



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

Intake

Intake ID: [REDACTED]
Intake Taken By: [REDACTED] Intake Date/Time: 11/22/2013 01:20 PM CT
Track Assigned: Investigation Priority Assigned: 1
Screened By: [REDACTED]
Date Screened: 11/22/2013

Investigation

Investigation ID: [REDACTED]
First County/Region: [REDACTED]
Date/Time Assigned : 11/22/2013 03:09 PM
First Team Leader Assigned: [REDACTED] Date/Time 11/22/2013 12:00 AM
First Case Manager [REDACTED] Date/Time 11/22/2013 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
[REDACTED]	9 Yrs	Neglect Death	Yes	[REDACTED]	Birth Mother
[REDACTED]	9 Yrs	Neglect Death	Yes	[REDACTED]	Birth Father

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: None
Narrative: TFACTS: Yes
Family Case Id: # [REDACTED]
Open Court Custody/FSS/FCIP No
Closed Court Custody No
Open CPS - ASMT # [REDACTED] (DEC) 11/13/13 (CM: [REDACTED])
ASMT # [REDACTED] (ENN/MDM) 3/15/13 (CM: [REDACTED])
Indicated No



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

Fatality No

Screened out Yes (2 - # [REDACTED] # [REDACTED])

History (not listed above):

[REDACTED] - 9/27/12 - Closed Resource Linkage
ASMT # [REDACTED] (MDM) 4/30/11 - No Services Needed
ASMT # [REDACTED] (ENN/MDM) 11/23/10 - No Services Needed
ASMT # [REDACTED] (MDM) 9/26/08 - No Services Needed
ASMT # [REDACTED] (MDM) 8/8/08 - No Services Needed
INV # [REDACTED] (PHN) 8/2/00 - Unfounded

County: [REDACTED]

Notification: None

School/ Daycare: [REDACTED]

Native American Descent: No

Directions: None Provided

Reporters name/relationship: [REDACTED]

Reporter states:

[REDACTED] (9) is in the care of her mother, [REDACTED], and father, [REDACTED].
The sister, [REDACTED] (14) lives in the home.

Currently, [REDACTED] is safe with her neighbor, [REDACTED] at [REDACTED]. Recently, the children were placed under an Immediate Protection Agreement (IPA) by DCS for neglect reasons.

Today, [REDACTED] was at the [REDACTED] Hospital. [REDACTED] has now been transferred to the [REDACTED] Center. An Autopsy is scheduled for 11/23/13 at 8:00 a.m.

Yesterday, [REDACTED] was at the [REDACTED] Hospital and was having difficulty breathing. [REDACTED] was admitted at the time and then discharged home yesterday. [REDACTED] was transported back to the [REDACTED] Hospital today following a 911 call that was made by the neighbor, [REDACTED], due to the same difficulties with her breathing. [REDACTED] was pronounced deceased upon arrival at the hospital. The cause of death is unknown at this time.

[REDACTED] has an extensive medical history and environmental neglect history. Her parents have been under investigation by DCS, since March of 2013.

[REDACTED] has already been safety placed by DCS with the neighbor, [REDACTED]. The reporter was not allowed into the parents home due to the parents being uncooperative, therefore the current condition of the home is unknown. The parents have a history of narcotic abuse, and distribution of drugs with law enforcement. The [REDACTED] Sherriffs Office is currently working this neglect death. The parents have not been arrested at this time. LE is waiting on the results of the autopsy.

This is all the information that the referent had at this time.

Per SDM: Investigative Track P1 - CHILD DEATH

[REDACTED] TC, on 11/22/13 @ 2:59pm

Notified Child Death/Child Near Death Notification Group via Email:

[REDACTED]



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





**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:** 45 Yrs
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:

Name: [REDACTED]
Gender: Female **Date of Birth:** [REDACTED] **Participant ID:** [REDACTED]
SSN: **Race:** **Age:** 14 Yrs (Est)
Address:
Deceased Date:
School/ ChildCare Comments:

Alleged Perpetrator: No
DCS Foster Child: No

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



**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: 9 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: 39 Yrs

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: 11/22/2013
Street Address: [Redacted]
City/State/Zip: [Redacted]

Investigation ID: [Redacted]
Assignment Date: 11/22/2013

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 two rows of allegations for Neglect Death.

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: Both Neglect Death indication will be classified AUPU. CPIT 5/28/14. Unanimous agreement.

D. Case Workers

Case Worker: [Redacted]

Date: 05/28/2014

Team Leader: [Redacted]

Date: 05/28/2014

E. Investigation Summary

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

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

[Redacted] was deceased. CM [Redacted] who received case as a transfer, found the home to be appropriate [note- apparently CM [Redacted] has observed the home to be messier in the past]. The older child, [Redacted], always has appeared dressed appropriately with no visible marks or bruising. She did not make any disclosures of abuse or neglect.

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

According to the autopsy report, the death was ruled to be "natural" and that she died due to epilepsy.



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

Both parents maintained that [REDACTED] has many special needs including epilepsy. They did admit her sleep apnea machine (BiPap) was not brought along with [REDACTED] but that [REDACTED] was not cooperative with wearing it even when she did have it. They said she was developmentally delayed and had the mentality of a toddler.

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

Reporter states: [REDACTED] (9) is in the care of her mother, [REDACTED], and father, [REDACTED]. The sister, [REDACTED] (14) lives in the home. Currently, [REDACTED] is safe with her neighbor, [REDACTED] at [REDACTED]. Recently, the children were placed under an Immediate Protection Agreement (IPA) by DCS for neglect reasons. Today, [REDACTED] was at the [REDACTED] Hospital. [REDACTED] has now been transferred to the [REDACTED]. An Autopsy is scheduled for 11/23/13 at 8:00 a.m. Yesterday, [REDACTED] was at the [REDACTED] Hospital and was having difficulty breathing. [REDACTED] was admitted at the time and then discharged home yesterday. [REDACTED] was transported back to the [REDACTED] Hospital today following a 911 call that was made by the neighbor, [REDACTED], due to the same difficulties with her breathing. [REDACTED] was pronounced deceased upon arrival at the hospital. The cause of death is unknown at this time. [REDACTED] has an extensive medical history and environmental neglect history. Her parents have been under investigation by DCS, since March of 2013. [REDACTED] has already been safety placed by DCS with the neighbor, [REDACTED]. The reporter was not allowed into the parents home due to the parents being uncooperative, therefore the current condition of the home is unknown. The parents have a history of narcotic abuse, and distribution of drugs with law enforcement. The [REDACTED] Sherriffs Office is currently working this neglect death. The parents have not been arrested at this time. LE is waiting on the results of the autopsy.

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

This case came to the attention of the Department on 11/22/2013 with the allegations of Neglect Death X2 with the ACV being [REDACTED] and the APs being birth parents [REDACTED] and [REDACTED]. This case was initially assigned to CM [REDACTED] as she had 2 open cases on the family. CM [REDACTED] met the reponse for this case. The case was later transferred to CM [REDACTED]. After investigating the case it was determined that the circumstances surrounding [REDACTED] death did not meet criteria for the allegations to be substantiated. She had many special needs including Prader-Willi Syndrome and the resulting morbid obesity. She was mentally retarded. She had epilepsy. She had a seizure the day before and was taken to [REDACTED]. According to the the autopsy report, the death was ruled to be "natural" and that she died due to epilepsy. There was concern that an unknown towel object was found in her vagina. It was tested and only contained the meds that [REDACTED] should have had in her system. Autopsy report did not find any injuries on/in the body. [REDACTED] body contained non-toxic levels of her medications, including the ones prescribed to her to treat the epilepsy. There was also concern that the parents did not send [REDACTED] sleep apnea machine with her while they voluntarily allowed her to stay across the street at neighbors/fellow church members on an IPA. [IPA was due to LE at the home stating the parents are about to be arrested (thus leaving [REDACTED] and her teenaged sister without custodians/caregivers) as they were caught selling morphine pills to undercover cops. Once IPA was done, LE ended up not arresting on spot and were going to go a different route in which the parents would have to turn themselves in]. The parents were able to assist in the caregiving [supervised] of [REDACTED] on the IPA as they were within walking distance of the home and transporting personal items to and from the homes was not a barrier for the family. It was reported that due to [REDACTED] behaviors and mental retardation, she would never keep the sleep machine on anyways throughout the night. Due to the autopsy report ruling her death to be natural and due to epilepsy, the allegations will be classified as ALLEGATION UNSUBSTANTIATED/PERPETRATOR UNSUBSTANTIATED. Presented to CPIT 5/28/14 with unanimous agreement.

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:	06/30/2014	Contact Method:	
Contact Time:	03:00 PM	Contact Duration:	Less than 05
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	06/30/2014
Completed date:	06/30/2014	Completed By:	[REDACTED]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 06/30/2014 02:00 PM Entered By: [REDACTED]

This case was reviewed and approved for closure by [REDACTED] Deputy Director of Investigations.



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: 05/28/2014 Contact Method:
 Contact Time: 12:55 PM Contact Duration: Less than 05
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 05/28/2014
 Completed date: 05/28/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Case Summary
 Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 05/28/2014 12:15 PM Entered By: [REDACTED]

CASE SUMMARY:

This case came to the attention of the Department on 11/22/2013 with the allegations of Neglect Death X2 with the ACV being [REDACTED] and the APs being birth parents [REDACTED] and [REDACTED]. This case was initially assigned to CM [REDACTED] as she had 2 open cases on the family. CM [REDACTED] met the reponse for this case. The case was later transferred to CM [REDACTED]. After investigating the case it was determined that the circumstances surrounding [REDACTED] death did not meet criteria for the allegations to be substantiated. She had many special needs including Prader-Willi Syndrome and the resulting morbid obesity. She was mentally retarded. She had epilepsy. She had a seizure the day before and was taken to [REDACTED]. According to the the autopsy report, the death was ruled to be "natural" and that she died due to epilepsy. There was concern that an unknown towel object was found in her vagina. It was tested and only contained the meds that [REDACTED] should have had in her system. Autopsy report did not find any injuries on/in the body. [REDACTED] body contained non-toxic levels of her medications, including the ones prescribed to her to treat the epilepsy. There was also concern that the parents did not send [REDACTED] sleep apnea machine with her while they voluntarily allowed her to stay across the street at neighbors/fellow church members on an IPA. [IPA was due to LE at the home stating the parents are about to be arrested (thus leaving [REDACTED] and her teenaged sister without custodians/caregivers) as they were caught selling morphine pills to undercover cops. Once IPA was done, LE ended up not arresting on spot and were going to go a different route in which the parents would have to turn themselves in]. The parents were able to assist in the caregiving [supervised] of [REDACTED] on the IPA as they were within walking distance of the home and transporting personal items to and from the homes was not a barrier for the family. It was reported that due to [REDACTED] behaviors and mental retardation, she would never keep the sleep machine on anyways throughout the night. Due to the autopsy report ruling her death to be natural and due to epilepsy, the allegations will be classified as ALLEGATION UNSUBSTANTIATED/PERPETRATOR UNSUBSTANTIATED.

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



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Narrative Type: Addendum 1 Entry Date/Time: 05/28/2014 12:16 PM Entered By: [REDACTED]
Presented to CPIT 5/28/14 with unanimous agreement.



Tennessee Department of Children's Services
Case Recording Summary

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

Case Recording Details

Recording ID:	██████████	Status:	Completed
Contact Date:	05/28/2014	Contact Method:	Face To Face
Contact Time:	09:45 AM	Contact Duration:	Less than 30
Entered By:	██████████	Recorded For:	
Location:	Other Community Site	Created Date:	05/28/2014
Completed date:	05/28/2014	Completed By:	██████████
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: 05/28/2014 10:43 AM Entered By: ██████████

CM presented this case to CPIT on this date. Unanimous agreement to classify both allegations of Neglect Death as ALLEGATION UNSUBSTANTIATED/PERPETRATOR UNSUBSTANTIATED. CPIT forms placed in case file.

Steps- submit case.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

Case Recording Details

Recording ID: [REDACTED]

Status: Completed

Contact Date: 05/22/2014

Contact Method: Face To Face

Contact Time: 11:00 AM

Contact Duration: Less than 01 Hour

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 05/28/2014

Completed date: 05/28/2014

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: 05/28/2014 10:48 AM Entered By: [REDACTED]

CM [REDACTED] LI [REDACTED] and PC [REDACTED] met at the [REDACTED] building to discuss case with LE. Det [REDACTED] was unable to be there but he was represented by [REDACTED]. During the discussion, it was agreed that at CPIT the allegations would be presented to be unsubstantiated. PC [REDACTED] reported he will add the case back to the CPIT docket.



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: 05/14/2014

Contact Method: Face To Face

Contact Time: 09:30 AM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: Other Community Site

Created Date: 05/28/2014

Completed date: 05/28/2014

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

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 05/28/2014 10:50 AM Entered By: [REDACTED]

CM scheduled this case to be put on the CPIT docket on this date now that autopsy results were received. Det. [REDACTED] was not able to make it due to training. There was discussed about the case by CPIT members. Dr. [REDACTED] ([REDACTED] child abuse doctor) looked over the autopsy report. It was discussed that it is leaning towards the allegations being unsubstantiated due to the evidence collected.



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: 05/12/2014

Contact Method:

Contact Time: 01:20 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location: DCS Office

Created Date: 05/12/2014

Completed date: 05/12/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 05/12/2014 12:45 PM Entered By: [REDACTED]

Autopsy results have been received and indicate that death resulted from seizure disorder. Will present this case to CPIT on 5/14/14 if [REDACTED] shows up and will close after that.



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: 05/09/2014 Contact Method: Correspondence
 Contact Time: 04:30 PM Contact Duration: Less than 05
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 05/28/2014
 Completed date: 05/28/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Collateral Contact
 Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 05/28/2014 11:54 AM Entered By: [REDACTED]

CM [REDACTED] received the autopsy report [REDACTED] Tennessee. Autopsy date 11/23/13. Reported 4/17/14. Client [REDACTED]
 Done by [REDACTED], MD. [REDACTED] Chief Deputy Medical Examiner.

Report shows [REDACTED] had her meds in her body at "non-toxic concentrations." It says she dies of seizure due to epilepsy. Other condition that significantly contributed to death is morbid obesity [Note- report says she had Prader-Willi Syndrome]. The manner of death is natural.

"No injuries are seen on external or internal examination of the body."

"Within the vagina is a 7-5/8 x 2-3/8, tan-white portion of thin, porous (foreign) material (i.e. towel) with areas of adherent, tan, soft, substance. "Testing of the substance that was found on the material (i.e. towel) removed from the vagina was positive for lamotrigine and diphenhydramine [REDACTED] meds].



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: 05/06/2014 Contact Method: Attempted Phone Call
 Contact Time: 04:12 PM Contact Duration: Less than 05
 Entered By: [REDACTED] Recorded For:
 Location: DCS Office Created Date: 05/06/2014
 Completed date: 05/06/2014 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)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 05/06/2014 03:13 PM Entered By: [REDACTED]

CM called [REDACTED] Detective [REDACTED] ([REDACTED]) to see if there has been an update to this case. CM received a message indicating the phone number was no longer active. CM will make attempts to get in contact with the Detective.

Narrative Type: Addendum 2 Entry Date/Time: 05/09/2014 02:16 PM Entered By: [REDACTED]

5/6/14- CM called [REDACTED] at [REDACTED] supervisor for [REDACTED] in attempt to get contact number. [REDACTED] said he did not have a cell number. CM asked if there was a office number. He said to call [REDACTED] and ask for major crimes. AT 4:38PM ET CM called and asked for major crimes but the phone just rang and no one answered.

Narrative Type: Addendum 1 Entry Date/Time: 05/06/2014 03:32 PM Entered By: [REDACTED]

430PM- CM called the number for Det. [REDACTED] [REDACTED] was told this was not the # to the S.O. but to another govt agency.



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: 05/06/2014

Contact Method: Face To Face

Contact Time: 12:50 PM

Contact Duration: Less than 15

Entered By: [REDACTED]

Recorded For:

Location: School

Created Date: 05/06/2014

Completed date: 05/06/2014

Completed By: [REDACTED]

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

Contact Type(s): Sibling Interview/Observation

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 05/06/2014 02:48 PM Entered By: [REDACTED]

CM went to [REDACTED] School to have face to face contact with [REDACTED] CM met with [REDACTED] privately in a conference room. She remembered CM from the last visit. She reported all is going well with her including home life. She reported her parents are doing OK. She said they have enough food at home and she is still getting lunch and breakfast at school. She discussed doing her end of course state exams and having to do some more finals. She had no questions for CM and stated there was nothing she thinks CM should know. She said she was on her way to eat lunch before CM came, so CM let her get back to lunch. CM noted no visible marks or bruising and she was appropriately dressed.



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: 04/30/2014

Contact Method:

Contact Time: 04:30 PM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 04/30/2014

Completed date: 04/30/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 04/30/2014 06:55 PM Entered By: [REDACTED]

Case staffed to discuss tasks remaining prior to case closure. Case is a fatality. Still waiting on autopsy. Last visited the family in March. Will continue to monitor. Also has open assessment on this same family that needs to be closed as it has gone overdue. Investigation will remain open until autopsy results are received. LI [REDACTED] will email [REDACTED] to see if she may be able to, at least, pull the preliminary autopsy report.



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: 02/25/2014

Contact Method:

Contact Time: 10:25 AM

Contact Duration: Less than 05

Entered By: [REDACTED]

Recorded For:

Location:

Created Date: 02/25/2014

Completed date: 02/25/2014

Completed By: [REDACTED]

Purpose(s): Safety - Child/Community

Contact Type(s): Administrative Review

Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/25/2014 12:28 PM Entered By: [REDACTED]

Case staffed to discuss tasks remaining prior to case closure. Case is a fatality. Waiting on autopsy. Just saw child on 02/06. Will continue to monitor. Also has open assessment that will be closed prior to going overdue. Investigation will remain open until autopsy results are received.



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: 02/06/2014 Contact Method: Face To Face
 Contact Time: 09:32 AM Contact Duration: Less than 45
 Entered By: [REDACTED] Recorded For:
 Location: Family Home Created Date: 02/06/2014
 Completed date: 02/06/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Alleged Perpetrator Interview,Parent/Caretaker Interview,Sibling Interview/Observation
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 02/06/2014 10:37 AM Entered By: [REDACTED]

CM made an unannounced home visit to the family's home [REDACTED]. This is the second home on the left white in color. CM observed a older model blue Buick sedan in the driveway and a wooden sign above the door that states [REDACTED]

[REDACTED] answered the door. CM identified who she was and [REDACTED] invited CM into the home. CM and [REDACTED] sat on the couch to talk. CM explained to [REDACTED] that CM is not their case worker as CM took the case over from CM [REDACTED]. CM explained she will be checking in on them periodically until the cases get closed. CM asked if she's heard anything new regarding their criminal issues (re: the pill bust) and she she's not. CM asked if they have a plan for [REDACTED] if they end up getting arrested. [REDACTED] said due to "everything that is going on" they have not thought about that. She asked CM if she's even read their case and CM said she has. CM explained that she knows they've gone through a lot of stuff in a very short period of time, but we still need to address [REDACTED] circumstances and she agreed. She asaid they are still active in their church, [REDACTED], located ten mins away in [REDACTED]. She said they were there last night actually.

CM asked if she could see [REDACTED] bedroom and the food in the home and she agreed. CM observed the bedroom. There was black dog in there. Room was cluttered but no safety hazards were seen. [REDACTED] said they are low on food as she gets her food stamp card loaded tomorrow and is going shopping in the AM. She indentified [REDACTED] eats breakfast and lunch at school. CM asked what is she planning on eating for dinner and she showed CM a turkey breast, boxes of dressing, canned goods. CM also saw eggs.

CM asked if she could say Hi to the father and she agreed. She said she has to get him up. Mr. [REDACTED] entered the living room and CM introduced herself to him. CM asked if they had any questions before CM leaves. Mr. [REDACTED] did not. [REDACTED] one wanted to know why she had a case. CM explained that there was the one from march 2013 that was closed out, then a new one opened when there was the pill bust, and then another one opened when their daughter passed away. CM informed them she needs to see [REDACTED] as well periodically while the case is open. [REDACTED] told CM that [REDACTED] attends [REDACTED] School. CM said she will go see her there.

CM left the home and went to see [REDACTED] at [REDACTED]. CM met with her privately in a conference room off the main office.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

[REDACTED] was dressed in boots, sweatpants and a white tshirt and had her hair pulled up in a bun. No visible marks or bruising. CM explained to her that she works with CM [REDACTED] who [REDACTED] identified she remembers, and CM [REDACTED] is taking over the case and wanted to meet her and introduce herself to [REDACTED]. CM explained she will be seeing her every few weeks for a while and [REDACTED] expressed understanding. CM asked how she's been and she said OK. CM asked how her parents are doing and she said OK considering the circumstances. She said she is active in church and is there "everytime the door is open." CM asked if they ever go without food and she said no. She eats bfast and lunch at school and her mom gets food stamps tomorrow. [REDACTED] did not have any more info to share with CM and did not have any questions for CM.



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: Attempted Phone Call
 Contact Time: 12:36 PM Contact Duration: Less than 05
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 12/23/2013
 Completed date: 12/23/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Alleged Perpetrator Interview,Parent/Caretaker Interview
 Contact Sub Type:

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

Narrative Type: Original Entry Date/Time: 12/23/2013 11:40 AM Entered By: [REDACTED]

CM called the family at [REDACTED] both on the office phone and state cell with the intent to introduce CM to the family and set up a time for a home visit. Both times there was a message saying the number was not accepting calls.



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: Phone Call
 Contact Time: 11:58 AM Contact Duration: Less than 15
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 12/23/2013
 Completed date: 12/23/2013 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)**

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 12/23/2013 11:30 AM Entered By: [REDACTED]

CM notes she was transferred two cases open to family case "[REDACTED]" from CM [REDACTED]. CM [REDACTED] responded to the fatality case initial ACV, but it was still going to be worked by CM [REDACTED]

CM called [REDACTED] Detective [REDACTED] [REDACTED] to introduce CM and to give his CM's state cell number. He said the autopsy and tox screens on the body may be back at the end of Feb to early March 2014. He said they've subpoenaed medical records for the child to see if medical neglect can be pursued. The item found in the body was collected as evidence. CM informed him that CM will be on annual leave until 1/6/14 and he can contact CM's supervisor [REDACTED] if he 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: 11/22/2013 Contact Method:
 Contact Time: 01:20 PM Contact Duration: Less than 05
 Entered By: [REDACTED] Recorded For:
 Location: Created Date: 05/28/2014
 Completed date: 05/28/2014 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Case Summary
 Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 05/28/2014 11:02 AM Entered By: [REDACTED]

CASE ASSIGNMENT:

11/22/2013 1:20PM CT- This case came to the attention of the Department on 11/22/2013 and was assigned to CM [REDACTED] on 11/22/2013 as a P1. No notification made to referent as none requested. Severe Abuse Notification is made to the District Attorneys Office by DCS secretarial staff. A copy of such notification is contained within the file. Notification is made monthly to the Juvenile Court Judge (by DCS secretarial staff) as requested per Juvenile Court Judge [REDACTED] TFACTS history check has been completed by Central Intake.

CM [REDACTED] made the response. Once it was known CM [REDACTED] had open cases on the family, this was also assigned to her [CM [REDACTED]]

TFACTS: Yes

Family Case Id: [REDACTED]

Open Court Custody/FSS/FCIP No

Closed Court Custody No

Open CPS - ASMT # [REDACTED] (DEC) 11/13/13 (CM: [REDACTED])
 ASMT # [REDACTED] (ENN/MDM) 3/15/13 (CM: [REDACTED])

Indicated No

Fatality No

Screened out Yes (2 - # [REDACTED] # [REDACTED])



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

History (not listed above):

[REDACTED] - 9/27/12 - Closed Resource Linkage
 ASMT # [REDACTED] (MDM) 4/30/11 - No Services Needed
 ASMT # [REDACTED] (ENN/MDM) 11/23/10 - No Services Needed
 ASMT # [REDACTED] (MDM) 9/26/08 - No Services Needed
 ASMT # [REDACTED] (MDM) 8/8/08 - No Services Needed
 INV # [REDACTED] (PHN) 8/2/00 - Unfounded

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

Reporter states:

[REDACTED] (9) is in the care of her mother, [REDACTED], and father, [REDACTED]. The sister, [REDACTED] (14) lives in the home.

Currently, [REDACTED] is safe with her neighbor, [REDACTED] at [REDACTED]. Recently, the children were placed under an Immediate Protection Agreement (IPA) by DCS for neglect reasons.

Today, [REDACTED] was at the [REDACTED] Hospital. [REDACTED] has now been transferred to the [REDACTED] Center. An Autopsy is scheduled for 11/23/13 at 8:00 a.m.

Yesterday, [REDACTED] was at the [REDACTED] Hospital and was having difficulty breathing. [REDACTED] was admitted at the time and then discharged home yesterday. [REDACTED] was transported back to the [REDACTED] Hospital today following a 911 call that was made by the neighbor, [REDACTED] due to the same difficulties with her breathing. [REDACTED] was pronounced deceased upon arrival at the hospital. The cause of death is unknown at this time.

[REDACTED] has an extensive medical history and environmental neglect history. Her parents have been under investigation by DCS, since March of 2013.

[REDACTED] has already been safety placed by DCS with the neighbor, [REDACTED]. The reporter was not allowed into the parents home due to the parents being uncooperative, therefore the current condition of the home is unknown. The parents have a history of narcotic abuse, and distribution of drugs with law enforcement. The [REDACTED] Sherriffs Office is currently working this neglect death. The parents have not been arrested at this time. LE is waiting on the results of the autopsy.

This is all the information that the referent had at this time.

Per SDM: Investigative Track P1 - CHILD DEATH
 [REDACTED], on 11/22/13 @ 2:59pm

Notified Child Death/Child Near Death Notification Group via Email:

[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: 11/22/2013 Contact Method: Face To Face
 Contact Time: 08:15 AM Contact Duration: Less than 03 Hour
 Entered By: [REDACTED] Recorded For:
 Location: Hospital Created Date: 12/08/2013
 Completed date: 12/08/2013 Completed By: [REDACTED]
 Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
 Contact Type(s): Alleged Perpetrator Interview,Collateral Contact,Initial ACV Face To Face
 Contact Sub Type:

Children Concerning

[REDACTED]

Participant(s)

[REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 12/08/2013 12:36 PM Entered By: [REDACTED]

y
 November 22, 2013
 9:29 a.m.

Child fatality

Detective [REDACTED] with Major Crimes and social work staff gathered in a room to debrief some on the child's treatment history at [REDACTED] Room 18 is where child is located.

Child was seen by endocrinology here at [REDACTED] Mother was seen Nov 7 for diabetes education. Child also had a lot of other problems. Neurology, pulmonology were also involved. Child has been having seizures, possibly could have mild Cerebral Palsy. She came to them in a wheelchair with a helmet. She was known to have aggressive behaviors. If not given food, she would get very aggressive. Cognitive limitations. Childrens did not prescribe the wheelchair or helmet, but when she presented here, she was in wheelchair with helmet.

[REDACTED] is the endocrinologist that saw her. Mother did complete diabetes education satisfactorily. This education is done for all parents. Child was newly diagnosed. Education consists of things like meal planning, administration of medication, etc. Child was diagnosed with diabetes within the last couple of months.

At age 3, child was already diagnosed with sleep apnea, morbid obesity.

Seen in Healthy Weight Clinic, but parents were not compliant.

THIS INFO WAS IMPARTED BY [REDACTED]

CM [REDACTED] arrived in the room and also debriefed her involvement with the family since her case opened in March.

[REDACTED] Social Work, [REDACTED] and stated that she has gathered medical records from 2008 to current from [REDACTED] Pulmonologists notes are also provided, regarding morbid obesity affecting her respiratory distress and sleep apnea. She was already having sleep disturbances when she was hospitalized for pneumonia at age 3. Records state parents were noncompliant with almost every recommendation.

She was seen by neurology, Dr. [REDACTED] but didn't show up for any of those appointments. Child had behaviors of head-banging, which was why the helmet had become involved.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: ██████████

Case Name: ██████████

Case Status: Close

Organization: ██████████

Need to get records from ██████████ and pulmonary.

Child came into the ER with respiratory distress and seizures yesterday, 11/21/13. Had chest xray and was released. 14 year old sibling in the home.

██████████ Social Work staff (██████████) states they have a documented history of 8 years of noncompliance.

PAC team meets once a month with the 2 forensic doctors here. They talk about every maltreatment case. This case was discussed in that meeting. Medical neglect and noncompliance was discussed during this meeting, as well.

The report that is currently known is that this morning, the caretaker came into the bedroom to change the child's diaper. Child was unresponsive, not breathing. ██████████ responded. 2 houses have to be processed, possibly, including the parents' home and the home of the caregiver, with whom the children are currently on an Immediate Protection Agreement.

██████████ gave a summary of her involvement with the family during the past several months since her case was opened. Family lives on about \$700/month. Environmental neglect issues. Original visit found the home in absolute chaos. Family had all been ill with the stomach flu. House looked like it had been rampaged by a food-throwing animal. This was in March, 2013. The next visit showed evidence that this had been improved and was not the normal state of the home, but was due to the family members all being ill.

Family was not compliant, but they were cooperative and involved. Entire family uses one physician for all of them. Medical provider records indicate that they were in and out. They had not been involved with the weight loss clinic. They had started an exercise program. Father weighs about 500 lbs. Mother and 14 year old are not obese. ██████████ is where the exercise program was they were participating in.

Followup visits found the home in much better condition. School was concerned (██████████) about placing her in a more supportive environment, so ██████████ started going to ██████████. She had lost some weight, had become more socially appropriate with her behaviors since she has started attending ██████████ School. Child was compliant with teacher and teacher's aid.

Got a referral for DEC this month. Went to the home and a drug bust was going on. DCS called again due to the fact children were present during the drug investigation. Parents have reportedly sold morphine to undercover officers more than once in their driveway. 14 year old had been suspended for cutting classes and was at home. ██████████ was at school during the police raid with the search warrant. Christmas decorations were sitting everywhere. Sheets were in the dryer and off the beds. Police identified that there was feces under a bed; ██████████ did not find it. Found a pair of bloody underwear under the 14 year old's bed. Police stated that there was human feces all over ██████████ room. When ██████████ went into the room, it was discovered that the feces was actually Nutella that child takes medications sprinkles with. ██████████ had gotten hold of it and spread it around the room. Originally both parents were going to go to jail that day because both parents had been videotaped selling morphine to an undercover officer. ██████████ Narcotics Detective ██████████ was involved. ██████████ said they were going to turn the file over to the Grand Jury due to the fact that dad was involved in a law suit with ██████████ due to an injury obtained in a paddy wagon when he was arrested in the past.

██████████, was a babysitter and a neighbor, and she, along with her 18 year old daughter, are the known babysitters for the family. Live down the street, involved in church together. Kids placed with an aunt first on an Immediate Protection Agreement. CFTM was scheduled. Aunt did not show up and wasn't involved anymore after that. 2nd IPA was implemented with ██████████. Anticipating that mom and dad were going to be going to jail, ██████████ went to ██████████ to file a petition and stated in her petition request that ██████████ police department state that ██████████ and ██████████ were selling morphine out of their house but she doesn't believe that is the case. ██████████ did not want to approve her petition based on this statement because there has to be a reason in the petition that an immediate custody change should be made. She walked away without filing a petition. IPA was extended for 10 business days with ██████████ to look at other options, and that IPA extension was set to expire this coming Tuesday. In the meantime, parents did hair follicle test. Mr. ██████████ was clean and so was mother, which was a problem since he has a prescription for morphine.

██████████ was at the home where child was currently placed one time, on the day she was placed there, on 11/13.

Need to determine whether the child was hooked up to her biPAP machine when ██████████ arrived. Bedroom where she was found has been secured.

Child was taken from school yesterday by ambulance to ██████████ around 12:30 p.m. Both ██████████ and both parents were here at the hospital today.

██████████ is the address where the child was located.

██████████ is the home address of the family.



Tennessee Department of Children's Services

Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED]

Case Status: Close

Organization: [REDACTED]

CM [REDACTED] and CM [REDACTED] stepped into the room briefly where [REDACTED] body was and viewed her from the opening of the doorway, but stepped back out when the room became too congested with too many people. [REDACTED] was lying on a gurney with a sheet pulled up over her form to her neck.

10:22 a.m.

Present [REDACTED], [REDACTED], [REDACTED].
Interview with [REDACTED], [REDACTED] dob: [REDACTED] ssn: [REDACTED]. Interview occurred in Emergency Room bay [REDACTED]. She had the child in her home on an Immediate Protection Agreement. Current address [REDACTED]. She stated she was born in [REDACTED] phone [REDACTED]. Works at [REDACTED] but is on short-term disability right now [REDACTED] is the work address.

[REDACTED] stated she is angry. She is angry at DCS. Miranda Rights reviewed by Det. [REDACTED]. [REDACTED] asked [REDACTED] why she is angry. She said that she feels that DCS could have sped up the process to get back home and the child needed her mother. [REDACTED] has been with [REDACTED] since 11/13 and today is 11/22. She said that [REDACTED] is a special child and needs the "mother instinct" of her own mother. [REDACTED] has never taken care of a special child and she did the best she could, but she said [REDACTED] needed to go back home. She feels that [REDACTED] mother is the only one who can care for [REDACTED] the way she needed to be cared for.

Around noon yesterday, [REDACTED] reported that they were here at the hospital for the 3rd time since she has had the child with her. Child had a seizure at school and her breathing wasn't right. [REDACTED] came to the hospital and brought [REDACTED] and [REDACTED] the parents, with her. Child had a chest xray and she was sent home. Child had a little cough. This morning, [REDACTED] got up to change her diaper and child wasn't breathing. She was still warm at that time. [REDACTED] tried to do CPR, but just had surgery on her shoulder and said she couldn't get the pressure to do it. She stated that there were no follow up or discharge instructions when they left the hospital yesterday around 2:30 or 3 p.m. When they got home, [REDACTED] was really sleepy, but that isn't out of the ordinary. [REDACTED] said that [REDACTED] is on a lot of medication. Medication is kept above the stove at [REDACTED] house. Mom comes over at night and administers [REDACTED] medications. [REDACTED] does not know what meds [REDACTED] is prescribed or taking. [REDACTED] mother, came over at 6 or 6:30 last night, maybe a little closer to 7. They were waiting for a pizza to get there from Papa John's. Child ate pizza last night for dinner. Detective [REDACTED] asked whether [REDACTED] has diet restrictions. She said that the child only has restrictions on her diet to not have sugar. If she had questions about how to care for [REDACTED] while [REDACTED] was in her home, she called [REDACTED] mom. [REDACTED] went outside for a little while to play for a bit before eating pizza. [REDACTED] said that [REDACTED] gets agitated over "anything". They only used a wheelchair for [REDACTED] when they went somewhere because the child tires easily and has trouble walking. She doesn't know of [REDACTED] ever hurting anyone, but [REDACTED] has been known to give a smack here, a smack there when she gets upset. After pizza, they sat and talked for a bit. [REDACTED] went to sleep around 8:30 or 9:00 p.m. in her bed. [REDACTED] and [REDACTED] tucked [REDACTED] in. [REDACTED] was wearing a t-shirt and a pair of pajama pants and a diaper. She had nothing else on her. No machines or ivs were hooked up to the child. [REDACTED] was asked if [REDACTED] has a machine that she is supposed to use at night to help with her breathing. [REDACTED] said that [REDACTED] has a machine at her house, but it didn't come to [REDACTED] house with [REDACTED]. When asked why the machine didn't come to [REDACTED] house, she said she guesses it's a big fight to get child to wear it. She was asked if there was any discussion about use of the bipap machine (Bilevel positive airway pressure machine, which is prescribed to help the user get more air into the lungs) between her and parents, she said there was no discussion about the machine. She said it is typical for her to check on child throughout the night since [REDACTED] has been in her home. [REDACTED] said she got up at 6 a.m. and went into [REDACTED] bedroom, then said it was actually closer to 7 a.m. when she went into [REDACTED] room. She was going to change [REDACTED] diaper. [REDACTED] said she took the diaper off and she noticed that [REDACTED] wasn't moving or waking up and that's when she called 911. She said [REDACTED] wears a diaper because in her mind she is a 2 year old child. When asked how she knows that, she said that [REDACTED] parents told her that. [REDACTED] was having quite a bit of seizure activity after they got home from the hospital last night. She stares at lights when this is occurring, clicks her tongue, and other various different responses or symptoms. [REDACTED] said that [REDACTED] can feel the seizure coming on and tries to do these things to prevent it. This goes on all the time. There are not many of [REDACTED] things at [REDACTED] house. [REDACTED] takes [REDACTED] things home and washes them. When they got home, [REDACTED] kept the child awake so that she would sleep through the night because if she had been allowed to go back to sleep when they got home like she wanted to, she would not have slept that night. [REDACTED] went outside to play in the yard for a little while. Nothing else out of the ordinary was occurring, according to [REDACTED]. [REDACTED] goes to school at [REDACTED]. She is in special needs classes. Her special needs that [REDACTED] feels [REDACTED].



Tennessee Department of Children's Services
Case Recording Summary

Case Id: ██████████

Case Name: ██████████

Case Status: Close

Organization: ██████████

specifically needs her mom for are hard to explain, according to ██████████ Child is in a 2 year old mind frame, but is 9 years old and a big girl. ██████████ said that doctors have diagnosed this (delay). She stated that ██████████ has seizures in all 4 lobes of her brain. Going outside to play for ██████████ consists of going out and running around the yard, kicking a ball, things like that. ██████████ has 4 kids who live in her home, 3 of her own, and one who is her niece, and for the past little bit, since the IPA, ██████████ (██████████ sister) and ██████████ were also staying with her. ██████████ called ██████████ when ██████████ had to be taken from the home and she had no family who was capable of doing it (caring for ██████████ and her sister). ██████████ said that the machine that ██████████ uses is like a "CPAP" machine. That's what the family called it. ██████████ has a 14 year old sister, who is currently at home with ██████████ kids. She is also placed with ██████████ ██████████ doesn't want ██████████ to be with her now because she feels ██████████ needs to be with her mother and father in her own home since her sister has passed away. ██████████ said she is good friends with ██████████ and ██████████. She wouldn't have taken care of their kids if she wasn't. She stated that ██████████ takes a bath every evening. ██████████ sister helps her bathe nightly. ██████████ takes a shower at school when she is there. They are trying to teach her how to care for herself at school. Child was unable to carry on a conversation or tell you if anything hurts. ██████████ said she knows very little about why the children were placed with her. She said there was a drug raid for an allegation that was made on the parents but no arrests were made and nothing was found. She said she has called the narcotics division herself to ask. She was in a hurry to get the kids back to their parents. She didn't ask the parents about whether there was any truth to the allegations of drugs because she really didn't want to know. She lives 3 houses down and she has not seen any activity at their home that would make her think this was going on so she refuses to believe that the parents have been selling narcotics. ██████████ said she usually works 7:30am -7:30pm 4 days a week. ██████████ is on disability so is home all the time, for the most part. ██████████ said if the drug allegations are true, she doesn't want to know because she doesn't want to be a part of that or believe it is true. She has an 18 year old, a 17 year old (who goes to ██████████), a 14 year old who goes to ██████████, and a 7 year old who goes to ██████████ Elementary. ██████████ wanted to know from CM ██████████ what happens now. ██████████ explained that DCS administrators have told her that decisions will be discussed throughout the course of the day in regard to the outcome of the existing Immediate Protection Agreement. End 10:52 a.m.

10:57 a.m.

Interview with father, ██████████

Inv. ██████████ with ██████████ Family Crimes, Det. ██████████, Lieutenant ██████████, CM ██████████, CM ██████████

ER Room 27.

Father stated his name is ██████████, dob: ██████████, ssn: ██████████. He was born in ██████████. Address is ██████████. Phone is ██████████. He is not employed. Father is in a wheelchair, was dressed in a red t-shirt, black sweat pants, and was barefoot.

Miranda Rights reviewed by Investigator ██████████ father indicated understanding by signing.

Father stated that he noticed a couple of days ago that ██████████ was getting a runny nose. She has allergies, has always had them, according to father. ██████████ stated that ██████████ didn't talk much. Father began to cry and stomp his foot on the floor. Father stated in regard to ██████████ medical conditions, she has seizures, sleep apnea, is overweight, and was recently diagnosed as diabetic. She has a sleep apnea machine but didn't use it, according to Mr. ██████████. He said she wouldn't use the machine. After she had seizures, he said she would normally wear the machine. He said that he didn't know if child knew seizures were coming on. He said child has her apnea machine, but it's not at ██████████ house. He said you would have to lay by the bed to get her to keep it on because she pulled it off. She would still roll around, even after seizures. Both parents would lie in bed with her to help her keep the machine on. She has been staying with ██████████ since last week, he thinks. When ██████████ went to ██████████ her medication went with her. The CPAP machine never went because they knew that ██████████ wouldn't be able to keep her on it because his wife would always have to lay with her to keep it on. He doesn't know if there was an actual conversation with ██████████ about the machine. He doesn't recall anyone talking about it. ██████████ went to ██████████ School. He said she was in special classes, he doesn't know what grade she was considered to be in. When asked if ██████████ has ever been diagnosed with a mental health diagnosis, he stated that a few people (professionals) have said child was developmentally delayed. He said he thinks they said she was operating on an 18 month-2 year old age level. She couldn't convey verbally what hurt. She didn't speak in sentences. When asked about ██████████ diet, he said that she would have a normal meal for dinner at home; after school, she comes in and eats a snack, which he said was a banana, apple, orange or something. Then they have supper. His said his wife was putting the menu together with what ██████████ ate at school, as well. The school had been recording that she had lost 3 lbs one week, 2 or 3 the next week. He said that her clothes were also getting too big. He said that she has missed doctor's appointments before, but they always reset the appointments. He said



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they took her to the doctor; no one came into the home to provide care. He knows child took metformin for diabetes. Seizures and diabetes medicine are all she took that he knows of. She rode the bus to school. She had a normal birth. [REDACTED] is her biological mom. She was born at [REDACTED]. [REDACTED] started taking Depakote at age 2 or 3. Shortly after that, she started having a large weight gain. He said she had been in the hospital for pneumonia. Just before child was released, mom was allowed to sleep in the bed with her. Child falls asleep on the couch, but she has her own bed, which is a mattress on the floor. He stated he has been in a wheelchair for 2 or 3 years since he had a fall. He has sleep apnea, high blood pressure, is overweight, and has a history of heart failure. He said that his other daughter is not nearly as overweight as [REDACTED]. His other daughter is almost 14, according to dad. She goes to school at [REDACTED] School. He said that [REDACTED] has never been able to do anything alone for herself. [REDACTED] gave her a bath or shower. She liked to take a bath. He stated that he also gave her showers and baths sometimes. She liked to fill the tub up with bubbles and play in them. She went outside to play sometimes.

They have known [REDACTED] since they moved into their home 2 or 3 years ago. Before that, they lived on [REDACTED] [REDACTED] in [REDACTED]. When asked what happened on November 13th that resulted in child being at [REDACTED] home, he said he was in bed, and the police came to his home and said they had a search warrant with allegations that he and his wife were selling drugs. They asked where their cell phones were, he told them they didn't have cell phones. Asked them where their money was, he told them they had none.

He wants to know if his daughter can come home today. He was advised that this was under discussion as the investigation progresses today and has not yet been decided.

He said that [REDACTED] used a wheelchair so they could contain her when they went places. She would run if they didn't.

Interview with mother, [REDACTED].

11:39 a.m.

ER Room 27.

Investigator [REDACTED], Investigator [REDACTED], Investigator [REDACTED], CM [REDACTED], CM [REDACTED] left at this time, due to the fact the mother had yelled at her as we walked past the conference room, You killed my baby.

[REDACTED] reviewed Miranda Rights with mother.

Her name is [REDACTED] (on drivers license). She never had her legal name changed. [REDACTED] (same as [REDACTED]). She began to appear to cry. She said, "This is awful."

She said she was born in [REDACTED]. She lives at [REDACTED].

Phone is [REDACTED] (which is [REDACTED] number, for messages)

[REDACTED] is the child's full name.

[REDACTED] isn't working currently. She said she takes care of [REDACTED] and [REDACTED] and she also has a 14 year old daughter. [REDACTED] stated that she doesn't have any medical conditions. [REDACTED] was born at [REDACTED] no complications at birth.

Mother was asked when [REDACTED] medical problems started.

She said when [REDACTED] was little (3 or 4), she took child to doctor's appointment and they were sent here to [REDACTED] Hospital because the doctor didn't like [REDACTED] oxygen level. [REDACTED] was admitted for pneumonia at that time. Mother said she asked them to also test [REDACTED] for seizures. They said yes, she has seizures. She was 3 years old at that time. She had breathing and respiratory problems, and was diagnosed with sleep apnea at age 3. She uses a biPAP machine for apnea. She used it for a couple of days when she was in the hospital at age 3, but she had her adenoids removed after a couple of days in the hospital and she doesn't think she had to wear it after that while she was in the hospital.

Mother again broke down and said she isn't mad but wants to go home to her other daughter. Her other daughter doesn't know about [REDACTED] death yet.

Return to discussion about sleep apnea. [REDACTED] was in the hospital at age 3 for pneumonia. While she was in the hospital, child was treated for apnea and biPAP machine started being used. [REDACTED] was in the hospital for 3 weeks, according to mother. [REDACTED] slept with the machine for a couple of days in the hospital, then they removed her adenoids, and she didn't use the machine in the hospital after that. [REDACTED] was prescribed a machine to go home with her. Doctors were involved and a home health nurse. Mom said she has asked them to help her get [REDACTED] to wear the mask. She finally got them to give her a thin mask that she can get [REDACTED] to wear. When she left the hospital when she was 3, [REDACTED] was prescribed a machine. Mother said she would have to put it on child after she went to sleep. In the morning when they woke up, mother said [REDACTED] would've taken it off during the night. Mother said she used to set alarms to go in and check on [REDACTED] throughout the night to check it. She did that off and on for years. She said



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[REDACTED] just doesn't tolerate it (the biPAP machine), because she doesn't like it. After a seizure, mother said that [REDACTED] would wear it until she woke up from the nap she always takes after seizures. The biPAP machine helps her get oxygen so she can breathe. She has been diagnosed developmentally delayed. She was diagnosed with this around age 3, as well. Mother said she doesn't remember how far delayed they said she was. Currently, she said [REDACTED] was operating at around the age of a 2 or 3 year old. Mother said she has [REDACTED] tested at least once yearly periodically. As a result, she goes to CDC A classrooms. She was doing well since they moved her to [REDACTED]. The school was helping [REDACTED] with life functions. When asked about [REDACTED] diet at school, mother said she is not really sure what [REDACTED] eats at school. She said she knows they don't allow any....At this point, mother trailed off and didn't answer the questions. She said, If you'd asked me all this last week, I'd have been able to answer it for you. [REDACTED] diet at home, according to mother, is that she has to be on low carb, no sugar, mom has to measure everything. [REDACTED] was just recently diagnosed with Type 2 Diabetes. Prior to that, she was eating pretty much the same things, but she might have been eating more bread, etc. Before her diagnosis, she ate what the rest of the family ate. Her weight became an issue around 3 years old. Dr. [REDACTED] told them her weight gains could possibly be from the medications she was on, particularly Depakote. At that time, mother said she went through weight management with [REDACTED] at the age of 3 here at [REDACTED] Hospital. She tried to take her to the YWCA, but you couldn't put her in the pool because of her seizures. She said [REDACTED] wouldn't tolerate the basketball court. She could communicate with [REDACTED] some. She could usually understand what [REDACTED] meant. She had a seizure at school yesterday and they said her oxygen started to deplete. The doctor here, when [REDACTED] got here to [REDACTED] Hospital, said her respiratory problems were likely due to a seizure. She said they were released and they went home. Child went to [REDACTED] and mom and dad went home. Mom went to [REDACTED] around 7 p.m. last night. Between 3-7, she and [REDACTED] went to Walmart and bought a phone card and some milk for [REDACTED]. Mother stated that [REDACTED] takes depakote, lamictal, klonazepam (for seizures, prescribed by [REDACTED]), metformin, benadryl for allergies. Mom gave her the meds and child went to bed around 8:30 in the back bedroom last night. Mom put her up on the bed. She didn't have her biPAP machine at [REDACTED] and was not wearing it to sleep. Machine never went over to [REDACTED] because mom said she didn't send it because she knew [REDACTED] couldn't tolerate it. Mother said she kept telling everybody that's why the child needed to be home, so [REDACTED] could take care of her. She said DCS was involved because an allegation was made against her and her husband that they were selling some type of narcotic from their house. She said they were not. As a result of the allegation, children were removed from the home. They went to [REDACTED]. She would take clothes up to them daily. She said the restrictions on her time with the kids after they were placed out of the home on the Immediate Protection Agreement was explained as 5 hours a day, no overnights. Investigator [REDACTED] asked the mother how often [REDACTED] had been wearing the biPAP machine. She replied, I'm not really sure. It was so hard to get her to wear it. She said she talked to a doctor in September or October about how to get [REDACTED] to wear it (Dr. [REDACTED]). She said she wanted to bring [REDACTED] in for another sleep study, but in order to do a sleep study, [REDACTED] has to tolerate being hooked to all the wires. She said she has always followed the doctor's orders. She said the doctors have never told her that she wasn't being compliant. When asked if social workers have ever been involved, she said she had one and she told her that she was going to call DHS to come out and talk to her to see if there was anything they could help her with. She said she meant DCS. Lieutenant [REDACTED] asked mother about her other daughter. She said her daughter is normal now but when she was very young, her blood sugar bottomed out and she had to stay in the hospital for 5 days. After that, she has had no problems. She attends high school at [REDACTED] mother said. She then changed it and said she goes to [REDACTED]. [REDACTED] cannot bathe or dress herself. [REDACTED] normally took a bath and she took showers at school, as well. She would shower at school and come take a bath at home. They were teaching her life skills, such as showering, at school. She has missed some school, but [REDACTED] said it would usually be because [REDACTED] would have a seizure right before the bus came. She can't remember how many times this happened. Child does not currently have any home health care except the oxygen company comes and checks the levels on her oxygen machine, which is attached to her biPAP. This is done through [REDACTED] Hospital. They used to live on [REDACTED] prior to moving to where they live now, on [REDACTED]. She said that she wants to leave and wants to know if we are about done. She was told that the interview was concluded. Law enforcement noted that there were no tears at all from mother.