



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

**Intake**

Intake ID: [REDACTED]  
Intake Taken By: [REDACTED] Intake Date/Time: 09/12/2013 10:55 AM CT  
Track Assigned: Investigation Priority Assigned: 1  
Screened By: [REDACTED]  
Date Screened: 09/12/2013

**Investigation**

Investigation ID: [REDACTED]  
First County/Region: [REDACTED]  
Date/Time Assigned : 09/12/2013 12:54 PM  
First Team Leader Assigned: [REDACTED] Date/Time 09/12/2013 12:00 AM  
First Case Manager [REDACTED] Date/Time 09/12/2013 12:00 AM

**Allegations**

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	1 Yr 6 Mos	Neglect Death	Yes	Unknown Participant [REDACTED] Unknown	None

**Referent(s)**

Referent Name: [REDACTED] Role to Alleged Victim(s): [REDACTED]  
Referent Address: [REDACTED]  
Referent Phone Number: [REDACTED]  
Type of Contact: I-3 Phone  
Notification: Letter  
Narrative: TFACTS:

Family Case Id: # [REDACTED] # [REDACTED]  
Open Court Custody/FSS/FCIP No  
Closed Court Custody No  
Open CPS - No  
Indicated # [REDACTED] (DEI) 11/26/12 (perp: [REDACTED])  
# [REDACTED] (DEI) 11/14/08 (perp: [REDACTED])  
# [REDACTED] (DEC) 11/18/04 (perp: [REDACTED])

Fatality No



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

Screened out Yes (1 - # [REDACTED])

History (not listed above): None

County: [REDACTED]  
Notification: Letter  
School/ Daycare: N/A  
Native American Descent: no  
Directions: NO

Reporters name/relationship: [REDACTED]

Reporter states:

[REDACTED] was born [REDACTED] and is one of a set of twins. The gender of the other twin is not known, the other twin was stillborn.

[REDACTED] was living with her maternal grandfather [REDACTED] who was her custodian/caretaker. [REDACTED] birth father is not known. Her birth mother is said to have a history of drug use and is no longer in the child's life.

On 9/8/2013, [REDACTED] was last seen when she was put in the pack and play to sleep with her bottle at approximately 11:00 PM. [REDACTED] usually slept eight or nine hours each night. She was not checked on until approximately 11:25 am the next day, 9/9/2013. The grandfather found her face down into the blanket, cold. CPR was begun by family members and 911 was called. First responders declared her deceased at the scene. There was nothing alarming at autopsy. [REDACTED] did not have marks on her with the exception of a scrape on her forehead. She was clean and appeared well cared for.

The preliminary toxicology reports returned today noting opiates in both [REDACTED] blood and urine. The fact that opiates are in both blood and urine is quite significant. These preliminary findings indicate these are real results, because the opiates are in both the blood and urine. Further testing will be done, both to confirm preliminary results and to confirm the quantity of drugs in her system.

Reporter does not have information about any other children in the home. Reportedly there are 4 other adults and 1 other child in the home.

Some medical records have been reviewed during the autopsy process. [REDACTED] was on no medications and there is no reason for these drugs to be in her system.

This is all the information available at this time.

Investigative Track - P1 - Child Death  
[REDACTED] TC, on 9/12/13 @ 12:02pm

Notified Child Death/Child Near Death Notification Group via Email:  
[REDACTED]



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

**Participant(s)**

**Name:** [REDACTED]

**Gender:** Female

**Date of Birth:** [REDACTED]

**Participant ID:** [REDACTED]

**SSN:**

**Race:** White

**Age:** 1 Yr 6 Mos

**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:**

**Name:** [REDACTED]

**Gender:** Male

**Date of Birth:**

**Participant ID:** [REDACTED]

**SSN:**

**Race:**

**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:**



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

**Name:** Unknown Participant [REDACTED] Unknown

**Gender:**

**Date of Birth:**

**Partipant ID:** [REDACTED]

**SSN:**

**Race:**

**Age:**

**Address:**

**Deceased Date:**

**School/ ChildCare Comments:**

**Alleged Perpetrator:** Yes

**DCS Foster Child:** No

**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: 09/12/2013
Street Address: [Redacted]
City/State/Zip: [Redacted]

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

B. Allegation

Table with 9 columns: #, Children's Name, DOB/SSN, Specific Allegation for Each Child, Alleged Perpetrator's Name, DOB/SSN, Classification, Severe Abuse, Classified By/Classified Date. Contains 3 rows of allegation data.

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: Case classified as AUPU due to lack of evidence to support allegations. Autopsy report showed cause of death to be morphine toxicity and the manner of death to be undetermined. Grandparents denied intentionally giving the child morphine and they passed polygraph tests performed by law enforcement. No evidence directly linked the caretakers to the death of the child. Case was presented to CPIT and unfounded.

D. Case Workers

Case Worker: [Redacted] Date: 01/31/2014
Team Leader: [Redacted] Date: 01/31/2014

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:

9/12/13- CPSI [Redacted] observed [Redacted] age 4, at the home. He was observed playing with his Uncle [Redacted] was dressed appropriately and appeared clean.



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

Case Name : [REDACTED]

Investigation ID: [REDACTED]

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

9/12/13- collateral contact- CPSI [REDACTED] listened to a phone call from the [REDACTED] Sheriff's Dept. to [REDACTED] assistant forensic pathologist. Capt. [REDACTED] Det. [REDACTED] and Det. [REDACTED] were also present for the phone call. Mr. [REDACTED] reported opiates were found in the infant's urine and blood. Quantitative values were not available at this time. He stated this would be shown in the full toxicology results. Mr. [REDACTED] reported it is highly unlikely to be a false positive and the opiate was specifically morphine. He stated the autopsy was completed and there were no obvious signs as to the cause of death.

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

9/12/13- CPSI [REDACTED] Det. [REDACTED] and Det. [REDACTED] interviewed [REDACTED] at the Sheriff's Dept. He stated he and his wife, [REDACTED] gained custody of [REDACTED] about 6 months ago. He stated [REDACTED] mother, [REDACTED] is in [REDACTED] possibly [REDACTED] [REDACTED] reported [REDACTED] was released from the hospital a few days ago following surgery. He stated a friend, [REDACTED] came up this past week-end to help with [REDACTED] reported his son, [REDACTED] was in the hospital until Tuesday with a diabetic issue and was not home when [REDACTED] died. He stated [REDACTED] was teething and he had given her teething tablets and occasionally tylenol when she became fussy. [REDACTED] stated on Sunday night he put [REDACTED] to bed around 11:00 pm with a bottle and he watched TV. He stated he checked on her between 12:00 and 12:30 am and she was asleep and okay. He stated she was facing the wall when he last checked on her. [REDACTED] stated the following morning around 11:00 am is when he checked on [REDACTED] and she was not breathing. He stated she had turned 180 degrees from when he checked on her prior to going to bed. He also said the bottle was next to her when he found her on Monday morning. [REDACTED] reported [REDACTED] was mobile and could crawl around the house. He stated she was able to walk while holding on to something like a coffee table or her walker. [REDACTED] stated he has nerve problems and back problems and is prescribed several medications. He listed his medications as oxycodone, anatriptoline, valium, and morphine. He stated his doctor is Dr. [REDACTED] and her practice is in [REDACTED] reported his pharmacy is Walgreens. He stated he last saw her on 8/15/13 and is due to return on 9/18/13. [REDACTED] reported on health concerns with [REDACTED] and she was taking no medications. [REDACTED] stated he is willing to cooperate with every step of the investigation. Det. [REDACTED] explained drugs were found in [REDACTED] system and he explained how his medications are stored in the home. He stated all his and his wife's medications are stored in a large safe in their bedroom and he and [REDACTED] are the only two who have keys to open it. He stated the safe also has a combination lock. He stated when he takes his medications he is in the bedroom and doesn't go anywhere else in the home with his medications. He stated to the best of his knowledge he has never dropped any of his medications. He stated in their previous home he dropped a pill and found it on the floor prior to the kids finding it. He stated he does not know how [REDACTED] could have had any drugs in her system. He denied giving [REDACTED] any type of medications. He stated [REDACTED] also takes her medications in the bedroom and the kids do not come into the room while there medications are out of the safe. [REDACTED] reported he has never put anything in [REDACTED] bottle to make her sleep. He stated he takes his medications as prescribed and does not abuse them. He agreed to allow investiga

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

No witnesses were interviewed during investigation.

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

victim contact: 9/12/13  
parent interview: 9/12/13  
perp interview: 9/12/13  
home visit: 9/12/13  
collateral contact: 9/12/13



**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]

CPIT: 1/30/14

**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

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

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**Case Recording Details**

Recording ID:	██████████	Status:	Completed
Contact Date:	02/03/2014	Contact Method:	
Contact Time:	05:56 PM	Contact Duration:	Less than 30
Entered By:	██████████ ██████████	Recorded For:	
Location:	DCS Office	Created Date:	02/03/2014
Completed date:	02/04/2014	Completed By:	██████████ ██████████
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

**Children Concerning**

**Participant(s)**

██████████ ██████████

**Narrative Details**

Narrative Type: Original      Entry Date/Time: 02/03/2014 05:00 PM      Entered By: ██████████ ██████████

Lead Investigator, ██████████ ██████████ is approving the case closure on this case. LI ██████████ did not assume supervision of the case until the investigation unit rolled out on 1/27/14.

The date the referral was received was 9/12/13

The daily notification of the referral was submitted to all members of CPIT on 9/12/13, including juvenile court and the district attorney's office.

The safety assessment was completed on 9/12/13

An IPA was initiated in this case on 9/12/13 and approved by TL ██████████ ██████████ TC ██████████ ██████████ and RGC ██████████ ██████████ the IPA was later extended on 9/17/13. CM reports the IPA was later dissolved with the permission of RGC ██████████ ██████████

The case was presented to the members of CPIT on 1/30/14

The 740 has been completed and will be submitted to the juvenile court and the district attorney's office.

The case will be filed in the ██████████ CPS 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:	02/03/2014	Contact Method:	
Contact Time:	02:50 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	02/03/2014
Completed date:	02/03/2014	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Notation		
Contact Sub Type:			

**Children Concerning**

**Participant(s)**

**Narrative Details**

Narrative Type: Original      Entry Date/Time: 02/03/2014 01:46 PM      Entered By: [REDACTED]

A copy of the 740 has been forwarded to [REDACTED] Juvenile Court.



## Tennessee Department of Children's Services

## Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 02/03/2014

Contact Method:

Contact Time: 02:45 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/03/2014

Completed date: 02/03/2014

Completed By: [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: 02/03/2014 01:45 PM Entered By: [REDACTED]

According to CPS categories and definitions of abuse/neglect, there is a lack of evidence to support the allegations of neglect death. Investigative tasks are complete. CPSI [REDACTED] has completed the 740/Case Summary in TFACTS.



## Tennessee Department of Children's Services

## Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 01/30/2014

Contact Method: Face To Face

Contact Time: 11:00 AM

Contact Duration: Less than 01 Hour

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 01/31/2014

Completed date: 01/31/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

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

Contact Sub Type:

**Children Concerning**

[REDACTED]

**Participant(s)**

[REDACTED] Unknown, Unknown

**Narrative Details**

Narrative Type: Original Entry Date/Time: 01/31/2014 03:33 PM Entered By: [REDACTED]

CPSI [REDACTED] met with the [REDACTED] family at their home. CPSI [REDACTED] discussed the status of the investigation and the CPS findings and classification from CPIT. [REDACTED] and [REDACTED] both stated it has been hard but they are dealing with the death each day. They stated there is no narcotics in the home and they have switched Doctors and are now seeing Dr. [REDACTED] for medications related to illnesses. [REDACTED] reported she had an issue with pneumonia in December. CPSI [REDACTED] discussed grief counseling and groups which meet around the area. CPSI [REDACTED] gave them mental health's phone number. [REDACTED] stated [REDACTED] is dealing with the death okay and was open to the possibility for counseling. CPSI [REDACTED] discussed the case and the CPS investigation would be closed and discussed the restrictions on [REDACTED] would be lifted. CPSI [REDACTED] observed [REDACTED] at the home and he was watching TV.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 01/30/2014

Contact Method:

Contact Time: 10:00 AM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 02/02/2014

Completed date: 02/02/2014

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

[REDACTED]

**Narrative Details**

Narrative Type: Original Entry Date/Time: 02/02/2014 04:21 PM Entered By: [REDACTED]

The case was presented to the members of CPIT on this date: Members present were [REDACTED] Ex Director CAC; [REDACTED] CAC FI; [REDACTED] IL DCS; [REDACTED] CPSI DCS; [REDACTED] CPSA DCS; [REDACTED] CPSI DCS; [REDACTED] CPSI SIU; Det. [REDACTED] SO.

[REDACTED] was found by her grandfather [REDACTED]. The grandparents had custody of the child. She was found in her pack n play deceased. 911 was called, [REDACTED] and [REDACTED] were the LE officials working the case. Preliminary toxicology came back with opiates (morphine) in her system. There was no obvious cause of death found on the body. GM had just been released from the hospital the Friday before the Monday the child was found deceased. The grandfather stated that he was the primary caretaker for [REDACTED]. The bottle was sent off for toxicology and came back negative. Both grandparents are on morphine in addition to other medications. They report keeping the medication in a locked gun safe in the bedroom. The grandfather kept a few pills in a pill sorter. Polygraphs were completed on the grandparents, the friend that was staying in the home and their son and the results were considered non deceptive. The grandfather stated they have dropped pills before but they picked them up. There is also the issue with their son stealing the grandfather's pills. The son was in the hospital the week the child died. The full autopsy came back as "acute morphine toxicity" but no signs of abuse or neglect were noted. The baby did have traces of the Rhino virus. It is not known if the ten month old took the morphine on her own (by picking it up off the floor or other surface and placing it in her mouth) or someone gave it to her. It is possible the grandfather might be charged with criminally negligent homicide. The grandfather did have a charge a long time ago for possession of THC that was nulled. [REDACTED] is the doctor who was prescribing the medications to the grandparents. She stated that they were always compliant and talking about the children. Records were requested but not sent and now the clinic has gone out of business. There was much discussion regarding how to classify the case and the decision was made that, even though the grandfather stated that he was the primary caretaker for the child, there is no indication that he intentionally caused harm to the child. There is also insufficient evidence to support that there was a lack of supervision that contributed to the death of the child. therefore the decision was made for the neglect death to be classified as Allegation Unsubstantiated, Perpetrator Unsubstantiated.



Tennessee Department of Children's Services  
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	01/30/2014	Contact Method:	Face To Face
Contact Time:	09:00 AM	Contact Duration:	Less than 45
Entered By:	[REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	01/31/2014
Completed date:	01/31/2014	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	CPIT (Child Protective Investigative Team)		
Contact Sub Type:			

**Children Concerning**

**Participant(s)**

**Narrative Details**

Narrative Type: Original      Entry Date/Time: 01/31/2014 03:44 PM      Entered By: [REDACTED]

CPSI [REDACTED] presented case to CPIT on this date. The facts of the case were discussed and team agreed with classification of AUPU.



**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: 10/22/2013

Contact Method: Face To Face

Contact Time: 10:45 AM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 11/01/2013

Completed date: 11/01/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 11/01/2013 03:26 PM Entered By: [REDACTED]

CPSI [REDACTED] met with Det. [REDACTED] and [REDACTED] at the Sheriff's Dept. Det. [REDACTED] stated they finished the interview with [REDACTED] and explained the findings of the toxicology report. Det. [REDACTED] stated Mr. [REDACTED] fully cooperated with questions and remained consistent with his statement from initial interview and had no knowledge of how [REDACTED] could have ingested morphine. Mr. [REDACTED] stated he would be willing to take a polygraph test if needed.

Narrative Type: Addendum 2 Entry Date/Time: 02/04/2014 10:03 AM Entered By: [REDACTED]

CPSI [REDACTED] entered into privileged communication with DCS regional counsel, [REDACTED] regarding the IPA expiring and no court action needed at this time.

Narrative Type: Addendum 1 Entry Date/Time: 02/03/2014 01:37 PM Entered By: [REDACTED]

CPSI [REDACTED] spoke with [REDACTED] about the IPA expiring and CPS could not extend the IPA any longer without court action. [REDACTED] stated he understood but stated he is going to continue for [REDACTED] to stay with [REDACTED] due to the investigation continuing because he has nothing to hide and he wants to prove it to everyone. He stated [REDACTED] could return home at the conclusion of the investigation.



## Tennessee Department of Children's Services

## Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 10/18/2013

Contact Method: Phone Call

Contact Time: 11:00 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 11/01/2013

Completed date: 11/01/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 11/01/2013 03:30 PM Entered By: [REDACTED]

CPSI [REDACTED] received a phone call from Det. [REDACTED] regarding the toxicology report. He stated toxicology report showed manor of death to be morphine toxicity and the test of the bottle was negative for all drugs. The mode of death remains undetermined at this time. He stated he has not received the final report yet and the Doctor will not release a preliminary report at this time. He stated he will contact Mr. [REDACTED] and schedule an interview with him.



Tennessee Department of Children's Services  
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	09/17/2013	Contact Method:	
Contact Time:	05:00 PM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	02/03/2014
Completed date:	02/03/2014	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Notation		
Contact Sub Type:			

**Children Concerning**

**Participant(s)**

**Narrative Details**

Narrative Type: Original      Entry Date/Time: 02/03/2014 01:34 PM      Entered By: [REDACTED]

CPSI [REDACTED] entered into privileged communication with DCS regional counsel, [REDACTED] regarding IPA and extending it for 30 days.

CPSI [REDACTED] called [REDACTED] and extended the IPA for 30 days. [REDACTED] agreed with the conditions of the IPA pending further investigation.



## Tennessee Department of Children's Services

## Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/16/2013

Contact Method: Face To Face

Contact Time: 02:00 PM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 09/24/2013

Completed date: 09/24/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/24/2013 06:00 PM Entered By: [REDACTED]

CPSI [REDACTED] interviewed [REDACTED] FNP at her office. She stated she is aware of the death because [REDACTED] called her and told her about it. She stated [REDACTED] and [REDACTED] were always talking about the grandchildren and showing pictures to the staff. She stated they never brought the children to the office but they would always talk about them during office visits. Ms. [REDACTED] reported she began seeing [REDACTED] October 9, 2012 for knee problems and bulging disc. She stated she saw [REDACTED] a month ago for an abscess on her arm and she sent [REDACTED] to the ER and surgery came later. She stated she began seeing [REDACTED] on 11/3/11 due to a lumbar fusion and high blood pressure. Ms. [REDACTED] expressed no concerns with [REDACTED] or [REDACTED] ability to parent small children or that their medications interfere with their parenting.



Tennessee Department of Children's Services  
Case Recording Summary

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

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**Case Recording Details**

Recording ID:	██████████	Status:	Completed
Contact Date:	09/13/2013	Contact Method:	Face To Face
Contact Time:	03:30 PM	Contact Duration:	Less than 45
Entered By:	██████████ ██████████	Recorded For:	
Location:	Other Community Site	Created Date:	09/24/2013
Completed date:	09/24/2013	Completed By:	██████████ ██████████
Purpose(s):	Service Planning		
Contact Type(s):	ACV Interview/Observation		
Contact Sub Type:			

**Children Concerning**

██████████ ██████████ ██████████

**Participant(s)**

██████████ ██████████

**Narrative Details**

Narrative Type: Original      Entry Date/Time: 09/24/2013 05:55 PM      Entered By: ██████████ ██████████

CPSI ██████████ met ██████████ and ██████████ at ██████████ and completed a home visit. The home is a two bedroom apartment with electricity, running water, and ample food. No dangers were observed. ██████████ stated ██████████ could stay with her as long as needed. She stated he begins pre school on Monday.



Tennessee Department of Children's Services  
Case Recording Summary

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

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**Case Recording Details**

Recording ID:	██████████	Status:	Completed
Contact Date:	09/13/2013	Contact Method:	
Contact Time:	01:35 PM	Contact Duration:	Less than 45
Entered By:	██████████ ██████████	Recorded For:	
Location:		Created Date:	09/13/2013
Completed date:	09/13/2013	Completed By:	██████████ ██████████
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

**Children Concerning**

**Participant(s)**

**Narrative Details**

Narrative Type: Original      Entry Date/Time: 09/13/2013 02:28 PM      Entered By: ██████████ ██████████

CPSI ██████████ and TL ██████████ completed the Child Death Notification Form (CS-0635). TL ██████████ emailed the form to the Child Death Notification Group (Child-Fatality-Notification EI-DCS) and cc'd the email to ██████████ ██████████



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

Case Id: [REDACTED]

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

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/13/2013

Contact Method: Face To Face

Contact Time: 11:30 AM

Contact Duration: Less than 30

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location: Family Home

Created Date: 09/24/2013

Completed date: 09/24/2013

Completed By: [REDACTED] [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

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

[REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]

**Narrative Details**

Narrative Type: Original Entry Date/Time: 09/24/2013 05:52 PM Entered By: [REDACTED] [REDACTED]

CPSI [REDACTED] met with [REDACTED] and [REDACTED] at their home and discussed the following paperwork and they signed the HIPPA form, Clients rights handbook, Native American form, Equal Access form, and Release of Information. MRS brochure given to parent. Genogram completed.

CPSI [REDACTED] explained records would be obtained as part of the investigation.

[REDACTED] stated [REDACTED] is with [REDACTED] and they are planning on going to Chucky Cheese.



Tennessee Department of Children's Services  
Case Recording Summary

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

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**Case Recording Details**

Recording ID:	██████████	Status:	Completed
Contact Date:	09/13/2013	Contact Method:	
Contact Time:	09:30 AM	Contact Duration:	Less than 15
Entered By:	██████████ ██████████	Recorded For:	
Location:		Created Date:	02/03/2014
Completed date:	02/03/2014	Completed By:	██████████ ██████████
Purpose(s):	Service Planning		
Contact Type(s):	Notation		
Contact Sub Type:			

**Children Concerning**

**Participant(s)**

**Narrative Details**

Narrative Type: Original      Entry Date/Time: 02/03/2014 01:31 PM      Entered By: ██████████ ██████████

CPSI ██████████ searched TFACTS for history on the family. The following information was located

11/5/13 DEI alleged perp: ██████████ ██████████ finding: ASPS

10/27/08 DEI alleged perp: ██████████ ██████████ finding: ASPS



## 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: 09/13/2013

Contact Method:

Contact Time: 09:15 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/13/2013

Completed date: 09/13/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/13/2013 02:21 PM Entered By: [REDACTED]

TL [REDACTED] and CPSI [REDACTED] further discussed the circumstance of this case. It was decided that the current Immediate Protection Agreement would be modified for the child to stay in the aunt's home, with no unsupervised contact with the grandparents, until further investigative tasks can be completed. CPSI [REDACTED] reported that the grandparents were visibly upset by the death of the infant. Per discussions with law enforcement, there is no information at this time to suggest the grandparents committed an intentional act to harm the infant and that the completion of the polygraph would assist with providing a direction for this case. The next steps CPSI [REDACTED] will complete are to include, but are not limited to the following:

- Modify the existing IPA and obtain the required approvals
- Continue completing required investigative tasks
- Maintain consistent contact with Law Enforcement/CPIT



Tennessee Department of Children's Services  
Case Recording Summary

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

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**Case Recording Details**

Recording ID:	██████████	Status:	Completed
Contact Date:	09/13/2013	Contact Method:	Correspondence
Contact Time:	12:15 AM	Contact Duration:	Less than 01 Hour
Entered By:	██████████ ██████████	Recorded For:	
Location:		Created Date:	09/24/2013
Completed date:	09/24/2013	Completed By:	██████████ ██████████
Purpose(s):	Service Planning		
Contact Type(s):	Collateral Contact		
Contact Sub Type:			

**Children Concerning**

**Participant(s)**

**Narrative Details**

Narrative Type: Original      Entry Date/Time: 09/24/2013 05:49 PM      Entered By: ██████████ ██████████

CPSI ██████████ obtained a copy of ██████████ medical records from ██████████ ██████████ Pediatrics.  
 CPSI ██████████ drove to the office of ██████████ ██████████ FNP, and the office is closed 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: 09/12/2013

Contact Method:

Contact Time: 10:00 PM

Contact Duration: Less than 01 Hour

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/13/2013

Completed date: 09/13/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/13/2013 02:05 PM Entered By: [REDACTED]

TL [REDACTED] and CPSI [REDACTED] reviewed the information obtained so far on this case. The grandparents were originally interviewed at the [REDACTED] Sheriff's Department and both grandparents agreed to submit to polygraphs. Detectives and CPSI [REDACTED] spoke with the ME. Law Enforcement reported that they did not observe any marks or bruises on the child and there were no concerns surrounding the home/living environment. Det. [REDACTED] and Det. [REDACTED] responded to the home with CPSI [REDACTED]. The grandparents are prescribed a significant amount of medication. The grandparents adamantly deny administering the infant any medication. It was discussed that it was possible some medication could have been dropped on the floor, but both grandparents were not aware of this occurring. The grandparents keep their medication locked in a safe in the home that is not within reach of the child. The grandparents submitted to drug screens. The grandparents were only positive for their prescription medication. CPS assessed the safety of the 4 year old child in the home. It was determined that in order to ensure the safety of that child due to the unknown circumstances, an Immediate Protection Agreement would be completed for the maternal aunt to stay in the home and provide supervision for the child. The grandparents will not have any unsupervised contact until further investigative tasks can be completed. This IPA was approved for tonight by Regional Supervising Attorney, [REDACTED] TC [REDACTED] and TL [REDACTED]. The next steps/tasks CPSI [REDACTED] will complete are to include, but are not limited to the following:

- Complete the Child Death Form and email the form to the appropriate persons
- Continue investigative tasks
- Obtain medical records
- Correspond with law enforcement regarding completion of the polygraphs on the grandparents
- Reassess the circumstances of this case pending the completion of the above tasks



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

Case Id: [REDACTED]

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

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/12/2013

Contact Method:

Contact Time: 08:00 PM

Contact Duration: Less than 05

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location:

Created Date: 02/03/2014

Completed date: 02/03/2014

Completed By: [REDACTED] [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/03/2014 01:16 PM Entered By: [REDACTED] [REDACTED]

SDM Safety Assessment was completed on this date. The following immediate safety factors were identified:  
 Caretaker caused serious physical harm to the child, or made a plausible threat to cause serious physical harm in the current investigation indicated by:

- Death of a child due to abuse or neglect.

[REDACTED] [REDACTED] died on 9/9/13 and preliminary toxicology report showed morphine in her system. Sibling, [REDACTED] [REDACTED] is in the home at this time. His immediate safety is of concern due to the cause of death pending further investigation by CPS and Law Enforcement.



## 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: 09/12/2013 Contact Method: Face To Face  
 Contact Time: 06:15 PM Contact Duration: More than 5 Hours  
 Entered By: [REDACTED] Recorded For:  
 Location: Other Community Site Created Date: 09/24/2013  
 Completed date: 09/24/2013 Completed By: [REDACTED]  
 Purpose(s): Safety - Child/Community, Service Planning  
 Contact Type(s): Parent/Caretaker Interview  
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/24/2013 05:06 PM Entered By: [REDACTED]

CPSI [REDACTED] Det. [REDACTED] and Det. [REDACTED] interviewed [REDACTED] at the Sheriff's Dept. He stated he and his wife, [REDACTED] gained custody of [REDACTED] about 6 months ago. He stated [REDACTED] mother, [REDACTED] is in [REDACTED] possibly [REDACTED] reported [REDACTED] was released from the hospital a few days ago following surgery. He stated a friend, [REDACTED] came up this past week-end to help with [REDACTED] [REDACTED] reported his son, [REDACTED] was in the hospital until Tuesday with a diabetic issue and was not home when [REDACTED] died. He stated [REDACTED] was teething and he had given her teething tablets and occasionally tylenol when she became fussy. [REDACTED] stated on Sunday night he put [REDACTED] to bed around 11:00 pm with a bottle and he watched TV. He stated he checked on her between 12:00 and 12:30 am and she was asleep and okay. He stated she was facing the wall when he last checked on her. [REDACTED] stated the following morning around 11:00 am is when he checked on [REDACTED] and she was not breathing. He stated she had turned 180 degrees from when he checked on her prior to going to bed. He also said the bottle was next to her when he found her on Monday morning. [REDACTED] reported [REDACTED] was mobile and could crawl around the house. He stated she was able to walk while holding on to something like a coffee table or her walker. [REDACTED] stated he has nerve problems and back problems and is prescribed several medications. He listed his medications as oxycodone, anatriptoline, valium, and morphine. He stated his doctor is Dr. [REDACTED] and her practice is in [REDACTED] [REDACTED] reported his pharmacy is Walgreens. He stated he last saw her on 8/15/13 and is due to return on 9/18/13. [REDACTED] reported on health concerns with [REDACTED] and she was taking no medications. [REDACTED] stated he is willing to cooperate with every step of the investigation. Det. [REDACTED] explained drugs were found in [REDACTED] system and he explained how his medications are stored in the home. He stated all his and his wife's medications are stored in a large safe in their bedroom and he and [REDACTED] are the only two who have keys to open it. He stated the safe also has a combination lock. He stated when he takes his medications he is in the bedroom and doesn't go anywhere else in the home with his medications. He stated to the best of his knowledge he has never dropped any of his medications. He stated in their previous home he dropped a pill and found it on the floor prior to the kids finding it. He stated he does not know how [REDACTED] could have had any drugs in her system. He denied giving [REDACTED] any type of medications. He stated [REDACTED] also takes her medications in the bedroom and the kids do not come into the room while there medications are out of the safe. [REDACTED] reported he has never put anything in [REDACTED] bottle to make her sleep. He stated he takes his medications as prescribed and does not abuse them. He agreed to allow investigators to come to the home and complete a pill count.

CPSI [REDACTED] Det. [REDACTED] and Det. [REDACTED] interviewed [REDACTED] at the Sheriff's Dept. She stated she has spent the past 4 weeks in the hospital and has been home for 2-3 days. She stated she has been receiving pain management



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

medications for the past 7-8 years and her current Doctor is Dr. [REDACTED]. She stated she is prescribed oxycodone, morphine, ambien, xanax, and prozac. Det. [REDACTED] explained drugs were found in [REDACTED] system and the questioning is in regards to how drugs entered [REDACTED] system. [REDACTED] asked if she is being accused of giving [REDACTED] drugs and stated she is finished answering questions and stated she wants a lawyer. The interview ended at that point.

Investigators followed the family back to their home and was allowed entry by [REDACTED]. Mr. [REDACTED] escorted investigators to the back bedroom where the safe is located. He opened the safe and removed his and [REDACTED] medications. A pill count was completed and copy scanned into TFACTS. No abnormalities were noted during the pill count.

Investigators interviewed [REDACTED] who stated she lives in [REDACTED] and drove up to the home on Saturday to help [REDACTED] following her surgery. She stated she planned to leave on Wednesday but due to [REDACTED] death she is staying through the funeral. She stated she is also prescribed medications including oxycodone, morphine, alprazolam, benztropine, metformin, lamotrigine, thiothixene, zolpidem, and promethazin. She allowed investigators to see her medications. [REDACTED] was interviewed about the incident surrounding [REDACTED] death. She stated she went to sleep early Sunday night around 9:00 pm. She stated she awoke Monday morning and was outside on the back porch when [REDACTED] came out and they drank coffee and talked. She stated [REDACTED] went in to check on [REDACTED] and that is when he found her not breathing. She stated [REDACTED] began yelling and then 911 was called, an ambulance, arrived and police. She stated she wants to be of as much support to the family as she can during this time.

Investigators interviewed [REDACTED] at the home. He stated he was admitted to [REDACTED] ER on Friday and spent 2 days in ICU and was released on Monday. He stated he is diabetic and had an episode which led to the hospital stay. He stated he was not at the home when [REDACTED] died. He stated his mother and father's medications are always stored in the safe. He stated he knows the combination but does not have a key to get into it. He stated the safe is locked all the time and he does not suspect [REDACTED] could have entered the safe. [REDACTED] does not suspect his parents of ever giving [REDACTED] any of their medications.

CPSI [REDACTED] called TL [REDACTED] and discussed the case. It was determined that an IPA would be implemented to ensure safety of [REDACTED].

CPSI [REDACTED] called TC [REDACTED] and Regional General Counsel [REDACTED] for approvals.

[REDACTED] (daughter of [REDACTED] and [REDACTED] came to the home and agreed to stay for the night and [REDACTED] would go to her home on Friday.

Background checks on her were clear.

[REDACTED] and [REDACTED] agreed to take drug screens.

[REDACTED] was positive for benzodiazepines, opiate, and oxycodone.

[REDACTED] was positive for benzodiazepines, opiate, and oxycodone.

[REDACTED] was negative for all drugs tested.

[REDACTED] was positive for benzodiazepines, opiate, and oxycodone.

CPSI [REDACTED] completed a home visit of [REDACTED]. The home is a 3 bedroom house with electricity, running water, and ample food. No dangers were observed.

Det. [REDACTED] gave CPSI [REDACTED] copy of pictures from the scene on 9/9/13 alongwith copy of the report.



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

Case Id: [REDACTED]

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

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/12/2013

Contact Method: Face To Face

Contact Time: 03:30 PM

Contact Duration: Less than 30

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location: Family Home

Created Date: 09/24/2013

Completed date: 09/24/2013

Completed By: [REDACTED] [REDACTED]

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

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

Contact Sub Type:

**Children Concerning**

[REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]

**Participant(s)**

[REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]

**Narrative Details**

Narrative Type: Original Entry Date/Time: 09/24/2013 04:54 PM Entered By: [REDACTED] [REDACTED]

CPSI [REDACTED] Det. [REDACTED] and Det. [REDACTED] went to [REDACTED]. The family was present at the home and [REDACTED] [REDACTED] allowed CPSI [REDACTED] into the home. He stated they are leaving right now for an appointment at the funeral home and agreed to come to the Sheriff's Dept. for interviews when completed.

CPSI [REDACTED] observed [REDACTED] age 4, at the home. He was observed playing with his Uncle [REDACTED] [REDACTED] [REDACTED] was dressed appropriately and appeared clean.

Narrative Type: Addendum 1 Entry Date/Time: 02/03/2014 01:32 PM Entered By: [REDACTED] [REDACTED]

household composition: [REDACTED] [REDACTED] (mat. grandfather/custodian), [REDACTED] [REDACTED] (mat. grandmother/custodial), [REDACTED] [REDACTED] (acv)



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:	09/12/2013	Contact Method:	Correspondence
Contact Time:	02:01 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	09/12/2013
Completed date:	09/12/2013	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Referent Interview		
Contact Sub Type:			

**Children Concerning**

**Participant(s)**

**Narrative Details**

Narrative Type: Original    Entry Date/Time: 09/12/2013 01:02 PM    Entered By: [REDACTED]  
TL [REDACTED] completed and mailed the Confidential Notification Letter to Reporter. See hard file for details.



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:	09/12/2013	Contact Method:	Phone Call
Contact Time:	02:00 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	02/03/2014
Completed date:	02/03/2014	Completed By:	[REDACTED]
Purpose(s):	Service Planning		
Contact Type(s):	Referent Interview		
Contact Sub Type:			

**Children Concerning**

**Participant(s)**

**Narrative Details**

Narrative Type: Original      Entry Date/Time: 02/03/2014 01:17 PM      Entered By: [REDACTED]

CPSI [REDACTED] spoke with referent about investigation. No additional information was provided.



**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: 09/12/2013

Contact Method: Phone Call

Contact Time: 01:50 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/24/2013

Completed date: 09/24/2013

Completed By: [REDACTED]

Purpose(s): Service Planning

Contact Type(s): Collateral Contact

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 09/24/2013 04:43 PM Entered By: [REDACTED]

CPSI [REDACTED] listened to a phone call from the [REDACTED] Sheriff's Dept. to [REDACTED] assistant forensic pathologist. Capt. [REDACTED] Det. [REDACTED] and Det. [REDACTED] were also present for the phone call. Mr. [REDACTED] reported opiates were found in the infant's urine and blood. Quantitative values were not available at this time. He stated this would be shown in the full toxicology results. Mr. [REDACTED] reported it is highly unlikely to be a false positive and the opiate was specifically morphine. He stated the autopsy was completed and there were no obvious signs as to the cause of death.

Narrative Type: Addendum 1 Entry Date/Time: 01/31/2014 03:42 PM Entered By: [REDACTED]

While at the Sheriff's Dept. Det. [REDACTED] gave CPSI [REDACTED] a copy of the offense report and background checks of [REDACTED] and [REDACTED]. See file for copy.



## Tennessee Department of Children's Services

## Case Recording Summary

Case Id: [REDACTED]

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

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/12/2013

Contact Method: Correspondence

Contact Time: 01:45 PM

Contact Duration: Less than 15

Entered By: [REDACTED] [REDACTED]

Recorded For:

Location:

Created Date: 01/31/2014

Completed date: 01/31/2014

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: 01/31/2014 03:48 PM Entered By: [REDACTED] [REDACTED]

TL [REDACTED] emailed referral to [REDACTED] Sheriff's Department and CAC.

TL [REDACTED] faxed referral to Juvenile Court with redacted referent information .

As per local protocol the CAC will notify District Attorney of investigation.

CPSI [REDACTED] spoke with Det. [REDACTED] [REDACTED] about investigation.



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

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

**Case Recording Details**

Recording ID: [REDACTED]

Status: Completed

Contact Date: 09/12/2013

Contact Method:

Contact Time: 01:37 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 09/24/2013

Completed date: 09/24/2013

Completed By: [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: 09/24/2013 04:47 PM Entered By: [REDACTED]

Central Intake assessed and assigned the following referral as a P1 to [REDACTED] on this date. CPSI [REDACTED] was assigned this referral on this date. The referral reads as follows

**Reporter states:**

[REDACTED] was born [REDACTED] and is one of a set of twins. The gender of the other twin is not known, the other twin was stillborn.

[REDACTED] was living with her maternal grandfather [REDACTED] who was her custodian/caretaker. [REDACTED] birth father is not known. Her birth mother is said to have a history of drug use and is no longer in the child's life.

On 9/8/2013, [REDACTED] was last seen when she was put in the pack and play to sleep with her bottle at approximately 11:00 PM. [REDACTED] usually slept eight or nine hours each night. She was not checked on until approximately 11:25 am the next day, 9/9/2013. The grandfather found her face down into the blanket, cold. CPR was begun by family members and 911 was called. First responders declared her deceased at the scene. There was nothing alarming at autopsy. [REDACTED] did not have marks on her with the exception of a scrape on her forehead. She was clean and appeared well cared for.

The preliminary toxicology reports returned today noting opiates in both [REDACTED] blood and urine. The fact that opiates are in both blood and urine is quite significant. These preliminary findings indicate these are real results, because the opiates are in both the blood and urine. Further testing will be done, both to confirm preliminary results and to confirm the quantity of drugs in her system.

Reporter does not have information about any other children in the home. Reportedly there are 4 other adults and 1 other child in the home.

Some medical records have been reviewed during the autopsy process. [REDACTED] was on no medications and there is no reason for these drugs to be in her system.

This is all the information available at this time.



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

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Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

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