
Entered By: [REDACTED] [REDACTED]	Recorded For:
Location: DCS Office	Created Date: 03/07/2014
Completed date: 03/07/2014	Completed By: [REDACTED] [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: 03/07/2014 09:32 AM      Entered By: [REDACTED] [REDACTED]

CPSI [REDACTED] received a phone call from Mrs. [REDACTED] [REDACTED] and she apologized for not returning CPSI [REDACTED] call sooner. CPSI [REDACTED] informed her that the reason for her call was to follow up and see if they needed anything due to the death of their son a few months ago and also to request a walk through of the home which is protocol in order to close any case. Mrs. [REDACTED] reported they did not need anything and she thought the case was closed because the FBI is involved and she is dealing with DCS in [REDACTED]. Mrs. [REDACTED] reported the babysitter was released back to her children until the FBI completes their investigation and then can arrest her. CPSI [REDACTED] reassured her that DCS in [REDACTED] is not looking to cause added stress to her unfortunate events, but solely contacted her to see if she needed anything or to see if the department could help out in any way, and if helping out meant completing the walk-through of the home and closing the case, that is what we will do. Mrs. [REDACTED] asked when the walk-through could be completed, and CPSI [REDACTED] gave her CPSI [REDACTED] contact information and reported to her that she would contact Mrs. [REDACTED] to coordinate a date and time to complete this task. Mrs. [REDACTED] reported she would be waiting for CPSI [REDACTED] call.



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

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

**Case Recording Details**

Recording ID: [REDACTED]	Status: Completed
Contact Date: 03/06/2014	Contact Method:
Contact Time: 07:00 PM	Contact Duration: Less than 30
Entered By: [REDACTED] [REDACTED]	Recorded For:
Location: DCS Office	Created Date: 03/06/2014
Completed date: 03/06/2014	Completed By: [REDACTED] [REDACTED]
Purpose(s): Service Planning	
Contact Type(s): Case Summary	
Contact Sub Type:	

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

Narrative Type: Original      Entry Date/Time: 03/06/2014 07:29 PM      Entered By: [REDACTED] [REDACTED]

Case Summary  
Date: 03/06/14  
Time:

On 12/03/13 at 10:12 p.m., a P (1) referral was called into Central Intake. The referral was screened into [REDACTED] [REDACTED] with allegations of Physical Abuse. The alleged perpetrator is unknown. The alleged victim is [REDACTED] [REDACTED]. The referral was assessed and assigned by TL [REDACTED] on 12/03/13 to CPSA [REDACTED] [REDACTED] and later transfer to CPSI [REDACTED] on 12/06/13. According to the referral [REDACTED] (the babysitter) contacted 911 when the infant ([REDACTED] 2 months) looked stiff and was not breathing well. EMT responded and took the infant to [REDACTED]. The infant was then transported to [REDACTED]. Upon a CT scan being done, it was discovered that the infant has a subdural hematoma. There are no other physical signs of trauma. The infant is currently in the ICU and in critical condition. The family has no explanation as to how the child received the injuries. The doctors talked to [REDACTED] by phone and were unable to give an explanation either. It is unknown if [REDACTED] is of Native American descent. [REDACTED] [REDACTED] Juvenile Court and the DA are notified of referrals and classification per local protocol and policy. The CPSI will contact the referent to seek additional information.

**Case History**

The following TNKIDS/TFACTS search revealed the following for [REDACTED] [REDACTED] HERE:

No prior history

Investigation:  
ACV:  
Allegation:  
AP:  
Classification:

Internet Check





## Tennessee Department of Children's Services

## Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED] Status: Completed  
 Contact Date: 03/06/2014 Contact Method: Attempted Phone Call  
 Contact Time: 03:30 PM Contact Duration: Less than 05  
 Entered By: [REDACTED] Recorded For:  
 Location: DCS Office Created Date: 03/06/2014  
 Completed date: 03/06/2014 Completed By: [REDACTED]  
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being  
 Contact Type(s): Parent/Caretaker Interview  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/06/2014 03:42 PM Entered By: [REDACTED]

CPSI [REDACTED] attempted to contact the family [REDACTED] but received no response. CPSI [REDACTED] left a message with [REDACTED] cell service for a call-back concerning whether or not they needed anything as a result of their infant's death. CPSI [REDACTED] also stated in the message that the department was requesting a home visit in order to close their case in the event they did not need anything.



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

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 01/15/2014

Contact Method: Face To Face

Contact Time: 09:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 03/06/2014

Completed date: 03/06/2014

Completed By: [REDACTED] [REDACTED]

Purpose(s): Service Planning

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

Contact Sub Type:

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

Narrative Type: Original      Entry Date/Time: 03/06/2014 07:05 PM      Entered By: [REDACTED] [REDACTED]

CPSI [REDACTED] met with the CPIT team to discuss this case. It was decided that the case would close as UABC as the incident occurred at the babysitter's home in [REDACTED]



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

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/08/2013

Contact Method: Attempted Face To Face

Contact Time: 03:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location: Family Home

Created Date: 03/06/2014

Completed date: 03/06/2014

Completed By: [REDACTED] [REDACTED]

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

Contact Type(s): ACV Interview/Observation,Initial ACV Face To Face,Notation,Parent/Caretaker Interview

Contact Sub Type:

**Children Concerning**

[REDACTED] [REDACTED] [REDACTED]

**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 03/06/2014 03:31 PM Entered By: [REDACTED] [REDACTED]

CPSI [REDACTED] traveled to the family home to attempt a home visit. There was no one home so she left her card in the doorway and staffed the case with TL [REDACTED] [REDACTED] who reported to try again later.



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

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/08/2013

Contact Method: Attempted Face To Face

Contact Time: 10:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 03/11/2014

Completed date: 03/11/2014

Completed By: [REDACTED] [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Initial ACV Face To Face

Contact Sub Type:

**Children Concerning**

[REDACTED] [REDACTED] [REDACTED]

**Participant(s)****Narrative Details**

Narrative Type: Original      Entry Date/Time: 03/11/2014 03:22 PM      Entered By: [REDACTED] [REDACTED]

This is being put in as an error. In order for tfacts to allow the case to close.



## Tennessee Department of Children's Services

## Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED] [REDACTED]

Case Status: Close

Organization: [REDACTED] Region

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/07/2013

Contact Method:

Contact Time: 09:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location:

Created Date: 03/06/2014

Completed date: 03/06/2014

Completed By: [REDACTED] [REDACTED]

Purpose(s): Well Being

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 03/06/2014 05:42 PM Entered By: [REDACTED] [REDACTED]

There was an open case on this family Case ID [REDACTED] This referral was called in because the child past away. All previous notes are in the other case.