



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

Case # 2013.115ph

Intake #:	██████████	Investigation #:	██████████	Date of Referral:	11/12/2013	
Type: (Please check one)	<input checked="" type="checkbox"/> DEATH	<input type="checkbox"/> NEAR DEATH	Date of Death/Near Death:	11/11/2013		
Child's Name:	██████████	DOB:	██████████	Person ID:	██████████	
Gender:	<input type="checkbox"/> Male	<input checked="" type="checkbox"/> Female	Race/Ethnicity:	White (Non Hispanic)	County/Region:	██████████
Parents' Names:	Mother:	██████████	Father:	██████████		
Alleged Perpetrator's Name:	Unknown		Relationship to Victim:	Unknown		
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:	N/A					

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

██████████ County Sheriff Dept responded to a 911 call in which a 4 month old was found by her father unresponsive and not breathing on 11-11-13. Upon arrival the Sheriff Dept observed EMS working on ██████████ and she was transported to the hospital where she was pronounced dead. The father was asleep with the 4 month old in his bed along with her 3 year old sibling. The father found the baby not breathing. The baby had been sick (unknown symptoms) and allegedly is allergic to cigarette smoke. Law enforcement reports the death is suspicious, but did not elaborate with this.

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

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

Describe (in detail) interview with family:

Home Visit/Face to Face

Child Protective Services Investigator (CPSI) ██████████ and ██████████ Sheriff's Deputy ██████████ made a home visit to initiate the investigation into the death of ██████████. When CPSI ██████████ and Deputy ██████████ arrived, there were people who were not introduced to CPSI ██████████ and Deputy ██████████. They left. ██████████ and two other boys were in the living room watching television. Mr. ██████████ and Ms. ██████████ were sitting in the kitchen at the table.

Interview with the mother:

CPSI ██████████ spoke to ██████████ in the kitchen in the home. She said that she could not go back into the bedroom where ██████████ had died. She said that ██████████ had died in the room where she slept with her dad and her brother. CPSI ██████████ asked Ms. ██████████ to explain what had happened that morning up until they found ██████████ had passed away. Ms. ██████████ said that her alarm clock went off at 6am. She explained that she got ██████████ her nephew, ready for school. CPSI ██████████ asked her if she had custody of ██████████. Ms. ██████████ explained that her sister, ██████████, had been killed in a car accident 4 years ago. She said that at that time, ██████████ had been given custody of ██████████ and ██████████ who were ██████████ sons. She said that ██████████ is her mother and was ██████████ mother. She said that ██████████ and ██████████ boys, ██████████ and ██████████ live with them. Ms. ██████████ said that her mother goes to work, so she gets ██████████ up and ready for school in the morning. She said that ██████████ had gotten on the bus and left the home. She said that it was cold that morning so she had gone to stand in front of the heater after he left. She said that she was just standing there. Then she walked into the bedroom. She said that she saw everyone, including ██████████ in the bed. She said that she walked back out and stood in front of the heater. She said that then her husband started yelling that ██████████ was not okay. She said that she called 911. She said that the 911 staff coached her through CPR while the ambulance was on its way. She said that ██████████ (emergency responder) came and gave the baby CPR and then took the baby to the ambulance when it came. She said that that staff at the hospital said that they had found a tiny pulse in ██████████ but they could not bring her back. CPSI ██████████ asked Ms. ██████████ if ██████████ had been sick. She said that when she first came home from the hospital, she was congested. She said that they took ██████████ to see ██████████ at the ██████████ Health Department. Ms. ██████████ said that they thought ██████████ was allergic to smoke. She said that they tried to smoke outside all the time at first. She said that they had not been as careful recently. She said that recently,

Intake #:

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Date of Report:

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██████████ had been congested again, and she was going to take her to the doctor. CPSI ██████████ asked if ██████████ always slept in the bed with her father and brother. Ms. ██████████ said that she had slept in a baby bed at first, but then they put ██████████ in their bed. She said that she sleeps on the couch every night because there is not really room in the bed for all of them. CPSI ██████████ asked Ms. ██████████ if she or Mr. ██████████ use drugs. Ms. ██████████ said that they both take medicine for pain. She said that it is prescribed. She said that she has scoliosis. She said that she does not work right now. She said that the family does get food stamps, families first, WIC, and TNCare. CPSI ██████████ said that she knew there had been a stabbing in the home and asked if there were problems with domestic violence. Ms. ██████████ said that Mr. ██████████ had dropped the charges against her for that. She said that there were no other domestic violence charges. CPSI ██████████ asked Ms. ██████████ if there was anything else she wanted to talk about. She cried and asked why God had taken her baby. She said that ██████████ was the first girl in a very long time. She said that she could not believe that God had taken her baby girl.

Interview with the father

CPSI ██████████ spoke to ██████████, the father of ██████████ father at the kitchen table. He said that he got up at up about 3am to fix ██████████ a bottle. He said that ██████████ and her brother, ██████████ (age 3) sleep in the bed with him. He said that he fed ██████████ her bottle in the bed. He said that his mother-in-law, ██████████, lives in the home with them. He said that she gets up to go to work at 3:30. He said that she got up that day and came in and played with ██████████. He said that ██████████ left for work at about 4:45am. He said that when ██████████ left the house, she told ██████████ that ██████████ was awake. He said that he heard ██████████ get up about 5am. He said that she was getting ██████████ dressed for school. He said that he heard ██████████ leave. He said that he started to get up. He said that he looked at ██████████ and could tell that she was not okay. He said that he yelled out to ██████████ to call 911. CPSI ██████████ asked Mr. ██████████ how ██████████ was lying on the bed. He said that she was on her side. CPSI ██████████ asked him if it were normal for ██████████ to sleep in the bed with him. He said that he and ██████████ would prop ██████████ up in their bed because she would get congested. He said that ██████████ and ██████████ her would sleep with them. CPSI ██████████ asked Mr. ██████████ if he or Ms. ██████████ use drugs. He said that they take only what they are prescribed. He said that he goes to ██████████ in ██████████ and sees ██████████ to get his medicine. CPSI ██████████ asked him what causes his pain. Mr. ██████████ explained that he has rheumatoid arthritis. He said that he worked at a saw mill most of his life. He said that he is trying to get disability.

CPSI ██████████ spoke with the family together and explained that because of a drug history with the family, a hair follicle drug screen would need to be done on Mr. ██████████ and Ms. ██████████. Both said that that would not be a problem. They said that they understood. CPSI ██████████ said that it was protocol to do a drug screen when there is a drug history. Again the family said that they were okay with that. CPSI ██████████ asked if there was anything that she could do for the family. Mr. ██████████ and Ms. ██████████ said no. CPSI ██████████ said that she could offer counseling for the family. She said that losing a baby is very difficult, and that it is normal to need someone to talk to in such tragic situations. Mr. ██████████ and Ms. ██████████ said no. CPSI ██████████ asked for the number of ██████████ so that she could call if necessary. The number is is ██████████ ██████████ and ██████████, the other sister ██████████, arrived at the home at that time. ██████████ had her two sons with her.

Interview with other household members

Sibling: CPSI ██████████ observed ██████████. He was in the living room with his cousins. CPSI ██████████ tried to speak to ██████████ but he was too active. He was clean and dressed appropriately. He was three in October and does not understand what has happened. He was playful with his cousins. CPSI ██████████ could did not interview ██████████ based on his age.

Maternal Grandmother: CPSI ██████████ spoke to ██████████. CPSI ██████████ asked ██████████ what had happened the morning that the baby died. She said that she had gotten up to go to work. She said that she gets up every day at 3:30am. She said that she works at ██████████ in ██████████ which is 45 minutes away. She said that she walked in and played with ██████████ that morning. She said that ██████████ was playful and kicking her feet. She said that the baby seemed completely normal. She said that ██████████ was fine when she left the home. CPSI ██████████ asked her what kind of parents ██████████ and ██████████ were to ██████████. She said that they were great. She said that they were both so excited to have a girl. She said that ██████████ was a great mom to ██████████.

Maternal First Cousin: CPSI ██████████ saw ██████████. He was in the living room with his cousins. He was clean and dressed appropriately. CPSI ██████████ spoke to ██████████. ██████████ noticed that CPSI ██████████ had an iPhone. He asked if he could play with it. CPSI ██████████ showed him where Angry Birds was and started it for him. CPSI ██████████ said that he could play one game and then she needed him to get focused and talk to her. ██████████ agreed. When he was done, CPSI ██████████ asked ██████████ about what had happened on the day that ██████████ had died. He said that he was home when ██████████ said that the baby was not okay. He said that he had not gone to school yet. CPSI ██████████ asked him what happened next. He said that he did not know. CPSI ██████████ asked him how ██████████ was that morning. He said that he did not see her.

██████████ will be 6 years old in December.

Maternal First Cousin : CPSI ██████████ saw ██████████. He was in the living room with his cousins. ██████████ was 4 years old in September. He was clean and dressed appropriately. He was playful with his cousins. CPSI ██████████ tried to speak to ██████████ but ██████████ was shy. He would not talk to CPSI ██████████. He did want to play with CPSI ██████████ work telephone. CPSI ██████████ explained that it was her work phone, and he started to cry.

*The family identified ██████████ as a support. She is ██████████ mother. Her number is ██████████ or ██████████

CPSI ██████████ observed:

Document: CPSI ██████████ took photos of ██████████. CPSI ██████████ also took photos of the bed in which ██████████ died.

1. interactions between mother/father and child – N/A
2. observation and presentation (slurred speech, injuries, developmental delays or handicaps, clothing, red eyes, etc.) of child and other individuals in the home – ██████████ was very tearful. She had difficulty talking with CPSI ██████████ at some times. Mr. ██████████ seemed stoic. He did not talk unless asked a question. He did not soothe Ms. ██████████ when she cried.
3. observation of interactions between mother/father and other children in home – Ms. ██████████ and Mr. ██████████ both spoke to ██████████ while CPSI ██████████ was there. They spoke softly and kindly to him. They were patient with him.
4. observation of physical environment (inside and outside) – The home was a trailer. The floor in the kitchen was bare wood as was part of the kitchen table. The living room was dark; no lights were on. The television gave off the only light. The children were watching Sponge Bob. There was a bedroom with fabric draped over the door opening. CPSI ██████████ did not go back into what was identified as Ms. ██████████ and ██████████ and ██████████ room. CPSI ██████████ asked if they all slept together. ██████████ said that they did. CPSI ██████████ asked if she were interested in bunk beds. Ms. ██████████ said no. On the other side of the kitchen was the bedroom where Mr. ██████████ and ██████████ and ██████████ slept. The bed was unmade. The bed took up most of the room. The home was generally clean. It was not cluttered. The trailer did not look to be in good repair. Outside the home, there was a small wooden porch outside the front door. There were no railings. The stairs up to the porch were also not in good repair. A lawn mower was pushed up to the porch. There was litter around the home. CPSI ██████████ noted that there were rust spots on the trailer.

Next Steps: CPSI ██████████ asked the family to consider if they could use counseling. CPSI ██████████ said that people grieve in different ways, and that can be hard to understand for two people going through a loss together. She said that she hoped that the family could come through the loss together. CPSI ██████████ said that DCS wants to help keep families healthy and that if they knew of a way that DCS could help them with that, all they had to do was ask. CPSI ██████████ said that also if they decided that they wanted bunk beds, to let her know. CPSI ██████████ said that she would request hair follicle screens for Mr. ██████████ and Ms. ██████████. She said that she would let them know when that was approved so they could get that done. CPSI ██████████ said that she would be back soon to see how they were. CPSI ██████████ gave all the adults present her contact information in case anyone needed anything.

CPSI ██████████ learned from TC ██████████ that ██████████ was deceased due to a self-inflicted gunshot wound on 11/14/13 at 6:35am.

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

N/A

Describe disposition of body (Death):	Sent to medical examiner		
Name of Medical Examiner/Coroner:	██████████	Was autopsy requested?	<input type="checkbox"/> No <input checked="" 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:	FCIP on half siblings living in another home	Case #:	██████████

Describe law enforcement or court involvement, if applicable:

██████████ Sheriff Department will conduct an investigation along with CPS and are awaiting the autopsy report.

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):

DCS will meet with [REDACTED] on 11/21/2013 to review the findings from his examination of the body of [REDACTED]. A hair follicle will be done on [REDACTED]. An autopsy will be done on both [REDACTED] and [REDACTED].

Name: [REDACTED]	Age: [REDACTED] 3 years
Name: [REDACTED]	Age: [REDACTED] 5 years
Name: [REDACTED]	Age: [REDACTED] 4 years
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
08/04/2011	[REDACTED]	physical abuse	[REDACTED]	[REDACTED]	No Services Needed
12/15/2011	[REDACTED]	drug exposed child	[REDACTED]	[REDACTED]	No Services Needed
06/17/2004	[REDACTED]	drug exposed child	[REDACTED]	[REDACTED]	AIPI
06/17/2004	[REDACTED]	physical abuse	[REDACTED]	[REDACTED]	AUPU
06/17/2004	[REDACTED]	environmental neglect	[REDACTED]	[REDACTED]	AIPI
/ /					
/ /					

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: [REDACTED]	Telephone Number: [REDACTED]
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]



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

Intake

Intake ID: [REDACTED]
Intake Taken By: [REDACTED] Intake Date/Time: 11/12/2013 11:45 AM CT
Track Assigned: Investigation Priority Assigned: 1
Screened By: [REDACTED]
Date Screened: 11/12/2013

Investigation

Investigation ID: [REDACTED]
First County/Region: [REDACTED]
Date/Time Assigned : 11/12/2013 02:14 PM
First Team Leader Assigned: [REDACTED] Date/Time 11/12/2013 12:00 AM
First Case Manager [REDACTED] Date/Time 11/12/2013 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: [REDACTED]

Referent Phone Number: [REDACTED]

Type of Contact: I-3 Phone

Notification: Letter

Narrative: TFACTS:

Family Case Id: # [REDACTED] # [REDACTED]

Open Court Custody Yes, # [REDACTED] CM [REDACTED] (Children: [REDACTED] and [REDACTED])

Open FCIP Case- Yes # [REDACTED] CM [REDACTED]

Closed Court Custody No

Open CPS - None

Indicated 6/17/04, # [REDACTED] DEC, ENN, perp: [REDACTED] and [REDACTED]

Fatality None



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

Screened out Yes (1 - # [REDACTED])

History (not listed above):

INV - 3/22/12 - # [REDACTED] LOS, SEE, DEC - AUPU
INV - 1/9/12 - # [REDACTED] - PHA - AUPU
ASMT - 8/4/11 - # [REDACTED] PHA No Services Needed
INV - 5/30/11 - # [REDACTED] DEC, SEE AUPU
ASMT - 5/1/11 - # [REDACTED] DEC No Services Needed
INV - 1/29/11 - # [REDACTED] LOS, DEC, ENN AUPU
ASMT - 9/23/09 - # [REDACTED] LOS No Services Needed
INV - 10/18/07 - # [REDACTED] SEE AUPU
ASMT - 3/7/07 - # [REDACTED] DEI Services Recommended and Accepted
INV - 7/1/05 - # [REDACTED] SRPHI, SEE AUPU
INV - 6/17/04 - # [REDACTED] PHA - AUPU
INV - 10/25/02 - # [REDACTED] LOS AUPU
INV - 4/17/02 - # [REDACTED] ENN AUPU
ASMT - 8/24/12 - # [REDACTED] DEC Services Recommended and Accepted
INV - 6/3/05 - # [REDACTED] EDN, PYA AUPU

County: [REDACTED]

Notification: Letter

School/ Daycare: None

Native American Descent: No

Directions: N/A

NOTATION: Demographic information is listed under the oldest ACV.

Reporters name/relationship: [REDACTED]

Reporter states:

[REDACTED] (3) resides with his parents, [REDACTED] and [REDACTED], in [REDACTED]. It is believed there may be two other residents in the home but their information is unknown.

[REDACTED], [REDACTED] 4 month old sister, is deceased as of yesterday. Law enforcement arrived at the home at 6 a.m. to observe [REDACTED] being worked on in the ambulance. [REDACTED] was then transported to the ER where she was pronounced deceased. The father reported that [REDACTED] was asleep in the bed with him and [REDACTED]. The father reported that he checked on [REDACTED] at 3 a.m. and she was fine, but later checked and she was unresponsive and not breathing. The father reported this happened right before he called 9-1-1. The father reports that the mother was sleeping on the couch. The reporter feels that [REDACTED] death appears suspicious. The reporter states that according to the parents, there is a baby crib but [REDACTED] never slept in it. According to the parents, [REDACTED] was sick at one time, she had gotten better and then she was sick again. The parents reported that they smoke cigarettes and they thought that [REDACTED] may have been allergic to the cigarette smoke.

The reporter talked with the doctor at the hospital and reported that [REDACTED] will be going to a medical examiner and more will be known in the next few days concerning a possible cause of death.

According to the reporter, the parents have an arrest history for DUIs and assault. The assault charges were 2 occurrences, one being the mother stabbing the father and other where the mother got stabbed by her sister.

[REDACTED] has no known special needs or disabilities.

Per SDM: Investigative Track - P1 - Child Death

[REDACTED], TC, on 11/12/13 @ 1:17pm



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

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: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN:

Race:

Age: 3 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: 43 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: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] Race: White 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:

Name: [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] Race: [REDACTED] Age: 23 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: Unknown Participant [REDACTED] Unknown

Gender:

Date of Birth:

Participant 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] Investigation ID: [Redacted]
Referral Date: 11/12/2013 Assignment Date: 11/12/2013
Street Address: [Redacted]
City/State/Zip: [Redacted]

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. Row 1: 1, [Redacted], [Redacted], [Redacted], Neglect Death, [Redacted], [Redacted], [Redacted], Allegation Substantiated / Perpetrator Substantiated, Yes, [Redacted], 12/18/2013

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: CPIT decided to classify this case as neglect death because evidence showed that [Redacted] had likely rolled over on [Redacted] killing her. The blood in the baby's nose showed that this was not a death from SIDS according to the medical staff at the [Redacted] Hospital. Mr. [Redacted] chose to sleep with his children which is unsafe when one is using drugs or one is obese. Mr. [Redacted] was a larger man and did take pain medicine.

D. Case Workers

Case Worker: [Redacted] Date: 12/18/2013
Team Leader: [Redacted] Date: 12/19/2013

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:

[Redacted] was deceased by the time CPSI [Redacted] got the case. She was not observed by CPSI [Redacted] as the case was not called in until about 30 hours after the child had passed. [Redacted] Hospital staff reported that the child had blood in her nares and that she appeared very white when she was seen as though she had lost blood.

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

The autopsy on [Redacted] is still pending. According to the medical examiner in [Redacted] did not die from shaken baby syndrome.

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



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

Case Name : ██████████

Investigation ID: ██████████

██████████ said that he got up at up about 3am to fix ██████████ a bottle. He said that ██████████ and her brother, ██████████ (age 3) sleep in the bed with him. He said that he fed ██████████ her bottle in the bed. He said that his mother-in-law, ██████████, lives in the home with them. He said that she gets up to go to work at 3:30. He said that she got up that day and came in and played with ██████████. He said that ██████████ left for work at about 4:45am. He said that when ██████████ left the house, she told ██████████ that ██████████ was awake. He said that he heard ██████████ get up about 5am. He said that she was getting ██████████ dressed for school. He said that he heard ██████████ leave. He said that he started to get up. He said that he looked at ██████████ and could tell that she was not okay. He said that he yelled out to ██████████ to call 911. CPSI ██████████ asked Mr. ██████████ how ██████████ was lying on the bed. He said that she was on her side. CPSI ██████████ asked him if it were normal for ██████████ to sleep in the bed with him. He said that he and ██████████ would prop ██████████ up in their bed because she would get congested. He said that ██████████ and ██████████ would sleep with them. CPSI ██████████ asked Mr. ██████████ if he or Ms. ██████████ use drugs. He said that they take only what they are prescribed. He said that he goes to ██████████ in ██████████ and sees ██████████ to get his medicine. CPSI ██████████ asked him what causes his pain. Mr. ██████████ explained that he has rheumatoid arthritis. He said that he worked at a saw mill most of his life. He said that he is trying to get disability. Later Mr. ██████████ killed himself after allegedly saying, "look what I did to my daughter".

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

██████████ reported to ██████████ that ██████████ had said that there had been blood on Mr. ██████████ shirt and on the bed when she ran into the room when he said to call 911 because ██████████ was not alright. The case was not called in to any investigators unril 30 hours after ██████████ had died so none of this was observed by anyone but ██████████.

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

Mr. ██████████ killed himself. He said to people that he had a secret that he needed to talk about and, "look what I did to may daughter".

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:	01/27/2014	Contact Method:	
Contact Time:	01:25 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	01/27/2014
Completed date:	01/27/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 01/27/2014 01:28 PM Entered By: [REDACTED]

No Letter A was done because the substantiated perpetrator is deceased.



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: 01/27/2014

Contact Method:

Contact Time: 01:15 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 01/27/2014

Completed date: 01/27/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 01/27/2014 01:18 PM Entered By: [REDACTED]

The fax number was given to CPSI [REDACTED] when she called [REDACTED] in [REDACTED] back. It is [REDACTED]. CPSI [REDACTED] faxed the request for information about pain meds of [REDACTED] and [REDACTED] to [REDACTED] in [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 01/27/2014 Contact Method:
 Contact Time: 01:00 PM Contact Duration: Less than 05
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 01/27/2014
 Completed date: 01/27/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Notation
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 01/27/2014 01:12 PM Entered By: [REDACTED]

CPSI [REDACTED] called [REDACTED] to get the fax number so that she could request information about what medicine [REDACTED] and [REDACTED] were prescribed. No one answered the phone.



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:	01/27/2014	Contact Method:	
Contact Time:	01:00 PM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	01/27/2014
Completed date:	01/27/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 01/27/2014 01:27 PM Entered By: [REDACTED]

The Initial and Closing Safety Assessments, the FAST, and an FFA have been completed. These reports have been printed and are in the file. The safety assessments both returned as safe. The FAST showed the need for services to be moderate.

The 740 was completed and printed for the hard copy and for distribution to the appropriate people.



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: 01/27/2014

Contact Method:

Contact Time: 11:30 AM

Contact Duration: Less than 01 Hour

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 01/27/2014

Completed date: 01/27/2014

Completed By: [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 01/27/2014 12:59 PM Entered By: [REDACTED]

CPSI [REDACTED] sent requests for medical records to [REDACTED] who provided medical care to [REDACTED] when she needed it.
 CPSI [REDACTED] asked if [REDACTED] were allergic to smoke and if [REDACTED] had ever discussed [REDACTED] congestion with the family.
 CPSI [REDACTED] sent requests to the [REDACTED] Hospital for the records of [REDACTED] death as well as any medical records that they may have for [REDACTED] excluding the day of her death as CPSI [REDACTED] already has those records.



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:	01/27/2014	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	Less than 30
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	01/27/2014
Completed date:	01/27/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Case Summary		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 01/27/2014 10:33 AM Entered By: [REDACTED]

According to DCS policy, any child death that is the result of the caretakers failure to meet childcare responsibilities is classified as neglect death. Neglect death is always treated as severe child abuse. CPIT decided to classify this case as neglect death because evidence showed that [REDACTED] had likely rolled over on [REDACTED] killing her. The blood in the baby's nose showed that this was not a death from SIDS according to the medical staff at the [REDACTED] Hospital. Mr. [REDACTED] chose to sleep with his children which is unsafe when one is using drugs or one is obese. Mr. [REDACTED] was a larger man and did take pain medicine. His behavior after [REDACTED] death, including killing himself and allegedly saying to others . . . , "look what I did to my daughter" shows that he believed that he was reponsible for her death. [REDACTED] reported that when Mr. [REDACTED] called out to her to call 911 because [REDACTED] was not okay, she went into the room and saw blood on Mr. [REDACTED] shirt and on the bed. She described it to her mother as, . . . "a pool of blood". Hospital Staff at [REDACTED] Hospital also said that when [REDACTED] came in, she was extremely pale indicating a loss of blood. Services have been offered to the surviving family members, but they refused. Christmas gifts were provided to the family through the [REDACTED] Child Advocacy Center.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 12/23/2013 Contact Method: Face To Face
 Contact Time: 10:00 AM Contact Duration: Less than 30
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 01/27/2014
 Completed date: 01/27/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Other Persons Living in Home Interview/Observation,Parent/Caretaker Interview,Sibling Interview/Observation
 Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 01/27/2014 10:41 AM Entered By: [REDACTED]

CPSI [REDACTED] went to the home of [REDACTED] to take Christmas gifts. [REDACTED] and [REDACTED] were home as were [REDACTED] and [REDACTED] and [REDACTED]. CPSI [REDACTED] explained that the people at the [REDACTED] Child Advocacy Center had provided some Christmas gifts for the family. [REDACTED] and [REDACTED] both appreciative. CPSI [REDACTED] offered services to the family again. [REDACTED] said that she knows that she needs counseling, but she is not ready yet. She said that she knows how to get counseling when it is time. CPSI [REDACTED] said that the case will be closed. CPSI [REDACTED] said that she appreciated Ms. [REDACTED] time. CPSI alird left the home.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/20/2013

Contact Method: Correspondence

Contact Time: 01:00 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 12/20/2013

Completed date: 12/20/2013

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: 12/20/2013 03:50 AM Entered By: [REDACTED]

CPSI [REDACTED] requested an SSMS check on [REDACTED] and [REDACTED] and [REDACTED].



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
 Contact Date: 12/19/2013 Contact Method: Attempted Face To Face
 Contact Time: 01:30 PM Contact Duration: Less than 15
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 12/20/2013
 Completed date: 12/20/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Other Child Living in the Home Interview/Observation,Other Persons Living in Home Interview/Observation,Parent/Caretaker Interview,Sibling Interview/Observation
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/20/2013 12:44 AM Entered By: [REDACTED]

CPSI [REDACTED] went to the home of [REDACTED] to deliver Christmas gifts that she had gotten together for [REDACTED] and [REDACTED] and [REDACTED]. CPSI [REDACTED] went to the porch and knocked on the door. CPSI [REDACTED] could hear a television on inside the home, but no one came to the door. CPSI [REDACTED] called out that she had Christmas gifts for the family, but still no one answered the door. CPSI [REDACTED] waited for a few minutes on the porch and left.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 12/09/2013

Contact Method: Face To Face

Contact Time: 11:00 AM

Contact Duration: Less than 45

Entered By: [REDACTED]

Recorded For:

Location: Family Home

Created Date: 12/13/2013

Completed date: 12/20/2013

Completed By: [REDACTED]

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

Contact Type(s): ACV Interview/Observation,Other Child Living in the Home
Interview/Observation,Parent/Caretaker Interview

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/13/2013 12:49 PM Entered By: [REDACTED]

CPSI [REDACTED] and DCS [REDACTED] went to the home of [REDACTED] to see her and [REDACTED]. Present at the home were [REDACTED], [REDACTED], and [REDACTED] nephew, [REDACTED]. CPSI [REDACTED] asked how the family was doing. Ms. [REDACTED] said they were doing not too good. She said that she does think that she needs counseling, but she is too numb for it right now. CPSI [REDACTED] said that she would make the referral when she was ready for counseling. CPSI [REDACTED] asked how [REDACTED] is doing. Ms. [REDACTED] said that [REDACTED] asks a lot about his father. She said that [REDACTED] knows that his father and baby [REDACTED] are up there watching them. CPSI [REDACTED] asked [REDACTED] if they plan to move. She said that they would like to move, but she is not sure with all their expenses, if they can afford to move. She said that they have to pay for two funerals. She also said that her oldest sister is in jail and trying to get back her kids so she and her mother are spending money trying to help her right now.

CPSI [REDACTED] saw [REDACTED]. His mother said [REDACTED] is not feeling too well. She said she thinks she thinks he has the stomach virus. [REDACTED] stayed away from CPSI [REDACTED] and DCS Intern [REDACTED] and just watched us. CPSI [REDACTED] tried to talk to him, but he did not answer her questions. [REDACTED] was dressed appropriately and he was clean. [REDACTED] was also clean. The children were watching a movie on television that seemed inappropriate for their age. CPS [REDACTED] believes the movie was Anaconda. CPSI [REDACTED] asked Ms. [REDACTED] about bunkbeds. She said that they could use bunkbeds. She said that they're not sure if they're going to move or what they're going to do right now. CPSI [REDACTED] did not ask Ms. [REDACTED] anything pertaining to how [REDACTED] died. [REDACTED] said that he was going to keep in touch with the family about that. Mr. [REDACTED] asked CPSI [REDACTED] not to ask about it as she might be considered an outsider and make the family mad.

CPSI [REDACTED] and DCS Intern [REDACTED] both expressed sympathy to the family for their great loss. CPSI [REDACTED] asked Ms. [REDACTED] to stay in touch with her regarding what she needs. CPSI [REDACTED] thanked Ms. [REDACTED] for allowing them into her home and DCS Intern [REDACTED] and CPSI [REDACTED] left.



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: 11/21/2013 Contact Method: Face To Face
 Contact Time: 01:00 PM Contact Duration: Less than 03 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Other Community Site Created Date: 12/19/2013
 Completed date: 12/20/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Notation,Collateral Contact
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/19/2013 11:22 AM Entered By: [REDACTED]

CPSI [REDACTED] attended a meeting this date that was held to discuss what the general feeling was about what had happened to [REDACTED]. CPSI [REDACTED] and DCS Intern [REDACTED] were in attendance from DCS. [REDACTED] who is a doctor at [REDACTED] Hospital was there. [REDACTED] from the [REDACTED] Sheriff's Department was there. [REDACTED] who is the [REDACTED] Coroner was there. [REDACTED] who is the EMS Director in [REDACTED] was there.

The group decided that first they would listen to the 911 call that was made on 11/11/13 at about 6:55am. The call lasted about 6 minutes. The 911 worker talked Ms. [REDACTED] through giving [REDACTED] CPR and counted with her while she did it. Ms. [REDACTED] was begging [REDACTED] to breathe for her. Ms. [REDACTED] was in obvious distress. Ms. [REDACTED] voice was the only voice heard on the 911 call.

The group discussed that [REDACTED] was the first responder on the scene. She ran with the baby from the house to the ambulance so that no one actually went inside the house to see the scene. No photographs of the house were taken that day. No photographs of [REDACTED] were taken that day. The group said that it was a mistake that no investigators including DCS were contacted about the case until 30 hours after [REDACTED] had died. It was also a mistake that no photographs were taken although CPSI [REDACTED] had taken some that showed the bed where [REDACTED] had died and some photos of the home as well as photos of the other children in the home.

Members of the group said that it was rumored that Mr. [REDACTED] had said things about how his life had brought him trouble and he had caused trouble, but he could not believe what he had done to his daughter. He had told family members that he had a secret that he needed to discuss with them after [REDACTED] funeral.

[REDACTED] reported that [REDACTED] told him information that he wrote into a note at 10 PM on November 13, 2013. The note says: As I was notifying the family of the death of [REDACTED], (Mr. [REDACTED] infant daughter had passed away on Monday) the deceased's mother-in-law, Ms. [REDACTED] asked to speak to me outside. Ms. [REDACTED] said that she and her daughter had been to [REDACTED]. Her daughter became emotional and said that when the incident happened on Monday that when [REDACTED] went into the bedroom after hearing the father yell out that the baby wasn't breathing, when she went into the room there was blood on the front of [REDACTED] shirt and a pool of blood on the bed. This information was not given to the ME office on the original interview. This note was written by [REDACTED] from information given by [REDACTED]. Ms. [REDACTED] number is [REDACTED]. She



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

is the mother-in-law of [REDACTED] and the mother of [REDACTED].

CPSI [REDACTED] received a copy of the statement detailing the EMS run for [REDACTED]. Of note here again is the blood under [REDACTED] right nostril, her distended abdomen, her very pale coloring, and cyanotic head. The EMS personnel were [REDACTED] and [REDACTED]. At the end of his note, he said that neither he nor his partner saw the inside of the home or the actual site of the incident or the parent until they arrived at the hospital because the baby was brought out to the hospital to them by the first responder [REDACTED]. She lives nearby and arrived at the house first.

There was a note from [REDACTED] saying that she arrived one to two minutes before EMS did. She said that when she entered the home, Mr. [REDACTED] was at the kitchen table crying and [REDACTED] was in the bedroom pleading with [REDACTED] to breath and administrating CPR. The baby was unresponsive and not breathing. The baby was already blue, purple, and ash tone colors to her face and neck area. She had dried blood around the outer edge of her nostrils. She made the decision to meet EMS at the truck with the baby.

[REDACTED] gave CPSI [REDACTED] the Reporting Form for the Sudden Unexplained Infant Death Investigation that he had filled out with the family. The report said that [REDACTED] was sleeping in bed with her father who was 5'8" and 200 pounds. It said that she was 2 feet away from him in bed. The report said that [REDACTED] was found not breathing and that no one saw her stop breathing. In the report, it describes how [REDACTED] was found not breathing during a routine check when the other kids in her family were going to school. The report describes the blood in the baby's nostril. It says [REDACTED] was warm and limp and flexible when found. The report says that CPR was given by Ms. [REDACTED] by chest compressions. [REDACTED] had cold symptoms 3-4 weeks ago. She had her shots at birth. She weighed 5 pounds 13 ounces and was 19.5 inches long. [REDACTED] had pre-eclampsia when she was pregnant. [REDACTED] was delivered by C-section. She had last eaten at 3am and was fed 4 ounces of Good Start-Gentle Formula by her father, [REDACTED]. She was not put t bed with a bottle. Ms. [REDACTED] started her pre-natal care at 3 months. Ms. [REDACTED] did smoke cigarettes while she was pregnant. The home had been sprayed for roaches and spiders on 11/6/13 by [REDACTED].

Lastly, CPSI [REDACTED] got a copy of the [REDACTED] Sheriff's Office Preliminary Investigative Report. The summary reads: On this date we were dispatched to the [REDACTED] residence at approximately 6:55. Upon arrival EMS was working on the child in the ambulance. I spoke to Mr. and Mrs. [REDACTED]. They advised me the child was fine at 3 and then right before they called [REDACTED] woke up and the child wasn't breathing. He said he yelled at Ms. [REDACTED] who was on the couch and they tried CPR while calling 911. They said the child was sleeping in the bed with Mr. [REDACTED] and the victim's brother, [REDACTED]. They said the child was lying on her side and back throughout the night. I asked if the child had had any problems in the past and they said right after she was born she had a cold and kept getting stuffed up. They said she got better and they thought maybe she was allergic to smoke. They said a few days ago she started getting congested again. I went to the hospital with the family and the ambulance and shortly after the child was pronounced dead. I spoke with the doctor, [REDACTED], and he advised me the investigation was inconclusive right now but that the child would be going to the coroner immediately for further testing.

Mr. [REDACTED] said that Mr. [REDACTED] had a new bottle of Xanax in his front pocket. Of 120 pills, 98 were remaining which means that 22 pills were missing. [REDACTED] had no shirt on when EMS arrived. Had he taken off his shirt so no one would see the blood on it?

Mr. [REDACTED] killed himself at a neighbor's house. The tape of the neighbor describing Mr. [REDACTED] killing himself was played for the group. The man was [REDACTED]. Mr. [REDACTED] killed himself at Mr. [REDACTED] house at [REDACTED]. Mr. [REDACTED] said that Mr. [REDACTED] said, "I'm going to do them a favor" and pulled his pistol out of his pocket and shot himself. Mr. [REDACTED] said that Mr. [REDACTED] was drunk. Mr. [REDACTED] said that Mr. [REDACTED] gave him 2 wallets. He said that one was money for [REDACTED] grave and the other was money for his old lady. He said that [REDACTED] [REDACTED] broke down and cried. He said, "I've lost everything". He said that Mr. [REDACTED] told him to call 911. He said that there is no helping me; my life is over.

The team agreed that based on the evidence that it is likely that [REDACTED] either rolled over on [REDACTED] and killed her or shook her and killed her. We are waiting for the results of the autopsy.

The team decided that the meeting was finished, and that we would meet again if necessary. CPSI [REDACTED] thanked everyone for including her in the meeting and left.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [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:	11/19/2013	Contact Method:	
Contact Time:	10:36 AM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	11/19/2013
Completed date:	11/19/2013	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: 11/19/2013 10:37 AM Entered By: [REDACTED]

Compliance is being checked and case deficits acknowledged based on when the review was conducted.



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]
Case Status: Close

Case Name: [REDACTED]
Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED] Status: Completed
Contact Date: 11/19/2013 Contact Method:
Contact Time: 09:30 AM Contact Duration: Less than 45
Entered By: [REDACTED] Recorded For:
Location: DCS Office Created Date: 12/20/2013
Completed date: 12/20/2013 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: 12/20/2013 03:18 AM Entered By: [REDACTED]

CPSI [REDACTED] ran local background checks on [REDACTED] and [REDACTED].

In [REDACTED], [REDACTED] had the following: He had booked into jail 12/25/2007; he had been charged with criminal impersonation 12/13/2001; He had been charged with drunkenness, driving under the influence, and all other offenses on 5/3/12; He had been charged with public drunk 5/3/12; He had been charged with failure to pay costs and fines 2/1/13.

In [REDACTED], [REDACTED] had the following: She was charged 2/9/07 with drug/narcotic violations and drug equipment violations; She had been charged with all other offenses and as a runaway 8/5/07; she was charged 1/12/12 with theft of property, aggravated burglary, and vandalism; she was charged 7/26/12 with failure to pay costs and fines; she was charged 8/22/12 with capias/FTP arrest; she was charged 11/19/12 with failure to pay costs and fines;she had been charged with aggravated assault domestic related and resisting arrest 11/20/12; She was charged 12/5/12 with appearance bond; She was charged 12/6/12 with violation of community corrections; she was charged 12/12/11 with driving on a revoked, suspended, or cancelled drivers license, financial responsibility compliance, speeding, child restraint, and appearance bond; She was charged 1/7/13 with violation of community corrections; She was charged 5/3/12 with driving under the influence, 1st offense, driving on revoked 3rd offense, expired registration,resisting arrest, and all other offenses; She was charged 5/4/12 with appearance bond.

CPSI [REDACTED] ran the online internet checks including the national sex offender registry, the tennessee felony offender registry, the tennessee meth offender registry, and the tennessee elder abuse registry. Tennessee's jurisdiction was down when CPSI [REDACTED] checked that sex offender registry. The TN felony offender registry was clear for [REDACTED] and [REDACTED] and [REDACTED], and CPSI [REDACTED] was able to print all three hard copies. The TN meth offender registry was clear for [REDACTED] and [REDACTED] and [REDACTED], but the hard copies would not print. The TN elder abuse registry was clear for [REDACTED] and [REDACTED] and [REDACTED] but only two of the hard copies would print.



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: 11/15/2013 Contact Method: Phone Call
 Contact Time: 02:35 PM Contact Duration: Less than 15
 Entered By: [REDACTED] Recorded For:
 Location: Other Community Site Created Date: 12/20/2013
 Completed date: 12/20/2013 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: 12/20/2013 02:31 AM Entered By: [REDACTED]

CPSI [REDACTED] called [REDACTED], the [REDACTED] Coroner, to ask him if it were normal for a baby who may have died from a congenital problem or from SIDS to have blood around his or her nare. Mr. [REDACTED] answered the phone, and CPSI [REDACTED] explained who she was and what her questions were in this case. He said that he would like to have a conversation about this case in person. CPSI [REDACTED] agreed and asked him when he could meet. He said that he would be out of town the ewst of this week. CPSI [REDACTED] and Mr. [REDACTED] agreed to meet with [REDACTED] and others that Mr. [REDACTED] would gather on November 21st at the [REDACTED] Sheriff's Deaprtment at 1pm. CPSI [REDACTED] thanked Mr. [REDACTED] for his time and hung up.



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:	11/15/2013	Contact Method:	Attempted Face To Face
Contact Time:	10:00 AM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:	Family Home	Created Date:	11/20/2013
Completed date:	11/20/2013	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: 11/20/2013 03:15 PM Entered By: [REDACTED]

CPSI [REDACTED] went to the home of [REDACTED] and her family. However, no one was home.



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: 11/14/2013

Contact Method:

Contact Time: 06:34 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 11/20/2013

Completed date: 11/20/2013

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: 11/20/2013 03:08 PM Entered By: [REDACTED]

CPSI [REDACTED] learned from TC [REDACTED] that [REDACTED] was deceased due to a self-inflicted gunshot wound.



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: 11/13/2013 Contact Method:
 Contact Time: 07:00 PM Contact Duration: Less than 02 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Other Community Site Created Date: 12/20/2013
 Completed date: 12/20/2013 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: 12/20/2013 08:19 AM Entered By: [REDACTED]

CPSI [REDACTED] checked the history on this family. [REDACTED] has never been an alleged perp on a case with her biological children before. She was the alleged perp on two assessment cases that required no services with [REDACTED], one of [REDACTED] older sons. The allegations in one of these cases was physical abuse (8/4/11) and the other was drug exposed child (12/15/11). [REDACTED] was the alleged perp against his older children, [REDACTED], and [REDACTED] in cases with allegations of drug exposed (6/17/2004), physical abuse (6/17/2004), and environmental neglect (6/17/2004). He was indicated for environmental neglect and drug exposed child. He had been smoking 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: 11/13/2013

Contact Method: Face To Face

Contact Time: 02:40 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 12/20/2013

Completed date: 12/20/2013

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: 12/20/2013 02:02 AM Entered By: [REDACTED]

CPSI [REDACTED] saw Dr. [REDACTED] at [REDACTED] Hospital. CPSI [REDACTED] showed him that she had a release of information to get information about [REDACTED]. CPSI [REDACTED] asked him how he thought [REDACTED] died. He said that the family had a lot of congenital anomalies, and he would not be surprised if they discovered that she had something wrong with her from birth that had killed her. He said that he knew that many of her family members had cleft palates and that sort of thing. Dr. [REDACTED] did tell CPSI [REDACTED] that the nurses had mentioned that [REDACTED] had been extremely pale when she had been brought in. He said that he could not explain that, but many people had commented that she was just very very pale. CPSI [REDACTED] thanked him for talking with her.



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: 11/12/2013 Contact Method: Face To Face
 Contact Time: 03:00 PM Contact Duration: Less than 02 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 11/20/2013
 Completed date: 11/20/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Initial ACV Face To Face,Other Child Living in the Home Interview/Observation,Other Persons Living in Home Interview/Observation,Parent/Caretaker Interview,Sibling Interview/Observation

Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 11/20/2013 03:02 PM Entered By: [REDACTED]

Home Visit/Face to Face

Child Protective Services Investigator (CPSI) [REDACTED] and [REDACTED] Sheriffs Deputy [REDACTED] made a home visit to initiate the investigation into the death of [REDACTED]. When CPSI [REDACTED] and Deputy [REDACTED] arrived, there were people who were not introduced to CPSI [REDACTED] and Deputy [REDACTED]. They left. [REDACTED] and two other boys were in the living room watching television. Mr. [REDACTED] and Ms. [REDACTED] were sitting in the kitchen at the table. In order to engage the family, CPSI [REDACTED] introduced herself and explained that it is protocol for an investigation to be done into any child death. CPSI [REDACTED] told the family how sorry she was for their loss. CPSI explained all forms and engaged the family during the paperwork process. The custodian signed the Clients Rights Handbook Signature Page, Native American Heritage Veto Verification, Health Insurance Portability and Accountability Act (HIPAA) Acknowledgement form, Notice of Equal Access to Programs and Services, and the Release of Information. CPSI obtained signed acknowledgements of such and copies have been placed into the file.

***Section I:**

[REDACTED] was deceased and had already been removed from the home when CPSI [REDACTED] arrived.

***Section II: Interview with the mother**

CPSI [REDACTED] spoke to [REDACTED] in the kitchen in the home. She said that she could not go back into the bedroom where [REDACTED] had died. She said that [REDACTED] had died in the room where she slept with her dad and her brother. CPSI [REDACTED] asked Ms. [REDACTED] to explain what had happened that morning up until they found [REDACTED] had passed away. Ms. [REDACTED] said that her alarm clock went off at 6am. She explained that she got [REDACTED] her nephew, ready for school. CPSI [REDACTED] asked her if she had custody of [REDACTED]. Ms. [REDACTED] explained that her sister, [REDACTED], had been killed in a car accident 4 years ago. She said that at that time, [REDACTED] had been given custody of [REDACTED] and [REDACTED] who were [REDACTED] sons. She said that [REDACTED] is her mother and was [REDACTED] mother. She said that [REDACTED] and [REDACTED] boys, [REDACTED] and [REDACTED] live with them. Ms. [REDACTED] said that her mother goes to work, so she gets [REDACTED] up and ready for school in the morning. She said that [REDACTED] had gotten on the bus and left the home. She said that it was cold that morning so she had gone to stand in front of the heater after he left. She said that she was just standing there. Then she walked into the bedroom. She said that she saw everyone, including



Tennessee Department of Children's Services
Case Recording Summary

Case Id: ██████████

Case Name: ██████████

Case Status: Close

Organization: ██████████

██████████ in the bed. She said that she walked back out and stood in front of the heater. She said that then her husband started yelling that ██████████ was not okay. She said that she called 911. She said that the 911 staff coached her through CPR while the ambulance was on its way. She said that ██████████ came and gave the baby CPR and then took the baby to the ambulance when it came. She said that that staff at the hospital said that they had found a tiny pulse in ██████████ but they could not bring her back. CPSI ██████████ asked Ms. ██████████ if ██████████ had been sick. She said that when she first came home from the hospital, she was congested. She said that they took ██████████ to see Dr. ██████████ at the ██████████ Health Department. Ms. ██████████ said that they thought ██████████ was allergic to smoke. She said that they tried to smoke outside all the time at first. She said that they had not been as careful recently. She said that recently, ██████████ had been congested again, and she was going to take her to the doctor. CPSI ██████████ asked if ██████████ always slept in the bed with her father and brother. Ms. ██████████ said that she had slept in a baby bed at first, but then they put ██████████ in their bed. She said that she sleeps on the couch every night because there is not really room in the bed for all of them. CPSI ██████████ asked Ms. ██████████ if she or Mr. ██████████ use drugs. Ms. ██████████ said that they both take medicine for pain. She said that it is prescribed. She said that she has scoliosis. She said that she does not work right now. She said that the family does get food stamps, families first, WIC, and TNCare. CPSI ██████████ said that she knew there had been a stabbing in the home and asked if there were problems with domestic violence. Ms. ██████████ said that Mr. ██████████ had dropped the charges against her for that. She said that there were no other domestic violence charges. CPSI ██████████ asked Ms. ██████████ if there was anything else she wanted to talk about. She cried and asked why God had taken her baby. She said that ██████████ was the first girl in a very long time. She said that she could not believe that God had taken her baby girl.

*Section III: Interview with the father

CPSI ██████████ spoke to ██████████, the father of ██████████ father at the kitchen table. He said that he got up at up about 3am to fix ██████████ a bottle. He said that ██████████ and her brother, ██████████ (age 3) sleep in the bed with him. He said that he fed ██████████ her bottle in the bed. He said that his mother-in-law, ██████████, lives in the home with them. He said that she gets up to go to work at 3:30. He said that she got up that day and came in and played with ██████████. He said that ██████████ left for work at about 4:45am. He said that when ██████████ left the house, she told ██████████ that ██████████ was awake. He said that he heard ██████████ get up about 5am. He said that she was getting ██████████ dressed for school. He said that he heard ██████████ leave. He said that he started to get up. He said that he looked at ██████████ and could tell that she was not okay. He said that he yelled out to ██████████ to call 911. CPSI ██████████ asked Mr. ██████████ how ██████████ was lying on the bed. He said that she was on her side. CPSI ██████████ asked him if it were normal for ██████████ to sleep in the bed with him. He said that he and ██████████ would prop ██████████ up in their bed because she would get congested. He said that ██████████ and ██████████ would sleep with them. CPSI ██████████ asked Mr. ██████████ if he or Ms. ██████████ use drugs. He said that they take only what they are prescribed. He said that he goes to ██████████ in ██████████ and sees ██████████ to get his medicine. CPSI ██████████ asked him what causes his pain. Mr. ██████████ explained that he has rheumatoid arthritis. He said that he worked at a saw mill most of his life. He said that he is trying to get disability.

CPSI ██████████ spoke with the family together and explained that because of a drug history with the family, a hair follicle drug screen would need to be done on Mr. ██████████ and Ms. ██████████. Both said that that would not be a problem. They said that they understood. CPSI ██████████ said that it was protocol to do a drug screen when there is a drug history. Again the family said that they were okay with that. CPSI ██████████ asked if there was anything that she could do for the family. Mr. ██████████ and Ms. ██████████ said no. CPSI ██████████ said that she could offer counseling for the family. She said that losing a baby is very difficult, and that it is normal to need someone to talk to in such tragic situations. Mr. ██████████ and Ms. ██████████ said no. CPSI ██████████ asked for the number of ██████████ so that she could call if necessary. The number is ██████████. ██████████ and ██████████, the other sister of ██████████, arrived at the home at that time. ██████████ had her two sons with her.

*Section IV: Interview with other household members

CPSI ██████████ observed ██████████. He was in the living room with his cousins. CPSI ██████████ tried to speak to ██████████ but he was too active. He was clean and dressed appropriately. He was three in October and does not understand what has happened. He was playful with his cousins. CPSI ██████████ could not interview ██████████ based on his age. CPSI ██████████ spoke to ██████████. CPSI ██████████ asked ██████████ what had happened the morning that the baby died. She said that she had gotten up to go to work. She said that she gets up every day at 3:30am. She said that she works at ██████████ in ██████████ which is 45 minutes away. She said that she walked in and played with ██████████ that morning. She said that ██████████ was playful and kicking her feet. She said that the baby seemed completely normal. She said that ██████████ was fine when she left the home. CPSI ██████████ asked her what kind of parents ██████████ and ██████████ were to ██████████. She said that they were great. She said that they were



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

both so excited to have a girl. She said that [REDACTED] was a great mom to [REDACTED]. CPSI [REDACTED] saw [REDACTED]. He was in the living room with his cousins. He was clean and dressed appropriately. CPSI [REDACTED] spoke to [REDACTED] and noticed that CPSI [REDACTED] had an iPhone. He asked if he could play with it. CPSI [REDACTED] showed him where Angry Birds was and started it for him. CPSI [REDACTED] said that he could play one game and then she needed him to get focused and talk to her. [REDACTED] agreed. When he was done, CPSI [REDACTED] asked [REDACTED] about what had happened on the day that [REDACTED] had died. He said that he was home when [REDACTED] said that the baby was not okay. He said that he had not gone to school yet. CPSI [REDACTED] asked him what happened next. He said that he did not know. CPSI [REDACTED] asked him how [REDACTED] was that morning. He said that he did not see her. [REDACTED] will be 6 years old in December. CPSI [REDACTED] saw [REDACTED]. He was in the living room with his cousins. [REDACTED] was 4 years old in September. He was clean and dressed appropriately. He was playful with his cousins. CPSI [REDACTED] tried to speak to [REDACTED] but [REDACTED] was shy. He would not talk to [REDACTED]. He did want to play with CPSI [REDACTED] work telephone. CPSI [REDACTED] explained that it was her work phone, and he started to cry.

*The family identified [REDACTED] as a support. She is [REDACTED] mother. Her number is [REDACTED] or [REDACTED].

Section V: CPSI observed:

Document: CPSI [REDACTED] took photos of [REDACTED]. CPSI [REDACTED] also took photos of the bed in which [REDACTED] died.

1. interactions between mother/father and child N/A

2. observation and presentation (slurred speech, injuries, developmental delays or handicaps, clothing, red eyes, etc.) of child and other individuals in the home [REDACTED] was very tearful. She had difficulty talking with CPSI [REDACTED] at some times. Mr. [REDACTED] seemed stoic. He did not talk unless asked a question. He did not soothe Ms. [REDACTED] when she cried.

3. observation of interactions between mother/father and other children in home Ms. [REDACTED] and Mr. [REDACTED] both spoke to [REDACTED] while CPSI [REDACTED] was there. They spoke softly and kindly to him. They were patient with him.

4. observation of physical environment (inside and outside) The home was a trailer. The floor in the kitchen was bare wood as was part of the kitchen table. The living room was dark; no lights were on. The television gave off the only light. The children were watching Sponge Bob. There was a bedroom with fabric draped over the door opening. CPSI [REDACTED] did not go back into what was identified as Ms. [REDACTED] and [REDACTED] and [REDACTED] room. CPSI [REDACTED] asked if they all slept together. [REDACTED] said that they did. CPSI [REDACTED] asked if she were interested in bunk beds. Ms. [REDACTED] said no. On the other side of the kitchen was the bedroom where Mr. [REDACTED] and [REDACTED] and [REDACTED] slept. The bed was unmade. The bed took up most of the room. The home was generally clean. It was not cluttered. The trailer did not look to be in good repair. Outside the home, there was a small wooden porch outside the front door. There were no railings. The stairs up to the porch were also not in good repair. A lawn mower was pushed up to the porch. There was litter around the home. CPSI [REDACTED] noted that there were rust spots on the trailer.

*Required: Section VI: Next Steps: CPSI [REDACTED] asked the family to consider if they could use counseling. CPSI [REDACTED] said that people grieve in different ways, and that can be hard to understand for two people going through a loss together. She said that she hoped that the family could come through the loss together. CPSI [REDACTED] said that DCS wants to help keep families healthy and that if they knew of a way that DCS could help them with that, all they had to do was ask. CPSI [REDACTED] said that also if they decided that they wanted bunk beds, to let her know. CPSI [REDACTED] said that she would request hair follicle screens for Mr. [REDACTED] and Ms. [REDACTED]. She said that she would let them know when that was approved so they could get that done. CPSI [REDACTED] said that she would be back soon to see how they were. CPSI [REDACTED] gave all the adults present her contact information in case anyone needed anything.



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: 11/12/2013 Contact Method:
 Contact Time: 12:00 PM Contact Duration: Less than 30
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 12/20/2013
 Completed date: 12/20/2013 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: 12/20/2013 12:52 AM Entered By: [REDACTED]

ESTABLISH: 7/22/13

VICTIM(S): [REDACTED]

ALLEGATION(S):Neglect Death

ALLEGED PERP(S): Unknown

PRIORITY ASSIGNED:1

INTAKE DATE: 11/12/13

RESPONSE DATE: 11/12/13

DUE DATE: 11/13/13

DATE THE NOTICES WERE SENT TO THE JUDGE AND THE REFERENT: 11/12/2013

Reporter states:

[REDACTED] (3) resides with his parents, [REDACTED] and [REDACTED], in [REDACTED]. It is believed there may be two other children in the home but their information is unknown. [REDACTED], [REDACTED] 4 month old sister, is deceased as of yesterday. Law enforcement arrived at the home at 6 a.m. to observe [REDACTED] being worked on in the ambulance. [REDACTED] was then transported to the ER where she was pronounced deceased. The father reported that [REDACTED] was asleep in the bed with him and [REDACTED]. The father reported that he checked on [REDACTED] at 3 a.m. and she was fine, but later checked and she was unresponsive and not breathing. The father reported this happened right before he called 9-1-1. The father reports that the mother was sleeping on the couch. The reporter feels that [REDACTED] death appears suspicious. The reporter states that according to the parents, there is a baby crib but [REDACTED] never slept in it. According to the parents, [REDACTED] was sick at one time, she had gotten better and then she was sick again. The parents reported that they smoke cigarettes and they thought that [REDACTED] may have been allergic to the cigarette smoke.

The reporter talked with the doctor at the hospital and reported that [REDACTED] will be going to a medical examiner and more will be known in the next few days concerning a possible cause of death.

According to the reporter, the parents have an arrest history for DUIs and assault. The assault charges were 2 occurrences, one being the mother stabbing the father and other where the mother got stabbed by her sister.

[REDACTED] has no known special needs or disabilities.



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:	11/12/2013	Contact Method:	Phone Call
Contact Time:	12:00 PM	Contact Duration:	Less than 15
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	01/27/2014
Completed date:	01/27/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	CPIT (Child Protective Investigative Team)		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 01/27/2014 10:52 AM Entered By: [REDACTED]

CPSI [REDACTED] called [REDACTED] to ask if he could go with her to the home to see the family of [REDACTED]. He said that he could. They made plans to meet at the family home later that day. CPSI [REDACTED] thanked [REDACTED] and hung up.



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:	11/12/2013	Contact Method:	Phone Call
Contact Time:	11:50 AM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:	DCS Office	Created Date:	01/27/2014
Completed date:	01/27/2014	Completed By:	[REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Referent Interview		
Contact Sub Type:			

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

Narrative Type: Original Entry Date/Time: 01/27/2014 10:54 AM Entered By: [REDACTED]

CPSI [REDACTED] called the referent on this case back to ensure that she had all the necessary information and that the information that was given is correct.



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: 10/15/2013

Contact Method: Face To Face

Contact Time: 02:00 PM

Contact Duration: Less than 30

Entered By: [REDACTED]

Recorded For:

Location: Hospital

Created Date: 12/20/2013

Completed date: 12/20/2013

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: 12/20/2013 02:26 AM Entered By: [REDACTED]

CPSI [REDACTED] went to the [REDACTED] Hospital and got the records that the hospital had for [REDACTED]. CPSI [REDACTED] looked over the records that the hospital gave her. The first page was a notice of death that said that [REDACTED] had died on 11/11/13 at 7:40am in ER-4. She was pronounced dead by [REDACTED] RN and [REDACTED] MD also signed off on the form. The next three pages were the Emergency Department Record. The chief complaint was listed as PT. found by parents not breathing this am. Mom reports feeding baby this am about 3am and baby was fine. CPR Initiated per family. On the third page, it was noted that the baby was extremely white and that a small amount of blood was noted at her right nare. On page 4 of the record given to CPSI [REDACTED] were the nurse's notes. This said: 0725:1 monthfemale brought to ER per EMS with CPR in progress Pt found by [REDACTED] not breathing abd called for EMS about 0655. CPR initiated per family @ scene, continued per EMS and in ER. Pt. being bagged on arrival. (Some medical lingo being left out here) Pt. extremely pale/white on arrival with small amount of blood noted at right nare. Abdomen distended. It is noted on this page that the child's body was transported to [REDACTED] with the medical examiner at 1315. On page 5 of the record, it is again noted that there was blood at the child's right nostril opening. On page 6 of the report is the report from [REDACTED] EMS. It is noted here again that the child had dried blood by her right nare. CPSI [REDACTED] did not know if blood were normal in a death that was thought to have been caused by a congenital problem. CPSI [REDACTED] decided to call the medical examiner of the coroner and find out.



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Assessment

Family Name: [Redacted]

TN DCS Intake ID #: [Redacted]

County: [Redacted]

Worker: [Redacted]

Date of Referral: 11/12/13 11:45 AM

Date of Assessment: 11/18/13 12:00 AM

Assessment Type: [X] Initial [] Closing [] Other

Number of Children in the Household: 2

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.
[X] 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: _____