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

Intake

Intake ID: [redacted]

Intake Taken By: Web Service

Intake Date/Time: 03/14/2022 02:21 PM [redacted]

Track Assigned: Investigation

Priority Assigned: 1

Screened By: [redacted]

Date Screened: 03/15/2022

Investigation

Investigation ID: [redacted]

First County/Region [redacted]

Date/Time Assigned : 03/15/2022 09:02 AM

First Team Leader Assigned: [redacted]

Date/Time 03/15/2022 12:00 AM

First Case Manager [redacted]

Date/Time 03/15/2022 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ? / CSEM ?	Alleged Perpetrator	Relationship to Alleged Victim
[redacted]	Deceased	Abuse Death	Yes	[redacted]	Birth Mother
Unknown Participant [redacted] Unknown	15 Yrs (Est)	Drug Exposed Child	No	[redacted]	

Referent(s)

Referent Name: [redacted]

Role to Alleged Victim(s): [redacted]

Referent Address: [redacted] Tennessee [redacted]

Referent Phone Number: [redacted]

Type of Contact: Web Referral

Notification: E-mail

Narrative: NON-CUSTODIAL CHILD DEATH

Family Case IDs: [redacted]
Associated Case IDs: No

TFACTS Note: The 14-year-old appears to be [redacted] (14; DOB: [redacted])

Family Case ID Detailed History:
Open Court Custody/FSS/FCIP No
Closed Court Custody No

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

Pending: No
Awaiting Screening: No
Submitted: No

Open CPS: No
Substantiated: INV [redacted] / DEC / AP: [redacted] / ASPU / 2014-07-10
Death: No
Screen Outs: [redacted]

History (not listed above):
ASMT [redacted] / DEC / NSN / 2020-02-07
ASMT [redacted] / DEC, LOS / NSN / 2017-09-21
INV [redacted] / PHA, PYA / AUPU / 2015-12-11
ASMT [redacted] / DEC / NSN / 2011-09-01
INV [redacted] / DEC / UtC / 2011-05-18

County of Jurisdiction: [redacted]
School/ Daycare: Unknown
Active Military Status: Unknown

Reporter's name/relationship: [redacted]

WEB REFERRAL VERBATIM

Referent:
Interpreter needed: unknown
Type of Interpreter:

Victim:
Interpreter needed: unknown
Type of Interpreter:
First Name: Unknown Male
Deceased: No
Date of Death: none
Describe the Victim:
Native American Descent: Unknown
Contact: [redacted]
Contact Address [redacted] , TN, [redacted]
Directions:
School Name:
School Grade:
School Address:
School Contact:
Day Care Name:
Day Care Address:
Day Care Contact:

Perpetrator:
Interpreter needed: No
Type of Interpreter:
First Name: [redacted]
Last Name: [redacted]
Deceased: No
Date of Death: none
Describe the Perpetrator:
Native American Descent: Unknown
Does the alleged perpetrator currently have access to the victims(s)?: Yes

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

Does the alleged perpetrator have a criminal record?: Unknown
Does the alleged perpetrator have prior involvement with DCS?: Unknown
Contact: [redacted]
Contact Address [redacted] , TN, [redacted]
Directions:
Employer Name:
Employer Address:
Employer Contact:

Incident County: [redacted]
Describe in detail what has happened to the child. What is the abuse or neglect?:
[redacted] came into [redacted] in preterm labor. [redacted] gave birth to baby boy, [redacted] on [redacted]. Baby only lived for 45 minutes. [redacted] was 21 weeks pregnant. [redacted] reports she received no prenatal care. [redacted] admits to using 3grams of heroin a day for the last 17 months. [redacted] UDS was positive on admission for opiates, amphetamines, and THC. [redacted] has custody of her 14 year old son who lives in the home with her.

When did the abuse or neglect occur?:
See above

Does the child have any injuries from the abuse or neglect? If yes, please describe the injuries to the child.:
See above

Does the child need medical care? Has the child received medical care? If so, where?:
See above

Describe in detail how the child has been affected or harmed by the abuse or neglect.:
See above

Are there any concerns for Domestic Violence in the home that pose a danger to the child¿s safety? If yes, please describe your concerns.:
Unknown

Has the child made a disclosure of the abuse or neglect? If yes, what did the child disclose? Who did the child tell?:
NA

What do the child¿s parents/caregivers say about the abuse/neglect?:
See above

Is anyone in the home protective of this child? If yes, who?:
NA

When will the alleged perpetrator have access to the child again? Is the child currently safe for the next 24 hours to 3 business days?:
See above

Does the child have any special needs or disabilities? Please describe.:
See above

Are there any concerns for the safety of a Department of Children¿s Services Case Manager responding to the child¿s home?:
Unknown

END OF WEB REFERRAL

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

CM Notation: No
Screener Notation: No

Additional info provided by LI [redacted]
I talked with SW [redacted] who was with SW Carrie Johnson this may have to be assigned. The only issue is the mother didn't consent for the child to be sent for Autopsy and there was no cord stat, urine, or meconium collected. This is the mother's 6th birth. She has a history of placental abruptions. Per SW the doctor's will not document but it was said that the mother's heroin use could have caused the placental abruption and death of the infant. The mother is reported that the father of the baby is deceased and she has a 20 year old and a 14-year old that resides with her and their father. The mother is having severe withdraws from IV heroin use. The mother is currently hospitalized for Staph, withdraws, and Endocarditis. Law enforcement is not involved at this time. The mother was positive for opiates, amphetamines, and marijuana and admitted to being addicted to heroin over the past 17-months. The mother was not an AP on the last 3 cases, I went back to 2015. A father, [redacted] was the AP in those cases.

Notified Child Death/Preliminary Near-Death Notification Group via Email:
[redacted]
Region RA - [redacted]

Investigation Track - P1 - Child Death
[redacted], CAH Director, on 3/15/22 @ 8:44am

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

Participant(s)

Name: [redacted]

Gender: Female | Date of Birth: [redacted] | Partipant ID: [redacted]

SSN: | Race: White | Age: 41 Yrs

Address: [redacted] Tennessee [redacted]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

Contact: [redacted]

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

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

Name: [redacted]

Gender: Male

Date of Birth: [redacted]

Partipant ID: [redacted]

SSN:

Race:

Age: Deceased

Address:

Deceased Date: 03/12/2022

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact:

Contact Type:

Contact Comments:

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: Male | Date of Birth: | Partipant ID: [redacted]

SSN: | Race: Race Unknown | Age: 15 Yrs (Est)

Address: [redacted] Tennessee [redacted]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact: [redacted]

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2022-09-28 20:53:00.0	Contact Method:	
Contact Time:	08:53 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	09/28/2022
Completed date:	09/28/2022	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 09/28/2022 07:55 AM Entered By: [redacted]

This case has been reviewed and approved for closure by Team Leader (TL) [redacted] Notice of the classification decision to the [redacted] County Juvenile Court Judge will be provided by TL [redacted] Notification of the classification to the district attorney will be provided by TL when applicable. Notice of the classification to the DCS Legal Attorney will be provided by TL. All the appropriate paperwork has been reviewed and signed if applicable by TL [redacted] This case was reviewed and approved for closure by Team Coordinator (TC) [redacted], Deputy Director [redacted], and Executive Director, [redacted] on 9/28/22. The case was justified to be overdue due to being a death investigation.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2022-09-28 08:50:00.0	Contact Method:	
Contact Time:	08:50 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	09/28/2022
Completed date:	09/28/2022	Completed By:	[redacted]

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

Contact Type(s): Case Summary

Contact Sub Type: Closing

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 09/28/2022 07:53 AM Entered By: [redacted]

On March 14, 2022, the Department of Children's Services (DCS) received a referral with the allegation of Abuse Death concerning Alleged Child Victim (ACV) [redacted] (DOB: [redacted]: 1 day) and Drug Exposed Child concerning [redacted] (ACV) (DOB: [redacted]: 14 years) with the Alleged Perpetrator listed as [redacted] mother. An allegation of Drug Exposed Child concerning [redacted] was added with the Alleged Perpetrators being his mother, [redacted] The investigation was assigned to Child Protective Services (CPS) [redacted] by Team Leader (TL) [redacted] The case was worked in conjunction with the [redacted] Police Department, Detective (Det.) [redacted] At the time of the alleged incident, ACV [redacted] was born at [redacted] Medical Center, [redacted] TN and stayed in the hospital until his death.

On [redacted], [redacted] was born at approximately 21 weeks gestational age due to a suspected placental abruption at [redacted] Medical Center, [redacted] TN. Hospital staff reported that resuscitation cannot be administered at 21 weeks gestation. [redacted] was pronounced deceased on March 12, 2022, at 4:24am at [redacted] Medical Center. He was taken straight to the [redacted] County Medical Examiners office.

On March 15, 2022, CM [redacted] interviewed [redacted] mother. Ms. [redacted] reported that [redacted] died due to placental abruption because of my sickness. Ms. [redacted] reported that she has pneumonia, and she was unsure of what else but stated hospital staff didnt tell me that it was anything I did. She reported she is currently homeless, staying with friends off [redacted] Ms. [redacted] reported that she has two other children [redacted] age 20 and [redacted] age 14, who are in the custody and care of their father, [redacted] Ms. [redacted] denied living in the home with the children. Nursing staff reported that Ms. [redacted] has sepsis, MRSA, pneumonia, and is currently awaiting test results for endocarditis. Ms. [redacted] reported that she has been off and on drugs for the last 7 years. She began smoking marijuana at the age of 21 and her drug use has escalated to heroin. She uses heroin daily by either snorting or injecting it. Ms. [redacted] reported that the childs father, [redacted] died in December from a drug overdose.

Tennessee Department of Children's Services

Case Recording Summary

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

On March 15,2022 CM [redacted] engaged [redacted] in which [redacted] made no disclosures of witnessing his mothers drug use. His father, [redacted] reported that he has custody of [redacted] and that Ms. [redacted] is not [redacted] at his home.

On March 16, 2022, an autopsy was completed on [redacted] by [redacted], MD, PhD, Regional Forensic Center, [redacted] TN. The report states that the death was caused by intrauterine fetal demise due to acute chorioamnionitis and funisitis. [redacted] was found to have fentanyl, norfentanyl, 4-ANPP, methamphetamine, amphetamine, venflafaxine, O-Desmethylvenlafaxine, and caffieine in his system; however, to what degree the drugs contributed to the intrauterine fetal demise is unknown. The manner of death is natural.

On August 4, 2022 CM [redacted] presented this case to the [redacted] County Child Protective Investigative Team (CPIT). Present for the case were: Assistant District Attorney (ADA) [redacted], Youth Services Officer (YSO) with [redacted] County Juvenile Court, [redacted], Detective (Det.) [redacted] with the [redacted] Police Department, and [redacted], [redacted], [redacted], and [redacted]. The team agreed to classify the allegation of abuse death as Allegation Unsubstantiated/Alleged Perpetrator Unsubstantiated. The team agreed to classify the allegation of severe Drug Exposed Child as Allegation Substantiated/Perpetrator Substantiated against [redacted] due to information obtained from [redacted] toxicology report. [redacted] has been not compliant with DCS and refused services.

Per DCS Policy Work Aid 1 Section E:
Child Death is defined as:
a) Any child death caused by abuse or neglect.
b) Any unexplained death of a child when the cause of death is unknown or pending an autopsy report.
c) Any child death caused by abuse or neglect resulting from the parent or caretakers failure to stop another persons direct action that resulted in the death of the child. Child deaths are always treated as severe abuse.

Drug Exposed Child is defined as:
This allegation pertains to a person under the age of eighteen (18) who:
A) Has been exposed to or experiencing withdrawal from use, sale, or manufacture of a drug or chemical substance (including, but not limited to alcohol such as a diagnosis of Fetal Alcohol Syndrome, cannabis, hallucinogens, stimulants, sedatives, narcotics, methamphetamines, heroin, inhalants) that could adversely affect the childs physical, mental, or emotional functioning as a result of the actions or behaviors of the parent/caregiver; or
B) Has a parent/caregiver that uses drugs or chemical substances that impacts their ability to adequately care for the child; or
C) Has a parent/caregiver that has current addiction issues that could adversely affect the childs physical, mental, or emotional functioning.

There is a preponderance of evidence to support the allegation of Drug Exposed Child. This case will be closed and classified as Allegation Substantiated, Perpetrator Substantiated against alleged perpetrator [redacted] regarding ACV [redacted] There is not a preponderance of evidence to support the allegation of Abuse Death. This case will be closed and classified as Allegation Unsubstantiated/Alleged Perpetrator Unsubstantiated against [redacted] regarding ACV [redacted]

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2022-09-22 15:00:00.0	Contact Method:	
Contact Time:	03:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	09/26/2022
Completed date:	09/26/2022	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 09/26/2022 09:22 AM Entered By: [redacted]

Team Leader (TL) [redacted] talked to Det. [redacted] with the [redacted] Police Department regarding the death of the alleged birth father, [redacted] Det. [redacted] reported that according to state records Mr. [redacted] is deceased but there is no reported actual date of death, location of death, obituary, or cause of death. Det. [redacted] said that this is possible if Mr. [redacted] didn't have family to draft an obituary or provide information to a state agency of his death. No other information could be obtained via record check by law enforcement or internet checks. The mother reported that Mr. [redacted] died from an overdose possibly in January of 2022 which Det. [redacted] said was possible based on Mr. [redacted] history with law enforcement.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Created In Error
Contact Date:	2022-08-17 16:35:00.0	Contact Method:	
Contact Time:	04:35 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	08/17/2022
Completed date:	09/17/2022	Completed By:	TFACTS, Person Merge

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

Contact Type(s): Case Summary

Contact Sub Type: Closing

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 08/17/2022 03:35 PM Entered By: [redacted]

On March 14, 2022 the Department of Children's Services (DCS) received a referral with the allegation of Abuse Death concerning Alleged Child Victim (ACV) [redacted] (DOB: [redacted]: 1 day), Drug Exposed Child concerning [redacted] (ACV) (DOB: [redacted]: 14 years) with the Alleged Perpetrator listed as [redacted] An allegation of Drug Exposed Child concerning [redacted] was added with the Alleged Perpetrators being his mother, [redacted] The investigation was assigned to Child Protective Services (CPS) [redacted] by Team Leader (TL) [redacted] The case was worked in conjunction with the [redacted] Police Department, Detective (Det.) [redacted]
At the time of the alleged incident [redacted] lived with the mother, [redacted]

On March 12, 2022 [redacted] was born at approximately 21 weeks gestational age due to a suspected placental abruption at [redacted] Hospital. Hospital staff reported that resuscitation cannot be administered at 21 weeks gestation.

[redacted] was pronounced deceased on March 12, 2022, at 4:24am at [redacted] Hospital. He was taken straight to the Medical Examiners office.
On March 15, 2022, CM [redacted] interviewed [redacted] mother. Ms. [redacted] reported that [redacted] died due to placental abruption because of my sickness. Ms. [redacted] reported that she has pneumonia, and she was unsure of what else. Nursing staff reported that Ms. [redacted] has sepsis, MRSA, pneumonia, and is currently awaiting test results for endocarditis. Ms. [redacted] reported that hospital staff didnt tell me that it was anything I did. Ms. [redacted] reported that she was homeless and just staying with friends. Ms. [redacted] reported that she was staying with a friend somewhere on [redacted] when she went to [redacted] Hospital. Ms. [redacted] reported that she has two other children [redacted] age 20 and [redacted] age 14 who are in the custody and care of their father, [redacted] Ms. [redacted] denied living in the home with the children. Ms. [redacted] reported that she has been off and on drugs for the last 7 years. Ms. [redacted] reported that she began smoking marijuana at the age of 21 and her drug use has escalated to heroin use currently. Ms. [redacted] reported that she uses Heroin everyday. Ms. [redacted] reported that she snorts and uses needles. Ms. [redacted] reported that the childs father, [redacted]

Tennessee Department of Children's Services

Case Recording Summary

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

died in December from a drug overdose.

On March 15,2022 CM [redacted] engaged [redacted] in which [redacted] made no disclosures of witnessing his mothers drug use. The father, [redacted] reported that he has custody of [redacted] and that the mother is not [redacted] at the home. [redacted] does have legal custody of [redacted]

On March 16, 2022, an autopsy was completed on [redacted] by [redacted], MD,PhD, Regional Forensic Center, [redacted] TN. The report states that the death was caused by intrauterine fetal demise due to acute chorioamnionitis and funisitis. [redacted] was found to have fentanyl, norfentanyl, 4-ANPP, methamphetamine, amphetamine, venflafaxine, O-Desmethylvenlafaxine, and caffieine in his system however; to what degree the drugs contributed to the intrauterine fetal demise is unknown. The manner of death is natural.
On August 4, 2022 CM [redacted] presented this case to the [redacted] County Child Protective Investigative Team (CPIT). Present for the case were: Assistant District Attorney (ADA) [redacted], Youth Services Officer (YSO) with [redacted] County Juvenile Court, [redacted], Detective (Det.) [redacted] with the [redacted] Police Department, and [redacted], [redacted], and [redacted]. The team agreed to classify the allegation of abuse death as Allegation Unsubstantiated/Alleged Perpetrator Unsubstantiated. The team agreed to classify the allegation of severe Drug Exposed Child as Allegation Substantiated/Perpetrator Substantiated against [redacted] due to information obtained from [redacted] toxicology report. [redacted] has been not compliant with DCS and refused services.

Per DCS Policy Work Aid 1 Section E:
Child Death is defined as:
a) Any child death caused by abuse or neglect.
b) Any unexplained death of a child when the cause of death is unknown or pending an autopsy report.
c) Any child death caused by abuse or neglect resulting from the parent or caretakers failure to stop another persons direct action that resulted in the death of the child. Child deaths are always treated as severe abuse.
Drug Exposed Child is defined as:
This allegation pertains to a person under the age of eighteen (18) who:
A) Has been exposed to or experiencing withdrawal from use, sale, or manufacture of a drug or chemical substance (including, but not limited to alcohol such as a diagnosis of Fetal Alcohol Syndrome, cannabis, hallucinogens, stimulants, sedatives, narcotics, methamphetamines, heroin, inhalants) that could adversely affect the childs physical, mental, or emotional functioning as a result of the actions or behaviors of the parent/caregiver; or
B) Has a parent/caregiver that uses drugs or chemical substances that impacts their ability to adequately care for the child; or
C) Has a parent/caregiver that has current addiction issues that could adversely affect the childs physical, mental, or emotional functioning.
There is a preponderance of evidence to support the allegation of Drug Exposed Child. This case will be closed and classified as Allegation Substantiated, Perpetrator Substantiated against alleged perpetrator [redacted] regarding ACV [redacted] There is not a preponderance of evidence to support the allegation of Abuse Death. This case will be closed and classified as Allegation Unsubstantiated/Alleged Perpetrator Unsubstantiated against [redacted] regarding ACV [redacted]

Narrative Type: Created In Error Entry Date/Time: 09/21/2022 10:59 AM Entered By: [redacted]

Data entry error

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Created In Error
Contact Date:	2022-08-17 15:49:00.0	Contact Method:	
Contact Time:	03:49 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	08/17/2022
Completed date:	08/17/2022	Completed By:	[redacted]

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

Contact Type(s): Case Summary

Contact Sub Type: Closing

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 08/17/2022 02:50 PM Entered By: [redacted]

On March 14, 2022 the Department of Children's Services (DCS) received a referral with the allegation of Abuse Death concerning Alleged Child Victim (ACV) [redacted] (DOB: [redacted]: 1 day), Drug Exposed Child concerning [redacted] (ACV) (DOB: [redacted]: 14 years) with the Alleged Perpetrator listed as [redacted] An allegation of Drug Exposed Child concerning [redacted] was added with the Alleged Perpetrators being his mother, [redacted] The investigation was assigned to Child Protective Services (CPS) [redacted] by Team Leader (TL) [redacted] The case was worked in conjunction with the [redacted] Police Department, Detective (Det.) [redacted] At the time of the alleged incident [redacted] lived with the mother, [redacted]

On [redacted] was born at approximately 21 weeks gestational age due to a suspected placental abruption at [redacted] Hospital. Hospital staff reported that resuscitation cannot be administered at 21 weeks gestation.

[redacted] was pronounced deceased on March 12, 2022, at 4:24am at [redacted] Hospital. He was taken straight to the Medical Examiners office.
On March 15, 2022, CM [redacted] interviewed [redacted] mother. Ms. [redacted] reported that [redacted] died due to placental abruption because of my sickness. Ms. [redacted] reported that she has pneumonia, and she was unsure of what else. Nursing staff reported that Ms. [redacted] has sepsis, MRSA, pneumonia, and is currently awaiting test results for endocarditis. Ms. [redacted] reported that hospital staff didnt tell me that it was anything I did. Ms. [redacted] reported that she was homeless and just staying with friends. Ms. [redacted] reported that she was staying with a friend somewhere on [redacted] when she went to [redacted] Hospital. Ms. [redacted] reported that she has two other children [redacted] age 20 and [redacted] age 14 who are in the custody and care of their father, [redacted] Ms. [redacted] denied living in the home with the children. Ms. [redacted] reported that she has been off and on drugs for the last 7 years. Ms. [redacted] reported that she began smoking marijuana at the age of 21 and her drug use has escalated to heroin use currently. Ms. [redacted] reported that she uses Heroin everyday. Ms. [redacted]

Tennessee Department of Children's Services

Case Recording Summary

Case Id: [redacted] Case Name: [redacted]

Case Status: Close Organization: [redacted] Region

reported that she snorts and uses needles. Ms. [redacted] reported that the childs father, [redacted] died in December from a drug overdose.

On March 15,2022 CM [redacted] engaged [redacted] in which [redacted] made no disclosures of witnessing his mothers drug use. The father, [redacted] reported that he has custody of [redacted] and that the mother is not [redacted] at the home. [redacted] does have legal custody of [redacted]

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B) Has a parent/caregiver that uses drugs or chemical substances that impacts their ability to adequately care for the child; or
C) Has a parent/caregiver that has current addiction issues that could adversely affect the childs physical, mental, or emotional functioning.
There is a preponderance of evidence to support the allegation of Drug Exposed Child. This case will be closed and classified as Allegation Substantiated, Perpetrator Substantiated against alleged perpetrator [redacted] regarding ACV [redacted] There is not a preponderance of evidence to support the allegation of Abuse Death. This case will be closed and classified as Allegation Unsubstantiated/Alleged Perpetrator Unsubstantiated against [redacted] regarding ACV [redacted]

Narrative Type: Created In Error Entry Date/Time: 08/17/2022 03:35 PM Entered By: [redacted]

Data Entry Error

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2022-08-12 09:00:00.0	Contact Method:	
Contact Time:	09:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	08/12/2022
Completed date:	08/12/2022	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 08/12/2022 08:36 AM Entered By: [redacted]

Team Leader (TL) [redacted] re-staffed this case with Case Manager (CM) [redacted] CM [redacted] will enter CPIT note, ensure all documents are uploaded, complete the closing FAST, and classify the allegations. TL [redacted] will send case for final review once the remaining tasks have been completed. The case remains justified to be overdue due to being a death case, waiting on CPIT, and final approval.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2022-08-04 09:00:00.0	Contact Method:	Face To Face
Contact Time:	09:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Other Community Site	Created Date:	08/15/2022
Completed date:	08/15/2022	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)

[redacted] Team, CPIT

Narrative Details

Narrative Type: Original Entry Date/Time: 08/15/2022 07:26 AM Entered By: [redacted]

Child Protective Services Case Manager (CM) [redacted] presented the Drug Exposed Child and Abuse Death allegations against the Alleged Perpetrator [redacted] on [redacted] to the Child Protective Investigative Team (CPIT) on this date. People present were Assistant District Attorneys (ADA) [redacted], Children's Advocacy Center, [redacted] CAC [redacted], [redacted] CAC [redacted], Detective [redacted] with [redacted] Police Department and [redacted] CAC [redacted]. CPSI [redacted] presented the facts of the case to the team in which the child autopsy reported the child to be positive for fentanyl, nor fentanyl, 4-ANPP, methamphetamine, amphetamine, venlafaxine, O-Desmethylvenlafaxine, and caffeine in his system however; to what degree the drugs contributed to the intrauterine fetal demise is unknown. The team agreed to close the case with the classification of Abuse Death Allegation Unsubstantiated and Perpetrator Unsubstantiated and the classification of Drug Exposed Child Allegation Substantiated and Perpetrator Substantiated against [redacted]

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2022-08-02 17:00:00.0	Contact Method:	
Contact Time:	05:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	08/17/2022
Completed date:	08/17/2022	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 08/17/2022 02:46 PM Entered By: [redacted]

On August 2, 2022 at approximately 500pm [redacted] Child Protective Services Case Manager (CM) [redacted] uploaded all records received from [redacted] Medical Center and [redacted] Hospital. Per medical records, the mother and Alleged perpetrator (AP) [redacted] presented at [redacted] Medical Center and was positive upon admission for opiates, cannabinoids, and amphetamines. Per [redacted] medical records, [redacted] (AP) presented to [redacted] Hospital with a placental abruption.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2022-07-11 15:26:00.0	Contact Method:	
Contact Time:	03:26 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	08/12/2022
Completed date:	08/12/2022	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 08/12/2022 08:50 AM Entered By: [redacted]

Team Leader (TL) [redacted] re-staffed this case with Case Manager (CM) [redacted] CM [redacted] reported that she received a copy of the final autopsy on [redacted] CM [redacted] reported that [redacted] toxicology screen was positive for fentanyl, norfentanyl, 4-ANPP, methamphetamine, amphetamine, venlafaxie, caffine, and O-Desmethyvenlataxine. The cause of death was by intrauterine fetal demise due to acute chorioamnionitis and funisitis. TL [redacted] staffed the classification with CM [redacted] and Team Coordinator (TC) [redacted] on this date. The classification for severe Drug Exposed Child will be classified as Allegation Substantiated/Alleged Perpetrator Substantiated regarding the mother, [redacted] on [redacted] and Abuse Death will be classified as Allegation Unsubstantiated/Alleged Perpetrator Unsubstantiated due to findings on the autopsy report. CM [redacted] will present the case to CPIT on 8/4/22. CM [redacted] will ensure that all documents are uploaded, the closing FAST is completed, and closing case summary is completed for review. This case remains justified to be overdue due to waiting on CPIT and final review.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2022-07-07 14:53:00.0	Contact Method:	
Contact Time:	02:53 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	08/12/2022
Completed date:	08/12/2022	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: 08/12/2022 08:43 AM Entered By: [redacted]

On July 7,2022 at approximately 253pm [redacted] Child Protective Services Case Manager (CM) [redacted] received the final autopsy report for the Alleged Child Victim (ACV) [redacted] The report was completed on 6/28/22 by the Regional Forensic Center. The mother was positive at birth for THC, Opiates, and Amphetamines. The autopsy showed natural disease consisting of acute chorioamnionitis and funisitis. Chorioamnionitis is an infection of the chorion and amnion (the membranes that surround the fetus) and th amniotic fluid (in which the fetus floats). It is caused by the pajsage of infectious organisms to the chorioamnion and/or umbilical cord of the placenta. Funisitis is inflammation of the umbilical cord. Death was caused by intrauterine fetal demise due to acute chorioamnionitis and funisitis. Toxicological studies performed on postmortem chest cavity detected fentanyl, norfentanyl, 4-ANPP, methamphetamine, amphetamine, venlafaxine, O-Desmethylvenlafaxine, and caffeine. A copy of the final autopsy report has been uploaded under the ACV in documents in TFACTs.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2022-07-07 14:53:00.0	Contact Method:	
Contact Time:	02:53 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	08/17/2022
Completed date:	08/17/2022	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 08/17/2022 02:48 PM Entered By: [redacted]

On July 7,2022 at approximately 253pm [redacted] Child Protective Services Case Manager (CM) [redacted] received the final autopsy report for the Alleged Child Victim (ACV) [redacted] from Detective [redacted] with the [redacted] Police Department. The report was completed by Regional Forensics Center [redacted] TN on June 28, 2022. The autopsy report states that the child, [redacted] death was caused by intrauterine fetal demise due to acute chorioamnionitis and funisitis. [redacted] was found to have fentanyl, nor fentanyl, 4-ANPP, methamphetamine, amphetamine, venlafaxine, O-Desmethylvenlafaxine, and caffeine in his system however; to what degree the drugs contributed to the intrauterine fetal demise is unknown. A copy of the final autopsy report has been uploaded to this case file.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2022-05-18 12:10:00.0	Contact Method:	
Contact Time:	12:10 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	05/28/2022
Completed date:	05/28/2022	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 05/28/2022 12:54 PM Entered By: [redacted]

DCS received this referral after the new born passed away shortly after birth. The case is pending the final autopsy. TL [redacted] staffed the case with Program Coordinator [redacted] and Regional Administrator [redacted] who gave permission for the sibling who does not live with the mother, was not present when the infant passed away, and has made no disclosures of concerns to no longer be seen monthly.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	40010363	Status:	Completed
Contact Date:	2022-05-18 12:08:00.0	Contact Method:	Attempted Face To Face
Contact Time:	12:08 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	School	Created Date:	05/18/2022
Completed date:	05/18/2022	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	ACV Interview/Observation		
Contact Sub Type:			

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 05/18/2022 12:41 PM Entered By: [redacted]

On May 18, 2022 at approximately 1208pm [redacted] Child Protective Services Case Manager (CM) [redacted] attempted to meet face to face with the Alleged Child Victim (ACV) [redacted] at [redacted] Junior High School. School staff reported that [redacted] is absent today. School staff reported no concerns.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2022-04-12 14:35:00.0	Contact Method:	
Contact Time:	02:35 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	04/13/2022
Completed date:	04/13/2022	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 04/13/2022 09:10 AM Entered By: [redacted]

Team Leader (TL) [redacted] re-staffed this case with Case Manager (CM) [redacted] CM [redacted] reported that Det. [redacted] informed her that an autopsy was completed and she talked to the medical examiner, Dr. [redacted] last week. Dr. [redacted] stated that "There was a placenta abruption, caused by inflammation, caused by mom being septic, caused from her IV drug use; baby had meth and fentanyl in his blood". However, he says at this point the manner will be "undetermined". Dr. [redacted] says he "would not" say for certain that the drug use was the cause of death. However, he also said that because of the conflict, he would present the case to "group" and so things could change if "group" has a different opinion. Lt. [redacted] had called Assistant DA [redacted] but hadn't heard back. CM [redacted] will continue to follow up with the family and ensure that the mother is receiving services and will continue to staff this case with supervision.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2022-04-11 11:27:00.0	Contact Method:	Face To Face
Contact Time:	11:27 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	School	Created Date:	04/15/2022
Completed date:	04/15/2022	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	ACV Interview/Observation		
Contact Sub Type:			

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 04/15/2022 11:50 AM Entered By: [redacted]

On April 11, 2022 at approximately 1127am [redacted] Child Protective Services Case Manager (CM) [redacted] met face to face with the Alleged Child Victim (ACV) [redacted] at [redacted] Junior High School. [redacted] reported that he is doing well. CM [redacted] engaged [redacted] by asking which class he was currently in, in which [redacted] reported that he was in math and glad to get out of class for a few minutes. [redacted] reported no questions or concerns at this time.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2022-04-01 09:00:00.0	Contact Method:	Attempted Face To Face
Contact Time:	09:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Court	Created Date:	04/01/2022
Completed date:	04/01/2022	Completed By:	[redacted]

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

Contact Type(s): Court Hearing

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 04/01/2022 11:09 AM Entered By: [redacted]

On April 1, 2022 at 900 am[redacted] at [redacted] County Juvenile Court this case was heard by Magistrate [redacted] for the preliminary hearing. Present for the hearing was DCS attorney [redacted], Child Protective Services Case Manager (CM) [redacted] and that Guardian Ad Litem [redacted]. The case was reset for preliminary hearing on 7/20/22 at 9am[redacted].

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2022-03-28 16:00:00.0	Contact Method:	
Contact Time:	04:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Court	Created Date:	04/01/2022
Completed date:	04/01/2022	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 04/01/2022 10:56 AM Entered By: [redacted]

On March 28, 2022 at approximately 318pm [redacted] Child Protective Service Case Manager (CM) [redacted] did receive the court orders from legal [redacted], order was then signed by Judge [redacted] CM [redacted] the filed the order on this date at approximately 400pm with [redacted] County Juvenile Court.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2022-03-28 11:44:00.0	Contact Method:	
Contact Time:	11:44 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	03/28/2022
Completed date:	03/28/2022	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/28/2022 10:47 AM Entered By: [redacted]

On March 28, 2022 at approximately 1144am [redacted] Child Protective Services Case Manger (CM) [redacted] did send the legal referral to DCS Attorney [redacted] via email for no contact between the Alleged Child Victim (ACV) [redacted] and the Alleged Perpetrator (AP) [redacted]

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Created In Error
Contact Date:	2022-03-18 15:00:00.0	Contact Method:	
Contact Time:	03:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	03/21/2022
Completed date:	04/18/2022	Completed By:	TFACTS, Person Merge

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

Contact Type(s):

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/21/2022 01:09 PM Entered By: [redacted]

The Abuse Death investigation regarding Alleged Child Victim (ACV) [redacted] was debriefed with Case Manager (CM) [redacted] and Team Leader (TL) [redacted] Also present was Team Coordinator (TC) [redacted], CPS Director (CPSD) [redacted], and Director of Critical Incident Support (DCIS) [redacted].

The CPS investigation was assigned on 3/15/22 concerning the death of ACV [redacted] (1 day). It was reported the mother was homeless at the time of delivery. The mother reported an additional 14yo child [redacted] resides with his father [redacted] The mother reported Mr. [redacted] has full custody of this child. The mother reported [redacted] father [redacted] is deceased due to a drug overdose in December 2021.

On [redacted] the mother presented at [redacted] Medical Center in preterm labor due to suspected placental abruption, giving birth the same day. The mother was 21 weeks pregnant and reported receiving no prenatal care. The baby survived for 45 minutes. The mothers UDS was positive for opiates, amphetamines, and THC.

CM met with the mother who reported using heroin the last seven years, both snorting and through needles. The mother reported she has a 14yo and 20yo who does not live with her. CM completed an NCPP with the mother for an A&D assessment, MH assessment, and random drug screens. Mother reported she wants treatment. She reported 4 prior miscarriages. The mother reported she found out five weeks ago she was pregnant and continued to use drugs.

CM met with the 14yo sibling at his fathers residence where he resides. The father reported having full custody of the child for the past two years and is knowledgeable and protective regarding the mothers drug use and her contact with their child. The father is not currently allowing contact between the mother and 14yo. The sibling reported he is aware of the mothers drug issues but has not witnessed it. There were no concerns with the fathers home. A no-contact order is being filed between the mother and 14yo.

The mother refused an autopsy but LE has requested one. No meconium, cord, urine, or toxicology otherwise

Tennessee Department of Children's Services

Case Recording Summary

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

was completed on the baby at the hospital. CM is looking at inpatient services for the mother. Currently the mother remains in the hospital with pneumonia, sepsis, MRSA, endocarditis, and withdrawals. Discharge date is unknown.

Next Steps:
-- CM will request ACVs birth records. Records will be reviewed and uploaded to TFACTS.
-- CM will request all interviews and information/evidence collected by LE within their investigation and review, summarize, and upload what is shared to TFACTS.
-- CM will follow-up with the mother regarding A&D and MH services.
-- CM will document and upload autopsy into TFACTS once received.
-- CM will complete Closing FAST prior to case closure.
-- CM will present findings to the Child Protective Investigative Team (CPIT) for classification review.

Narrative Type: Created In Error Entry Date/Time: 04/19/2022 01:10 PM Entered By: [redacted]

System completed. Reentered.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2022-03-18 15:00:00.0	Contact Method:	
Contact Time:	03:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	04/19/2022
Completed date:	04/19/2022	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 04/19/2022 01:09 PM Entered By: [redacted]

The Abuse Death investigation regarding Alleged Child Victim (ACV) [redacted] was debriefed with Case Manager (CM) [redacted] and Team Leader (TL) [redacted] Also present was Team Coordinator (TC) [redacted], CPS Director (CPSD) [redacted], and Director of Critical Incident Support (DCIS) [redacted].

The CPS investigation was assigned on 3/15/22 concerning the death of ACV [redacted] (1 day). It was reported the mother was homeless at the time of delivery. The mother reported an additional 14yo child [redacted] resides with his father [redacted] The mother reported Mr. [redacted] has full custody of this child. The mother reported [redacted] father [redacted] is deceased due to a drug overdose in December 2021.

On [redacted] the mother presented at [redacted] Medical Center in preterm labor due to suspected placental abruption, giving birth the same day. The mother was 21 weeks pregnant and reported receiving no prenatal care. The baby survived for 45 minutes. The mothers UDS was positive for opiates, amphetamines, and THC.

CM met with the mother who reported using heroin the last seven years, both snorting and through needles. The mother reported she has a 14yo and 20yo who does not live with her. CM completed an NCPP with the mother for an A&D assessment, MH assessment, and random drug screens. Mother reported she wants treatment. She reported 4 prior miscarriages. The mother reported she found out five weeks ago she was pregnant and continued to use drugs.

CM met with the 14yo sibling at his fathers residence where he resides. The father reported having full custody of the child for the past two years and is knowledgeable and protective regarding the mothers drug use and her contact with their child. The father is not currently allowing contact between the mother and 14yo. The sibling reported he is aware of the mothers drug issues but has not witnessed it. There were no concerns with the fathers home. A no-contact order is being filed between the mother and 14yo.

The mother refused an autopsy but LE has requested one. No meconium, cord, urine, or toxicology otherwise

Tennessee Department of Children's Services

Case Recording Summary

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

was completed on the baby at the hospital. CM is looking at inpatient services for the mother. Currently the mother remains in the hospital with pneumonia, sepsis, MRSA, endocarditis, and withdrawals. Discharge date is unknown.

Next Steps:
-- CM will request ACVs birth records. Records will be reviewed and uploaded to TFACTS.
-- CM will request all interviews and information/evidence collected by LE within their investigation and review, summarize, and upload what is shared to TFACTS.
-- CM will follow-up with the mother regarding A&D and MH services.
-- CM will document and upload autopsy into TFACTS once received.
-- CM will complete Closing FAST prior to case closure.
-- CM will present findings to the Child Protective Investigative Team (CPIT) for classification review.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2022-03-17 11:46:00.0	Contact Method:	Correspondence
Contact Time:	11:46 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	03/24/2022
Completed date:	03/24/2022	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: 03/24/2022 08:46 AM Entered By: [redacted]

On March 17, 2022 at approximately 1146am [redacted], Child Protective Service Case Manager (CM) [redacted] did convene the Child Protective Investigative Team (CPIT) on this date. CPSI [redacted] did email a copy of the CPS Intake to [redacted] with District Attorney's Office, Detective [redacted] with the [redacted] County Sheriffs Department, and to [redacted] Child Advocacy Center.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	System Completed
Contact Date:	2022-03-15 15:54:00.0	Contact Method:	Face To Face
Contact Time:	03:54 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	03/28/2022
Completed date:	04/15/2022	Completed By:	System Completed

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

Contact Type(s): Initial ACV Face To Face,Other Persons Living in Home Interview/Observation,Parent/Caretaker Interview

Contact Sub Type:

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/28/2022 11:19 AM Entered By: [redacted]

null

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2022-03-15 15:54:00.0	Contact Method:	Face To Face
Contact Time:	03:54 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	08/17/2022
Completed date:	08/17/2022	Completed By:	[redacted]

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

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

Contact Sub Type:

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 08/17/2022 03:13 PM Entered By: [redacted]

On March 15, 2022, at approximately 354pm [redacted] Child Protective Services Case Manager (CM) [redacted] met face to face with the Alleged Child Victim (ACV) [redacted] at the Family home located at [redacted] TN. CM [redacted] was met at the door by the father [redacted] CM [redacted] explained the reason for the department's involvement. CM [redacted] was not invited into the home. [redacted] reported that [redacted] has been staying with friends and that he does not allow [redacted] to come to the home. [redacted] reported that [redacted] left the children in his care approximately 10 years ago. [redacted] reported that [redacted] showed up at the family home in February and began arguing with [redacted] which resulted in law enforcement being called. [redacted] reported that [redacted] was home alone after school and the neighbor called the police because [redacted] was not supposed to be at the home. [redacted] reported that [redacted] has not seen [redacted] since.

[redacted] reported that her father has raised her and [redacted] and that her mother is not involved. [redacted] reported that her mother has had several miscarriage's and that "her uterus is poisoned".

CM [redacted] spoke with [redacted] privately. [redacted] reported that he has not seen his mother since the police were called. [redacted] denied ever witnessing the mother do any drugs. [redacted] was observed to appear clean, well-nourished, and free of any visible marks or bruises. [redacted] was observed to be wearing a long sleeve shirt, jeans, and sneakers.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2022-03-15 14:03:00.0	Contact Method:	
Contact Time:	02:03 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	03/15/2022
Completed date:	03/15/2022	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/15/2022 06:53 PM Entered By: [redacted]

Team Leader (TL) [redacted] staffed this case with Case Manager (CM) [redacted] The referral was assigned with the allegations of Drug Exposed Child against the mother, [redacted] on [redacted] age 14 and Abuse Death against the mother, [redacted] on [redacted] age 1 day. An allegation of Severe Drug Exposed Child will be added against the mother on [redacted]

ACV: [redacted] DOB [redacted] DOD 3/12/22
ACV/half-sibling- [redacted] age 14
Mother/Alleged Perpetrator- [redacted]
Father of Deceased Child: [redacted] Deceased in Dec 2021
Father of [redacted]
Half-sibling- [redacted] age 20
Assigned CPS CM- [redacted]
Assigned LE-Det. [redacted] and Det. [redacted]
County- [redacted]

ACV, [redacted] past away at 21 weeks gestation on [redacted] approximately 45 minutes after birth which was a result of a placental abruption per [redacted] Medical Center. Social Work was engaged. CM [redacted] engaged the mother, [redacted] on this date at [redacted] Medical Center as she is currently hospitalized with no discharge date. Ms. [redacted] is currently diagnosed with Pneumonia, Sepsis, Endocarditis, severe withdraws, and MRSA. Ms. [redacted] admitted to having an addiction to Heroin for the past 7-years by way of snorting and IV use. Ms. [redacted] reported that she knew she was pregnant and continued to use and had no prenatal care. Ms. [redacted] was positive on a urine drug screen at birth for opiates, THC, and amphetamines. Ms. [redacted] has had 4 prior placental abruptions. Ms. [redacted] has 2 other children, [redacted] age 20 and [redacted] age 14. [redacted] is in the custody of his father, [redacted] Ms. [redacted] refused to sign a ROI for [redacted] medical records. She did however sign a ROI for her medical records. Ms. [redacted] reported that the father of [redacted] died in December 2021 due to a drug overdose. A plan was

Tennessee Department of Children's Services

Case Recording Summary

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

developed with Ms. [redacted] to complete an A&D Assessment (mother reports she wants treatment), Mental Health Assessment, and grief counseling was offered.

The ACV was not sent for autopsy per the mother's refusal. No urine screen, meconium, or cord stat was obtained on the ACV per SW at [redacted] Medical Center.

CM [redacted] engaged the ACV, [redacted] who made no disclosures of abuse or neglect against anyone. He does know his mother has problems. [redacted] reports that he lives with his father, [redacted] and his sister, [redacted] CM [redacted] engaged the father of [redacted] who reported that he and [redacted] were divorced in 2005 and he obtained full custody of [redacted] approximately 2 years ago from [redacted] County Juvenile Court due to his knowledge of the mother's drug use. There has been disputes where [redacted] has came to his home and law enforcement was contacted which was confirmed on this date. CM [redacted] reported observing no safety concerns with the father's home. Mr. [redacted] was not observed to be impaired and was found to be protective.

TL [redacted] staffed this case with Team Coordinator (TC) [redacted] and consulted with legal, [redacted] and by agreement of the parents the father will maintain custody of [redacted] and the mother will have no contact with him pending progress made on a plan. A restraining order will be filed.

CM [redacted] will be requesting the child and mother's medical records, LE reports, background checks, and obtain a copy of the custody order regarding [redacted] CM [redacted] reported that Mr. [redacted] reported that no services were needed for [redacted] CM [redacted] will continue to staff this case with supervision.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2022-03-15 13:27:00.0	Contact Method:	Face To Face
Contact Time:	01:27 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Hospital	Created Date:	03/16/2022
Completed date:	03/16/2022	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Alleged Perpetrator Interview,Initial ACV Face To Face		
Contact Sub Type:			

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/16/2022 12:46 PM Entered By: [redacted]

On March 15, 2022 at approximately 127 pm [redacted], Child Protective Services Case Manager (CM) [redacted] arrived at the [redacted] Medical Center in [redacted] TN regarding a P1 referral for Abuse Death regarding Alleged Child Victim (ACV) [redacted] age 1 day. The child was not observed face to face due to the child passing on 3/12/22. Per Work Aid 2 it is not required for the DCS CM to observe the child. CM [redacted] spoke with the hospital social worker, [redacted] Ms. [redacted] reported that the child died due to a suspected placental abruption and that the mother had no prenatal care. Ms. [redacted] reported that the child was born alive at 21 weeks gestation and that the child survived for 45 minutes then passed away. Ms. [redacted] reported that resuscitation cannot be administered at 21 weeks gestation. Ms. [redacted] reported that there is no cord stat and that the mother declined an autopsy. Ms. [redacted] reported that the mother and Alleged Perpetrator (AP) [redacted] admitted to using three grams of heroin a day for the last seventeen months. Ms. [redacted] reported that the mother has been pregnant six times and lost four of the children. Ms. [redacted] reported that Ms. [redacted] (AP) tested positive for opiates, amphetamines, and THC upon admission to the hospital. Ms. [redacted] also reported that Ms. [redacted] is currently hospitalized due to MRSA, sepsis, and suspected endocarditis.

CM [redacted] the spoke with the mother, [redacted] (AP) in room [redacted] CM [redacted] was invited into the room by Ms. [redacted] CM [redacted] engaged Ms. [redacted] by explaining the reason for the departments involvement. Ms. [redacted] reported that the child died due to placental abruption because of my sickness. Ms. [redacted] reported that she has pneumonia, and she was unsure of what else. Nursing staff came into the room at this time in which Ms. [redacted] asked nursing staff to advise CM of each diagnosis. Nursing staff reported that Ms. [redacted] has sepsis, MRSA, pneumonia, and is currently awaiting test results for endocarditis. Ms. [redacted] reported that hospital staff didnt tell me that it was anything I did. CM [redacted] asked Ms. [redacted] where she resides in which Ms. [redacted] reported she just stay with friends. Ms. [redacted] reported that she was staying with a friend somewhere on [redacted] when she went to [redacted] Hospital. Ms. [redacted]

Tennessee Department of Children's Services

Case Recording Summary

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

reported that she has two other children [redacted] age 20 and [redacted] age 14 who are in the custody and care of their father, [redacted] Ms. [redacted] denied living in the home with the children. Ms. [redacted] reported that she has been off and on drugs for the last 7 years. Ms. [redacted] reported that she began smoking marijuana at the age of 21 and her drug use has escalated to heroin use currently. Ms. [redacted] reported that she uses Heroin everyday. Ms. [redacted] reported that she snorts and uses needles. Ms. [redacted] reported that the childs father, [redacted] died in December from a drug overdose. Ms. [redacted] reported that she is thinking about rehab in that she will be admitted to the hospital for several weeks. CM [redacted] did discuss rehab options and that CM could assist. CM [redacted] also offered Ms. [redacted] grief counseling in which Ms. [redacted] reported that she would think about it and contact CM [redacted] Ms. [redacted] reported that she found out she was pregnant approximately a month ago. CM [redacted] thanked Ms. [redacted] for her time and offered condolences on the loss of her child. CM [redacted] advised Ms. [redacted] to think about rehab and let CM know if she needs any assistance, Ms. [redacted] agreed. The interview was concluded at the hospital at this time.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2022-03-15 12:00:00.0	Contact Method:	
Contact Time:	12:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	03/16/2022
Completed date:	03/16/2022	Completed By:	[redacted]

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

Contact Type(s): Case Summary

Contact Sub Type: Opening

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/16/2022 11:07 AM Entered By: [redacted]

On March 15, 2022 at 8:51 AM[redacted] a referral was called into Child Abuse Hotline. The referral was screened into [redacted] County as a P1 with immediate response requested. The allegation is Abuse Death, Severe Abuse, and Drug Exposed Child against [redacted] regarding [redacted] newborn (Deceased) and Unknown. The case is assigned to Child Protective Service Case Manager (CM) [redacted] It is not known if this child is of Native American descent. This information will need to be obtained when response is met. Juvenile Court will be notified per local protocol. The District Attorneys Office will be notified per local protocol.

TFACTS History:
No History with Mother or Father as perpetrators
Family History for [redacted]
ASMT [redacted] / DEC / NSN / 2020-02-07
ASMT [redacted] / DEC, LOS / NSN / 2017-09-21
INV [redacted] / PHA, PYA / AUPU / 2015-12-11
ASMT [redacted] / DEC / NSN / 2011-09-01
INV [redacted] / DEC / UtC / 2011-05-18

Family Composition:
[redacted] TN
ACV [redacted] DOB [redacted] DOD: 03/12/2022
Mother [redacted]
Father [redacted] - DOD: December 2021

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2022-03-15 10:28:00.0	Contact Method:	Phone Call
Contact Time:	10:28 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	03/17/2022
Completed date:	03/17/2022	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)

[redacted] Pendleton, Det. Matt

Narrative Details

Narrative Type: Original Entry Date/Time: 03/17/2022 11:44 AM Entered By: [redacted]

On March 15, 2022 at approximately 1028am [redacted], Child Protective Service Case Manager (CM) [redacted] did convene the Child Protective Investigative Team (CPIT) on this date. CM [redacted] did contact Detective (Det.) [redacted] with the [redacted] Police Department in order to collaborate meeting response. It was decided that CM [redacted] would meet response and follow up with Det. [redacted] and Det. [redacted].

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: 03/14/2022

Assignment Date: 03/15/2022

Street Adress: [redacted]

City/State/Zip: [redacted] Tennessee [redacted]

B. Allegation

#	Children's Name	DOB	Specific Allegation for Each Child	Alleged Perpetrator's Name	DOB	Classification	Severe Abuse / CSEM	Classified By / Classified Date
1	[redacted]	[redacted]	Drug Exposed Child	[redacted]	[redacted] 12:00 AM	Allegation Unsubstantiated / Perpetrator Unsubstantiated	No	[redacted] 08/15/2022
2	[redacted]	[redacted]	Abuse Death	[redacted]	[redacted] 12:00 AM	Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[redacted] 08/15/2022
3	[redacted]	[redacted]	Drug Exposed Child	[redacted]	[redacted] 12:00 AM	Allegation Substantiated / Perpetrator Substantiated	Yes	[redacted] 08/15/2022

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: The allegation of Drug Exposed Child against the mother, [redacted] is being classified as AUPU regarding [redacted] due to her not being a caregiver of that child and him residing with and in the custody of his father.
The allegation of DEC against Ms. [redacted] on the deceased child, [redacted] is classified as ASPS per final autopsy in that the toxicology report showed the child was found to have fentanyl, nor fentanyl, 4-ANPP, methamphetamine, amphetamine, venlafaxine, O-Desmethylvenlafaxine, and caffeine in his system. The allegation of Abuse Death against Ms. [redacted] on [redacted] is being classified as AUPU per the autopsy report in that the drug use didn't cause the death of the child. The mother was engaged about a plan and services and she was not complaint. The surviving sibling is safe in the custody of his father. No criminal charges per the DA at this time.

D. Case Workers

Case Worker: [redacted] Date: 08/15/2022

Team Leader: [redacted] Date: 08/15/2022

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:

Department of Children's Services

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

Case Name : [redacted] **Investigation ID:** [redacted]

A statement could not be obtained from [redacted] denied witnessing any drug use. [redacted] lived with his father [redacted] for approximately 10 years. [redacted] was observed to appear clean, well-nourished, free of any visible marks or bruising, and dressed appropriately.

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 report states that the death was caused by intrauterine fetal demise due to acute chorioamnionitis and funisitis. [redacted] was found to have fentanyl, norfentanyl, 4-ANPP, methamphetamine, amphetamine, venflafaxine, O-Desmethylvenlafaxine, and caffieine in his system however; to what degree the drugs contributed to the intrauterine fetal demise is unknown. The manner of death is natural.
The CPIT Team agreed that this case may be classified Allegation Unsubstantiated and Perpetrator Unsubstantiated for Abuse Death regarding [redacted] The CPIT Team agreed that this case may be classified as Allegation Substantiated and Perpetrator Substantiated for Drug Exposed Child regarding [redacted]

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

[redacted] admitted to drug use for approximately 7 years. [redacted] reported that she used heroin. [redacted] denied living in the home with the children.

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

[redacted] denied the mother lived in the home with [redacted] reported that [redacted] has had a drug problem for several years. [redacted] reported that [redacted] is not [redacted] at his home.

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

The Family Advocacy and Support Tool (FAST) was completed for the family in which the FAST result showed that immediate intervention was recommended the risk result identified was moderate risk/need

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

Tennessee Department of Children's Services

FAST 2.0 Assessment Summary Report

Event Type: CPS Case	**Assessment Date: 03/15/2022**
Assessment Type: FAST	**CPS Case ID:** [redacted]

OVERVIEW

Safety Level: Immediate Intervention Recommended	**Assessed at Location:** Hospital
Risk Level: High Need/Risk	
Event Start Date: 09/28/2022	**Last Assessed Date:**
Assessment Status: Approved	**Assessor:** [redacted]
Date Approved: 03/16/2022	**Approver:** [redacted]

PARTICIPANTS

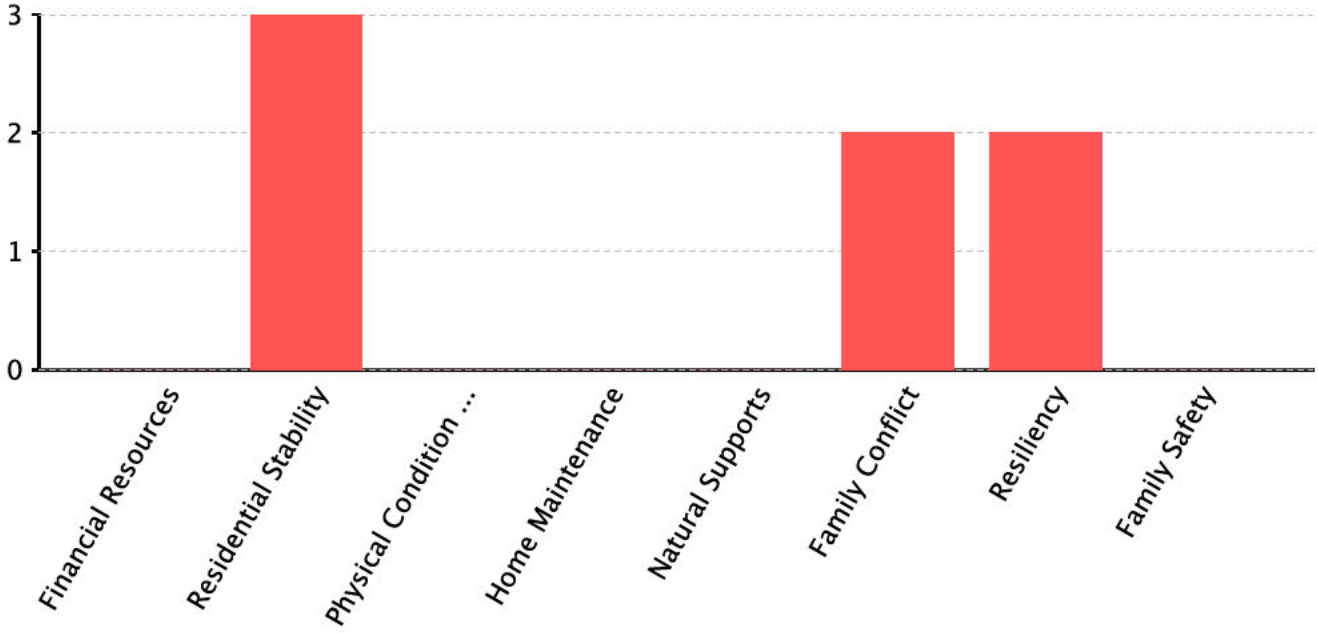
Name	Age	Role	Gender	Person ID	Trauma Score	CSEM Risk
[redacted] (ACV)	Deceased	Youth	M	[redacted]	0	Low
[redacted] (ACV)	14 Yrs	Youth	M	[redacted]	1	Low
[redacted]	47 Yrs	Primary Caregiver	M	[redacted]	N/A	N/A
[redacted] (AP)	39 Yrs	Caregiver	F	[redacted]	N/A	N/A
[redacted]	20 Yrs	Caregiver	F	[redacted]	N/A	N/A

Tennessee Department of Children's Services
FAST 2.0 Assessment Detail Report

Event Type: CPS Case	**Assessment Date:** 03/15/2022
Assessment Type: FAST	**CPS Case ID:** [redacted]

THE FAMILY TOGETHER

This section focuses on the family system. The first step is to define who makes up the family. Generally it is a household but sometimes two households in which the children spend considerable amounts of time could be considered (e.g. divorced parents with 50:50 visitation).

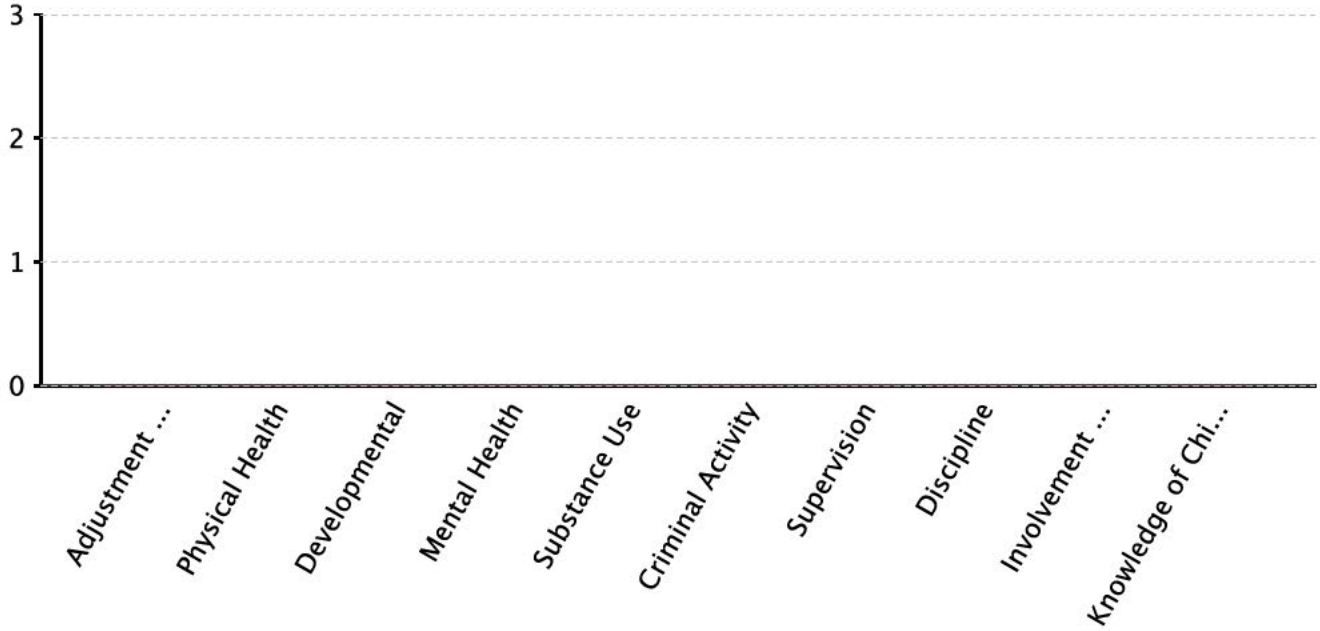


Item	Score	Justification/Narrative
Financial Resources	0	
Residential Stability	3	Mother is homeless
Physical Condition of Home	0	
Home Maintenance	0	
Natural Supports	0	
Family Conflict	2	Father does not allow the mother to see the [redacted] she was last at the home in February and law enforcement was called due to an argument
Resiliency	2	The mother admitted to using heroin daily
Family Safety	0	

Tennessee Department of Children's Services
FAST 2.0 Assessment Detail Report

Event Type: CPS Case	**Assessment Date:** 03/15/2022
Assessment Type: FAST	**CPS Case ID:** [redacted]

CAREGIVERS		
Each adult living in the family defined on the Summary Page who has any caregiver responsibilities would be rated separately in this section.		
Participant: [redacted]	Person ID: [redacted]	Role Primary Caregiver

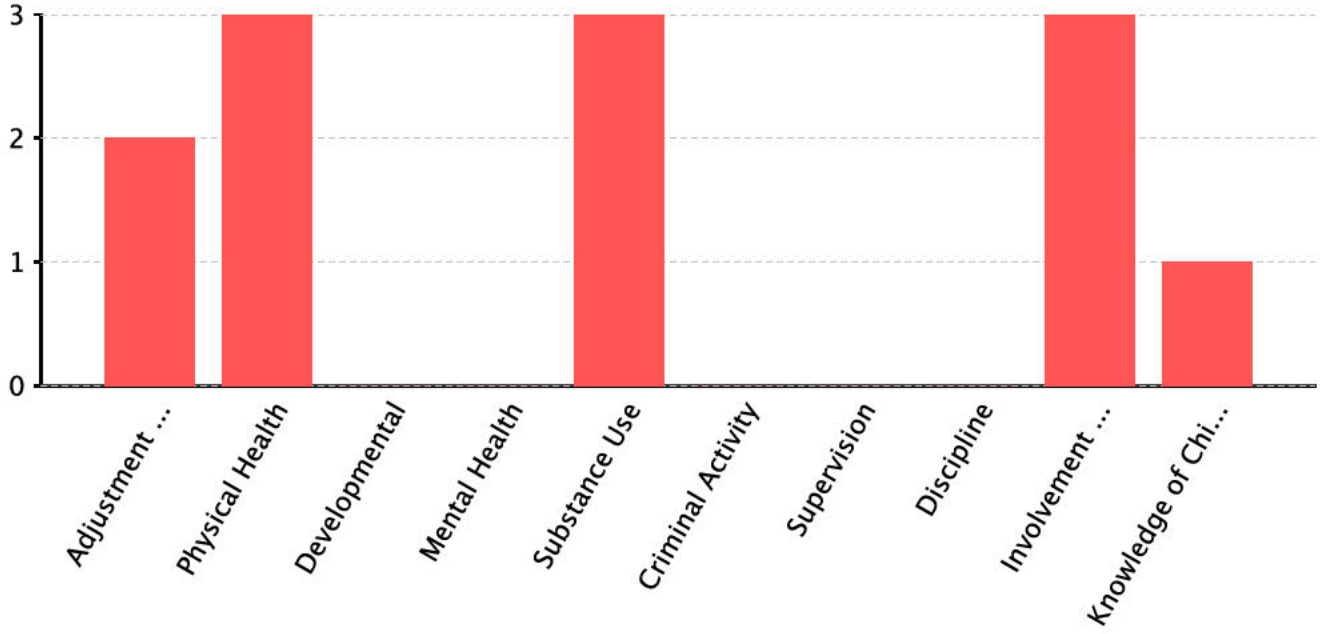


Item	Score	Justification/Narrative
Adjustment to Traumatic Experiences	0	
Physical Health	0	
Developmental	0	
Mental Health	0	
Substance Use	0	
Criminal Activity	0	
Supervision	0	
Discipline	0	
Involvement in Caregiving Functions	0	
Knowledge of Child and Family Needs	0	

Tennessee Department of Children's Services
FAST 2.0 Assessment Detail Report

Event Type: CPS Case	**Assessment Date:** 03/15/2022
Assessment Type: FAST	**CPS Case ID:** [redacted]

CAREGIVERS		
Each adult living in the family defined on the Summary Page who has any caregiver responsibilities would be rated separately in this section.		
Participant: [redacted]	Person ID: [redacted]	Role: Caregiver

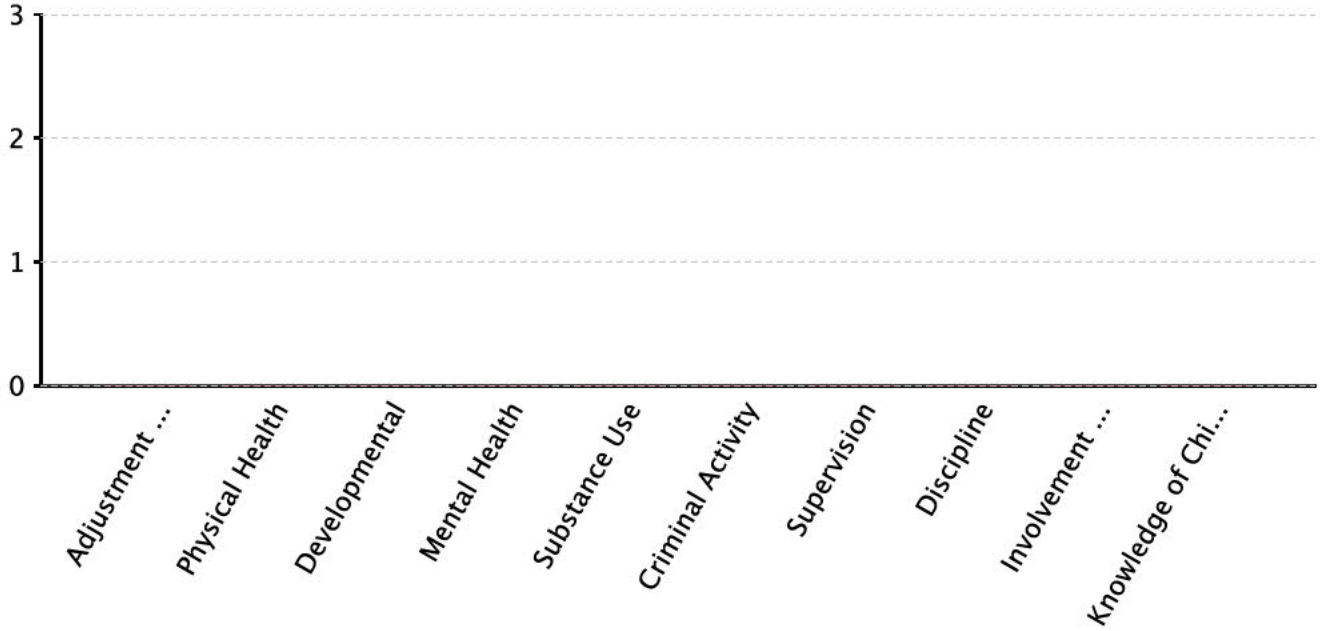


Item	Score	Justification/Narrative
Adjustment to Traumatic Experiences	2	admitted to using drugs for 7 years as a coping mechanism
Physical Health	3	Pneumonia, sepsis, endocarditis, and MRSA currently hospitalized
Developmental	0	
Mental Health	0	
Substance Use	3	Heroin daily
Criminal Activity	0	
Supervision	0	
Discipline	0	
Involvement in Caregiving Functions	3	Not involved in daily life of [redacted]
Knowledge of Child and Family Needs	1	concern that mother does not know needs of children.

Tennessee Department of Children's Services
FAST 2.0 Assessment Detail Report

Event Type: CPS Case	**Assessment Date:** 03/15/2022
Assessment Type: FAST	**CPS Case ID:** [redacted]

CAREGIVERS		
Each adult living in the family defined on the Summary Page who has any caregiver responsibilities would be rated separately in this section.		
Participant: [redacted]	Person ID: [redacted]	Role: Caregiver

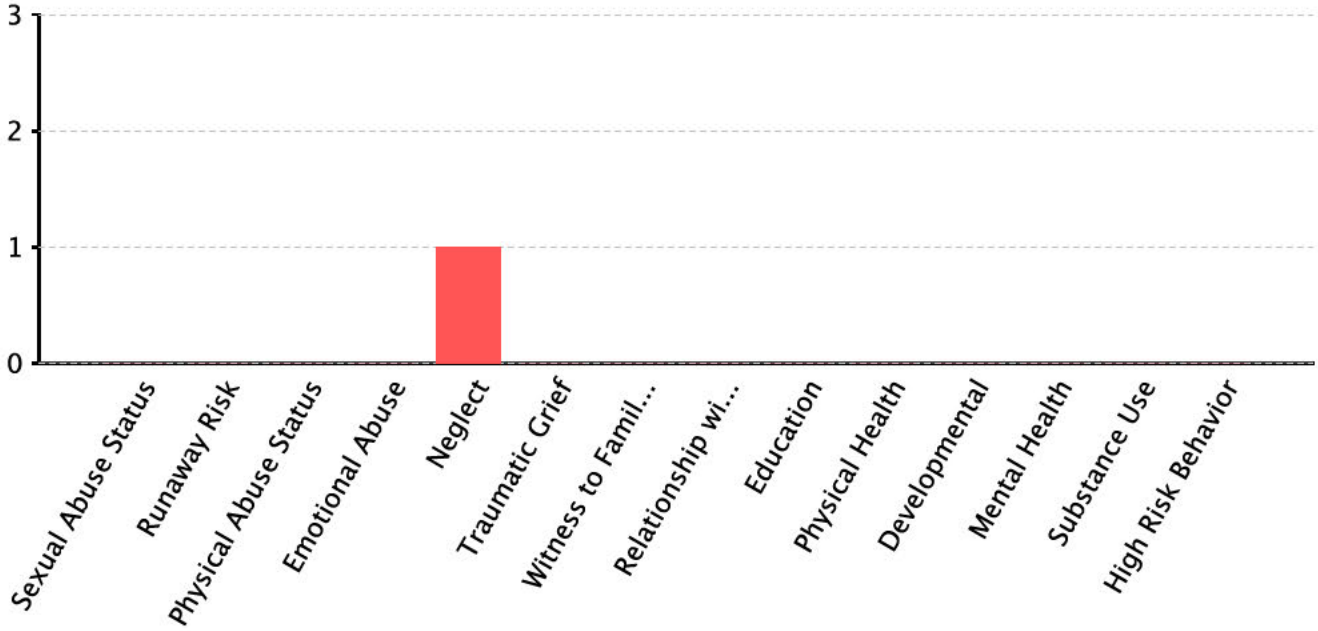


Item	Score	Justification/Narrative
Adjustment to Traumatic Experiences	0	
Physical Health	0	
Developmental	0	
Mental Health	0	
Substance Use	0	
Criminal Activity	0	
Supervision	0	
Discipline	0	
Involvement in Caregiving Functions	0	
Knowledge of Child and Family Needs	0	

Tennessee Department of Children's Services
FAST 2.0 Assessment Detail Report

Event Type: CPS Case	**Assessment Date:** 03/15/2022
Assessment Type: FAST	**CPS Case ID:** [redacted]

YOUTH		
This section is used to describe the strengths and needs of all children and youth whose age, at the time of the assessment, is 0 to 18 years.		
Participant: [redacted] (CSEM)	Person ID: [redacted]	Age:14 Yrs



Item	Score	Justification/Narrative
Sexual Abuse Status	0	
Runaway Risk	0	
Physical Abuse Status	0	
Emotional Abuse	0	
Neglect	1	mother left the children with the father 10 years ago and has not been consistently involved
Traumatic Grief	0	
Witness to Family, School or Community Violence	0	
Relationship with Primary Caregiver	0	
Education	0	
Physical Health	0	
Developmental	0	

Tennessee Department of Children's Services
FAST 2.0 Assessment Detail Report

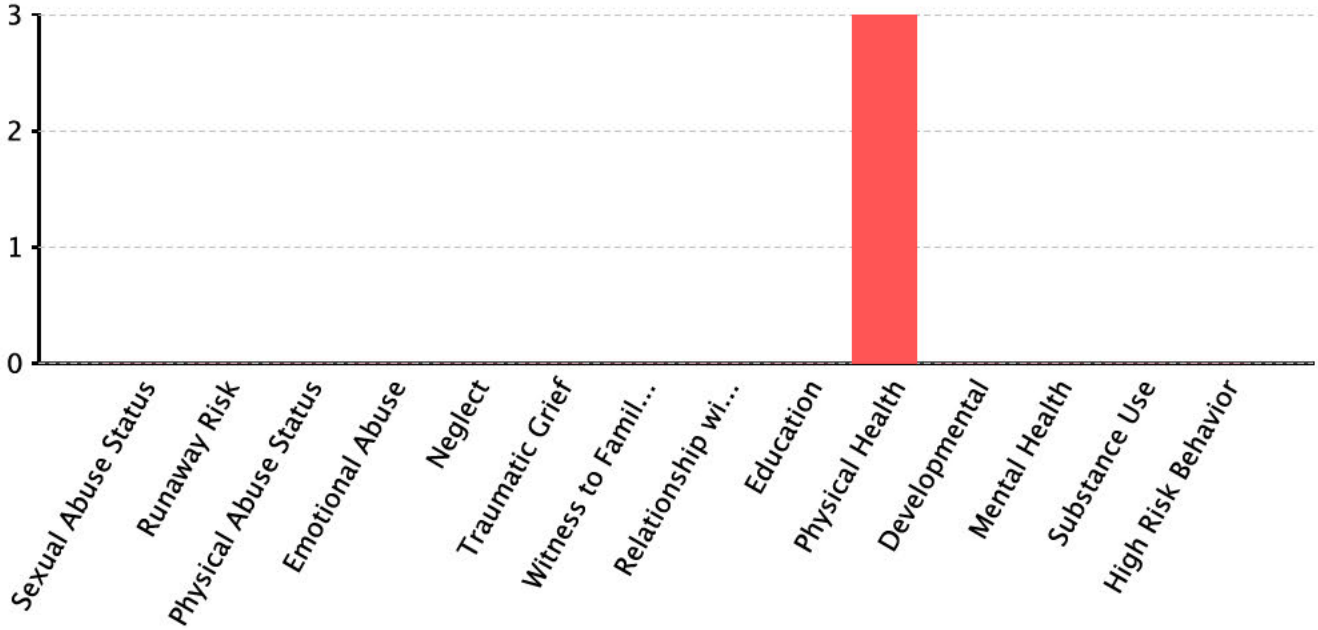
Event Type: CPS Case	**Assessment Date:** 03/15/2022
Assessment Type: FAST	**CPS Case ID:** [redacted]

Mental Health	0	
Substance Use	0	
High Risk Behavior	0	

Tennessee Department of Children's Services
FAST 2.0 Assessment Detail Report

Event Type: CPS Case	**Assessment Date:** 03/15/2022
Assessment Type: FAST	**CPS Case ID:** [redacted]

YOUTH		
This section is used to describe the strengths and needs of all children and youth whose age, at the time of the assessment, is 0 to 18 years.		
Participant: [redacted] (CSEM)	Person ID: [redacted]	Age:Deceased



Item	Score	Justification/Narrative
Sexual Abuse Status	0	
Runaway Risk	0	
Physical Abuse Status	0	
Emotional Abuse	0	
Neglect	0	
Traumatic Grief	0	
Witness to Family, School or Community Violence	0	
Relationship with Primary Caregiver	0	
Education	NA	
Physical Health	3	Child was born at 21 weeks gestation and survived for 45 minutes and passed away
Developmental	0	

Tennessee Department of Children's Services
FAST 2.0 Assessment Detail Report

Event Type: CPS Case	**Assessment Date:** 03/15/2022
Assessment Type: FAST	**CPS Case ID:** [redacted]

Mental Health	0	
Substance Use	0	
High Risk Behavior	0	