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

Intake

Intake ID: [redacted]

Intake Taken By: Web Service

Intake Date/Time: 05/23/2022 02:11 PM [redacted]

Track Assigned: Investigation

Priority Assigned: 1

Screened By: [redacted]

Date Screened: 05/23/2022

Investigation

Investigation ID: [redacted]

First County/Region [redacted]

Date/Time Assigned : 05/24/2022 11:26 AM

First Team Leader Assigned: [redacted] Date/Time 05/20/2022 12:00 AM

First Case Manager [redacted] Date/Time 05/20/2022 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ? / CSEM ?	Alleged Perpetrator	Relationship to Alleged Victim
[redacted]	1 Yr 11 Mos	Drug Exposed Child	Yes /	[redacted]	Birth Mother

Preliminary Near Death: [redacted]

Referent(s)

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

Referent Address: [redacted], [redacted] Tennessee [redacted]

Referent Phone Number: [redacted]

Type of Contact: Web Referral

Notification: E-mail

Narrative: NON-CUSTODIAL CHILD PRELIMINARY NEAR DEATH

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

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

Pending: No
Awaiting Screening: No
Submitted: No

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

Open CPS: No
Substantiated: INV [redacted] / DEC / AP: [redacted] / ASPS / 2021-04-21
Death: No
Screen Outs: [redacted]

History (not listed above): No

County of Jurisdiction: [redacted]
School/ Daycare: None
Active Military Status: Unknown

Reporter's name/relationship: [redacted]

WEB REFERRAL VERBATIM

Referent:
Interpreter needed: unknown
Type of Interpreter:

Victim:
Interpreter needed: No
Type of Interpreter:
First Name: [redacted]
Last Name: [redacted]
Deceased: No
Date of Death: none
Describe the Victim:
Native American Descent: Unknown
Contact: [redacted]
Contact Address [redacted] , [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
Does the alleged perpetrator have a criminal record?: Yes
Does the alleged perpetrator have prior involvement with DCS?: Yes
Contact:
Contact Address [redacted] , [redacted] , TN, [redacted]
Directions:
Employer Name:
Employer Address:
Employer Contact:

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

Incident County: [redacted]
Describe in detail what has happened to the child. What is the abuse or neglect?:
[redacted] overdosed on Heroin/Fentanyl on Friday (5/20/22) at her home. She was given 8mg of Narcan, and transported to [redacted] Medical Center. [redacted] was 36 weeks pregnant, and underwent an emergent C-section. [redacted] was unresponsive at birth, and was placed on the ventilator. [redacted] likely experienced HIE, and is being cooled to prevent further organ and brain damage. He remains on the ventilator. He is likely having seizures. He has no gag and no eye opening. [redacted] admits to using heroin Friday to the overdose. She reports that she had been clean for 18 months prior this use. [redacted] has one other child that is in the custody of her brother. [redacted] will likely discharge home tomorrow. [redacted] does not have a discharge date.

When did the abuse or neglect occur?:
NA

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

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

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

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.:
NA

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?:
NA

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?:
NA

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

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

END OF WEB REFERRAL

Emailed/Paged CPSI On Call:

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

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

[redacted]
Region RA - [redacted]

Recipients	Time Issued	Response Received	Devices	Responses
[redacted]	05-23-22 07:04:19 PM [redacted]	---	[redacted]	

Email Sent
05-23-22 07:04:19 PM [redacted] 05-23-22 07:04:58 PM [redacted] +Received

INV Track - P1 - PND
[redacted], CAH Director, on 5/23/22 @ 7:05pm

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

Participant(s)

Name: [redacted]

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

SSN: | Race: White | Age: 1 Yr 11 Mos

Address: [redacted], [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
Tennessee Child Abuse Hotline Summary

Name: [redacted]

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

SSN: | Race: White | Age: 28 Yrs

Address: [redacted], [redacted] Tennessee [redacted]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

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

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:	2023-09-29 17:44:00.0	Contact Method:	
Contact Time:	05:44 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	09/29/2023
Completed date:	09/29/2023	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: 09/29/2023 04:45 PM Entered By: [redacted]

On May 23, 2022, the Department of Childrens Services (DCS) received a referral for an allegation of Drug Exposed Child (Severe abuse) regarding alleged child victim (ACV) [redacted] The alleged perpetrator (AP) was [redacted] Upon further investigation, the allegations of Lack of Supervision and Drug Exposed Child were added to the case regarding ACV [redacted] and Abuse Death regarding ACV [redacted] Ms. [redacted] used illicit substances during her pregnancy. On 05/20/2022, Ms. [redacted] overdosed on heroin while pregnant and with her 18-month-old son [redacted] in her care during an unsupervised visit. Ms. [redacted] delivered [redacted] on 05/21/2022, who suffered an in utero hypoxic event from the heroin overdose. Ms. [redacted] admitted to using heroin the last month of her pregnancy and multiple times while [redacted] was in her care. As a result of [redacted] inutero hypoxic event, he passed away on 06/02/2022.

Team leader (TL) [redacted] reviewed this case. TL [redacted] TC [redacted] Director [redacted] and [redacted] approves the classification decision and closure of this case, based on the information documented in TFACTS and the record. A copy of the form CS-0740 Child Protective Services Investigation Summary and Classification Decision of Child Abuse/Neglect Referral will be sent to the [redacted] County Juvenile Court Judge per local protocol.

Next steps needed to ensure case process and compliance: This case will be approved for closure.

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:	2023-09-29 13:35:00.0	Contact Method:	
Contact Time:	01:35 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	09/29/2023
Completed date:	09/29/2023	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: 09/29/2023 12:39 PM Entered By: [redacted]

TEIS referral was made for [redacted] on 09/296/2023.

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:	2023-09-27 10:40:00.0	Contact Method:	Face To Face
Contact Time:	10:40 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	09/29/2023
Completed date:	09/29/2023	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: 09/29/2023 09:03 AM Entered By: [redacted]

Date: 9/27/2023
Time: 10:40am
Location: [redacted], TN [redacted]
Purpose: Monthly ACV

CPSI [redacted] made a home visit at [redacted], TN [redacted] to follow-up with the investigation. CPSI [redacted] gained consent to enter the home by [redacted]
The following were present in the room: CPSI [redacted] and [redacted]

CPSI [redacted] went to the family home on 09/27/2023. CPSI [redacted] visited the home. CPSI [redacted] observed the trailer. The home was appropriate with no apparent hazards. The home appeared clean (no dirty dishes, floors appeared vacuumed, swept and mopped, there was no excessive dust, no visible pests, no excessive trash, no dirty clothes on the floor etc). There was food present in the home.
CPSI [redacted] observed [redacted] who is pre-verbal due to being a toddler. A full interview was not completed. CPSI [redacted] observed [redacted] unclothed and did not see any marks or bruises based on this observation. [redacted] is seen at [redacted] Pediatrics and is up to date on his vaccinations. His last appointment was scheduled last month, but Ms. [redacted] discovered that [redacted] insurance had been canceled. [redacted] was under his mothers insurance, but due to her being incarcerated she was not able to continue to follow up with her DHS appointments, and his insurance was canceled. Ms. [redacted] is trying to work on getting [redacted] back on Tenncare. Once he is back on his insurance she will be making him an appointment.

Ms. [redacted] reports that she believes [redacted] may have some developmental delays. She is not sure if this could be the side effects of the mother using illicit substances while she was pregnant with [redacted]
[redacted] does not like sitting at the kitchen table, but enjoys sitting at the counter to eat.

Tennessee Department of Children's Services

Case Recording Summary

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

[redacted] is using some words now, mommy and daddy. [redacted] is really hard to understand when he is talking. He is not fully potty trained. Ms. [redacted] is concerned about his speech.

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:	2023-09-26 20:16:00.0	Contact Method:	
Contact Time:	08:16 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	09/26/2023
Completed date:	09/26/2023	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: 09/26/2023 07:17 PM Entered By: [redacted]

On May 23, 2022, the Department of Childrens Services (DCS) received a referral for an allegation of Drug Exposed Child (Severe abuse) regarding alleged child victim (ACV) [redacted] The alleged perpetrator (AP) was [redacted] Upon further investigation, the allegations of Lack of Supervision and Drug Exposed Child were added to the case regarding ACV [redacted] and Abuse Death regarding ACV [redacted] The AP was identified as [redacted] This investigation was assigned to Child Protective Services Case Manger (CM) [redacted] by Team Leader (TL) [redacted] This case was worked in conjunction with the following [redacted] County Sheriffs Office ([redacted]CSO) Family Crimes Detective, [redacted]

[redacted] (12 days) never left the hospital after his birth. He was in the care of his mother, [redacted] (26) who resided with the maternal grandmother, [redacted] (51), and maternal uncle, [redacted] (27). [redacted] did not have legal custody of her other son [redacted] (18 months) but had unsupervised overnight visitation with [redacted] as ordered through [redacted] County Juvenile Court ([redacted]CJC). [redacted] (28) was the identified alleged father of [redacted] did not reside in the home with Ms. [redacted]

On May 20, 2022, [redacted] overdosed on Heroin/Fentanyl at the family home. She was given 8mg of Narcan by Emergency Services and transported to The [redacted] Medical Center ([redacted]MC). Ms. [redacted] was 36 weeks pregnant and underwent an emergency C-section. Baby [redacted] was unresponsive at birth and was placed on a ventilator. It is believed that baby [redacted] likely experienced a Hypoxic- Ischemic Encephalopathy (HIE) and is being cooled to prevent further organ and brain damage. [redacted] remains on the ventilator and its likely he is having seizures. He has no gag reflexes and is not opening his eyes. Ms. [redacted] admits to using heroin Friday which resulted in the overdose. Ms. [redacted] claims she has been clean for 18 months prior to her most recent use. Ms. [redacted] has one other child that is in the custody of her brother.

On May 24, 2022, CM [redacted] CM [redacted] and CM [redacted] met with [redacted] at 11:00am at [redacted] Medical Center ([redacted]MC), [redacted] TN. Ms. [redacted] delivered at 36 weeks and 2 days via an emergency cesarian section due to her son having a non-reassuring heartbeat.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Status: Close Organization: [redacted] Region

Ms. [redacted] has a history of substance abuse, but has been clean for 18 months, using the Vivitrol shot. Her physician had changed her from Vivitrol to Naltrexone, as Vivitrol could complicate the birthing process. Her physician warned of possible relapse due to the change and also prescribed her Narcan. Ms. [redacted] attempted to use the Naltrexone, but it made her sick, so she stopped using it. She admitted to using heroine on May 20, 2023, and this was her first use in 18 months.
Ms. [redacted] currently has unsupervised visitations with her other son, [redacted] and she sees him daily, picking him up at 10am and returning him around bedtime each night. The only step she has left to do is go to the courthouse and file a petition to regain custody of [redacted] as she has completed all other task ordered by [redacted] County Juvenile Court ([redacted] CJC), [redacted] TN.
Ms. [redacted] reported that the day of the incident she was not trying to kill herself, but had been depressed about finances, losing her job, her relationship and just wanted to feel instant gratification and get a nap about 3:00 to 3:30pm. She put her toddler in the pack & play in her room for a nap and used in her bed. Her mother, [redacted] found her in bed, needle in hand, unresponsive after returning home from work around 4:45pm. Ms. [redacted] used Narcan on her daughter and called 911.
On May 24, 2022, at 12:30pm, CM [redacted] CM [redacted] and CM [redacted] spoke with the [redacted] maternal grandmother, at [redacted] MC. Ms. [redacted] confirmed the same information her daughter. She was unaware of her daughter relapsing as the Vivitrol had been successful.
On May 24, 2022, CM [redacted] traveled to [redacted] and [redacted] home at [redacted], TN [redacted] Mr. and Ms. [redacted] received legal and physical custody of [redacted] on January 5, 2021, through [redacted] CJC. Mrs. [redacted] thought that Ms. [redacted] was doing well in her recovery and did not expect to hear of an overdose. They confirmed Ms. [redacted] had daily visits with [redacted] and did not have concerns she was using, prior to the overdose. They were agreeable to an IPA, which restricted contact with Ms. [redacted] at this time.
On May 24, 2022, CM [redacted] met with [redacted] at the family home located at [redacted], [redacted] TN [redacted] Mr. [redacted] remembers seeing his sister, Ms. [redacted] and his nephew, [redacted] last between 1:00pm and 2:00pm on the day in question. His sister stated she was taking [redacted] to their room to lay down for a nap. Mr. [redacted] went to his bedroom and began playing video games. The next he heard from anyone was when his mother was screaming for him to go get the Narcan because his sister had overdosed. [redacted] was in his pack and play at the time awake. His sisters room is small and cluttered, so he left her room when emergency personal arrived at the home. Mr. [redacted] was not aware that his sister was using again. He does not talk with his sister often because he works night shift and sleeps during the day. He is doing okay since the incident but has struggled seeing his sister in that state.
On May 26, 2022, CM [redacted] [redacted] CSO Family Crimes Detective [redacted] [redacted] CSO Family Crimes Detective [redacted] [redacted] CSO Major Crimes Detective [redacted], [redacted] CSO Major Crimes Detective [redacted], and [redacted] County Probation and Parole Officer ([redacted] CPO) [redacted] traveled to the home of [redacted] at [redacted], [redacted] TN [redacted] The intent of this visit, was due to a search warrant for Ms. [redacted] phone. During this time, Ms. [redacted] admitted to having her son spend the night once. Additionally, she admitted to using 18 out of 30 days.

On May 30, 2022, CM [redacted] spoke with Mr. [redacted] the alleged father of [redacted] by phone. Mr. [redacted] was aware of Ms. [redacted] history of substance use, but was unaware Ms. [redacted] was using again. Ms. [redacted] had been acting strange for the past month, but he thought it was just pregnancy hormones. Mr. [redacted] works a lot due lack of employees and has not been able to spend a great deal of time with Ms. [redacted] Mr. [redacted] stated he and Ms. [redacted] have been arguing a lot over stupid things.

On June 1, 2022, [redacted] completed a hair follicle test. The hair follicle results were received on June 06, 2022. The hair follicle results were released on June 10, 2022. [redacted] tested positive for Fentanyl.
A family conference was held on June 1, 2022, at [redacted] MC, discussing [redacted] severe neurologic impairment and the likelihood of machine dependency for the rest of his life with no hope of any improvement. During the family

Tennessee Department of Children's Services

Case Recording Summary

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

conference, the family elected to withdraw all supportive medical treatment and initiate comfort care for [redacted] was pronounced deceased on June 2, 2022, at 6:37am at the [redacted]MC.

On June 04, 2022, an autopsy was completed on ACV [redacted] by Dr. [redacted], Regional Forensics Center, [redacted] TN. The autopsy reported that [redacted] died of global hypoxic-ischemic brain injury due to maternal sepsis (due to maternal pneumonia), which led to poor placental perfusion. The manner of death is natural.

The case was presented to the [redacted] County Child Protection Investitive Team meeting on September 28, 2022, by CM [redacted] Those in attendance were Team Leader [redacted] [redacted]CSO Lieutenant [redacted], DCS Attorney [redacted], Juvenile Court [redacted], Assistant District Attorney, CAC [redacted], and VIA ZOOM Child Abuse Pediatrician Dr. [redacted].

All CPIT members agreed with the recommended severe abuse classification of abuse death as unsubstantiated but adding severe Drug Exposed Child (DEC) regarding ACV [redacted] against AP [redacted] The mother admitted to using illicit substances including heroin and fentanyl throughout the pregnancy, therefore DEC severe is added for [redacted] also. Lack of Supervision (severe) and Drug Exposed child (severe) were added with [redacted] as the ACV against AP [redacted] as the child was present during the overdose and had a positive hair follicle for Fentanyl.

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.

Per DCS Policy Work Aid 1 Section B:
Drug Exposed Child is defined as:

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

Has a parent/caregiver that uses drugs or chemical substances that impacts their ability to adequately care for the child; or

Has a parent/caregiver that has current addiction issues that could adversely affect the childs physical, mental, or emotional functioning.

Drug Exposed Child (Severe) Severe forms of this allegation include but is not limited to:

The manufacturing of methamphetamine where children are present, or in close proximity;

Infants born with a diagnosis of Fetal Alcohol Spectrum Disorder (FASD);

Infants born with a diagnosis of Neo-Natal Abstinence Syndrome (NAS) where the diagnosis is not based on the mothers prescribed and appropriately followed Medication-Assisted Treatment;

Knowingly or with gross negligence allowing a child under eight (8) years of age to ingest an illegal substance or a controlled substance that results in the child testing positive on a drug screen, except as legally prescribed to the child; and/or

Tennessee Department of Children's Services

Case Recording Summary

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

Knowingly allowing a child to be within a structure where a Schedule I controlled substance under TCA 39- 17-406, cocaine, methamphetamine and/or fentanyl are present and accessible by the child.

There is a preponderance of evidence to support the allegation of Drug Exposed Child and Lack of Supervision. This case will be closed as Allegation and Perpetrator Unsubstantiated for the Abuse Death of ACV [redacted] The case will be closed with Allegations and Perpetrator Substantiated for Drug Exposed Child and Lack of Supervision regarding ACV [redacted] against AP [redacted] The case will be closed as Allegation and Perpetrator Substantiated for Drug Exposed Child regarding ACV [redacted] due to the mother admitting to heroin use throughout her pregnancy.

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:	2023-09-12 08:00:00.0	Contact Method:	Face To Face
Contact Time:	08:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	09/28/2023
Completed date:	09/28/2023	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	ACV Interview/Observation,Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/28/2023 09:02 PM Entered By: [redacted]

Date: 7/12/2023
Time: 8:00 am
Location: [redacted], TN [redacted]
Purpose: Monthly ACV

CPSI [redacted] made a home visit at [redacted], TN [redacted] to follow-up with the investigation. CPSI [redacted] gained consent to enter the home by [redacted]
The following were present in the room: CPSI [redacted] and [redacted]
CPSI [redacted] went to the family home on 07/12/2023. CPSI [redacted] visited the home. CPSI [redacted] observed the trailer. The home was appropriate with no apparent hazards. The home appeared clean (no dirty dishes, floors appeared vacuumed, swept and mopped, there was no excessive dust, no visible pests, no excessive trash, no dirty clothes on the floor etc). There was food present in the home.
CPSI [redacted] observed [redacted] who is pre-verbal due to being a toddler. An interview was not completed.
CPSI [redacted] observed [redacted] unclothed and did not see any marks or bruises based on this observation. [redacted] was sitting at the counter eating and watching his tablet. [redacted] has a doctors appointment scheduled for next month. Ms. [redacted] reported that the family is doing well. She reported that her and her husband are still wanting to adopt [redacted] if that is an option. They are concerned that the mother will try to regain custody of [redacted] when she gets out of prison. Ms. [redacted] reports that [redacted] calls her mom and he calls [redacted] dad. She reports that he is still not talking a lot but he has made improvements.

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:	2023-08-29 10:00:00.0	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	08/29/2023
Completed date:	08/29/2023	Completed By:	[redacted]
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 08/29/2023 07:59 PM Entered By: [redacted]

Awaiting FCC staff to reopen classification to correct.

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:	2023-08-10 10:25:00.0	Contact Method:	
Contact Time:	10:25 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	08/10/2023
Completed date:	08/10/2023	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)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 08/10/2023 11:12 AM Entered By: [redacted]

TL [redacted] completed an administrative review on this date with [redacted] regarding the [redacted] case. The child fatality summary was sent to TC [redacted] on 8/1/2023 for 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:	2023-08-09 17:00:00.0	Contact Method:	Face To Face
Contact Time:	05:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	09/29/2023
Completed date:	09/29/2023	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: 09/29/2023 12:31 PM Entered By: [redacted]

Date: 08/09/2023
Time: 5:00 pm
Location: [redacted], TN [redacted]
Purpose: Monthly ACV

CPSI [redacted] made a home visit at [redacted], TN [redacted] to follow-up with the investigation. CPSI [redacted] gained consent to enter the home by [redacted]
The following were present in the room: CPSI [redacted] and [redacted]
CPSI [redacted] went to the family home on 08/09/2023. CPSI [redacted] visited the home. CPSI [redacted] observed the trailer. The home was appropriate with no apparent hazards. The home appeared clean (no dirty dishes, floors appeared vacuumed, swept and mopped, there was no excessive dust, no visible pests, no excessive trash, no dirty clothes on the floor etc). There was food present in the home.
CPSI [redacted] observed [redacted] who is pre-verbal due to being a toddler. A full interview was not completed.
CPSI [redacted] observed [redacted] unclothed and did not see any marks or bruises based on this observation.

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:	2023-07-20 12:02:00.0	Contact Method:	
Contact Time:	12:02 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	07/20/2023
Completed date:	07/20/2023	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: 07/20/2023 11:03 AM Entered By: [redacted]

TL [redacted] is out on leave. TL [redacted] is acting TL for this CM and caseload. TL [redacted] has a scheduled staffing therefore TL [redacted] will complete admin based on staffing.

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:	2023-06-15 10:00:00.0	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	06/15/2023
Completed date:	06/15/2023	Completed By:	[redacted]
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 06/15/2023 10:05 AM Entered By: [redacted]

TL directed CM to have F2F visits entered no later than 6/16/23.

After CM updates notations, TC [redacted] to assist in 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:	2023-06-02 15:00:00.0	Contact Method:	Face To Face
Contact Time:	03:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	06/26/2023
Completed date:	06/26/2023	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: 06/26/2023 09:50 AM Entered By: [redacted]

Date: 06/2/2023
Time: 3:00pm
Location: [redacted], TN [redacted]
Purpose: Monthly ACV

CPSI [redacted] observed [redacted] who is pre-verbal due to being a toddler. An interview was not completed.
CPSI [redacted] observed [redacted] unclothed, and did not see any marks or bruises based on this observation.

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:	2023-05-23 12:30:00.0	Contact Method:	Face To Face
Contact Time:	12:30 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	06/26/2023
Completed date:	06/26/2023	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: 06/26/2023 09:49 AM Entered By: [redacted]

Date: 05/23/2023
Time: 12:30 PM
Location: [redacted] TN [redacted]
Purpose: Monthly ACV

CPSI [redacted] observed [redacted] who is pre-verbal due to being a toddler. An interview was not completed.
CPSI [redacted] observed [redacted] unclothed, and did not see any marks or bruises based on this observation.

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:	2023-05-12 16:00:00.0	Contact Method:	
Contact Time:	04:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	05/19/2023
Completed date:	05/19/2023	Completed By:	[redacted]
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 05/19/2023 10:25 AM Entered By: [redacted]

CM has completed first draft of closing case summary. Case summary is pending review by leadership.

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:	2023-04-24 10:00:00.0	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	04/24/2023
Completed date:	04/24/2023	Completed By:	[redacted]
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 04/24/2023 09:42 AM Entered By: [redacted]

Case is significantly overdue. CM and TL to make a plan to update documentation and complete closing summary.

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:	2023-04-04 09:00:00.0	Contact Method:	Face To Face
Contact Time:	09:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	06/26/2023
Completed date:	06/26/2023	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: 06/26/2023 09:47 AM Entered By: [redacted]

Date: 04/04/2022
Time: 9:00am
Location: [redacted], TN [redacted]
Purpose: Monthly ACV

CPSI [redacted] observed [redacted] who is pre-verbal due to being a toddler. An interview was not completed.
CPSI [redacted] observed [redacted] unclothed, and did not see any marks or bruises based on this observation.

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:	2023-03-30 10:00:00.0	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	03/30/2023
Completed date:	03/30/2023	Completed By:	[redacted]
Purpose(s):	Well Being		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/30/2023 04:49 PM Entered By: [redacted]

CM and TL to dedicate time to update case notations and prepare case for closure.

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:	2023-03-01 13:00:00.0	Contact Method:	Face To Face
Contact Time:	01:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	06/26/2023
Completed date:	06/26/2023	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: 06/26/2023 09:47 AM Entered By: [redacted]

Date: 03/01/2022
Time: 1:00pm
Location: [redacted], TN [redacted]
Purpose: Monthly ACV

CPSI [redacted] observed [redacted] who is pre-verbal due to being a toddler. An interview was not completed.
CPSI [redacted] observed [redacted] unclothed, and did not see any marks or bruises based on this observation.

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:	2023-02-28 10:00:00.0	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	03/01/2023
Completed date:	03/01/2023	Completed By:	[redacted]
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/01/2023 11:33 AM Entered By: [redacted]

Case remains overdue. CM to work on completing closing case summary.

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:	2023-02-09 16:45:00.0	Contact Method:	Face To Face
Contact Time:	04:45 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	06/26/2023
Completed date:	06/26/2023	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: 06/26/2023 09:33 AM Entered By: [redacted]

Date: 02/09/2023
Time: 4:45 pm
Location: [redacted], TN [redacted]
Purpose: Monthly ACV

CPSI [redacted] observed [redacted] who is pre-verbal due to being a toddler. An interview was not completed.
CPSI [redacted] observed [redacted] unclothed, and did not see any marks or bruises based on this observation.

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:	2023-01-31 10:00:00.0	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	02/01/2023
Completed date:	02/01/2023	Completed By:	[redacted]
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 02/01/2023 10:58 AM Entered By: [redacted]

Due to high assignments and staffing shortages, CM has been unable to dedicate adequate time to updating this case. CM to dedicate time in the next 30 days to completing closing case summary and preparing case for review and closure.

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:	2023-01-23 10:00:00.0	Contact Method:	Face To Face
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	06/26/2023
Completed date:	06/26/2023	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: 06/26/2023 09:26 AM Entered By: [redacted]

Date: 01/23/2023
Time: 10:00am
Location: [redacted], TN [redacted]
Purpose: Monthly ACV

CPSI [redacted] observed [redacted] who is pre-verbal due to being a toddler. An interview was not completed.
CPSI [redacted] observed [redacted] unclothed, and did not see any marks or bruises based on this observation.

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:	2022-12-22 11:45:00.0	Contact Method:	Face To Face
Contact Time:	11:45 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	06/26/2023
Completed date:	06/26/2023	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: 06/26/2023 09:23 AM Entered By: [redacted]

Date: 12/22/2022
Time: 11:45 am
Location: [redacted], TN [redacted]
Purpose: Monthly ACV

CPSI [redacted] observed [redacted] who is pre-verbal due to being a toddler. An interview was not completed.
CPSI [redacted] observed [redacted] unclothed, and did not see any marks or bruises based on this observation.

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:	2022-12-20 10:00:00.0	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	01/03/2023
Completed date:	01/03/2023	Completed By:	[redacted]
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 01/03/2023 02:16 PM Entered By: [redacted]

CM has shared her intention to prepare case for closure next month.

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:	2022-11-30 10:00:00.0	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	12/13/2022
Completed date:	12/13/2022	Completed By:	[redacted]
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 12/13/2022 11:11 AM Entered By: [redacted]

Medical records received, reviewed and uploaded.

CM and TL to review closing case summary template and start working on closing documentation.

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:	2022-11-16 16:00:00.0	Contact Method:	Face To Face
Contact Time:	04:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	06/26/2023
Completed date:	06/26/2023	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: 06/26/2023 09:21 AM Entered By: [redacted]

Date: 11/16/2022
Time: 4:00 pm
Location: [redacted], TN [redacted]
Purpose: Monthly ACV

CPSI [redacted] made a home visit at [redacted], TN [redacted] to follow-up with the investigation.

CPSI [redacted] observed [redacted] who is pre-verbal due to being a toddler. An interview was not completed.
CPSI [redacted] observed [redacted] unclothed, and did not see any marks or bruises based on this observation.

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:	2022-11-10 10:40:00.0	Contact Method:	
Contact Time:	10:40 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	11/10/2022
Completed date:	11/10/2022	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: 11/10/2022 10:15 AM Entered By: [redacted]

Medical birth records have been received on the infant [redacted] from [redacted] Medical Center. These records have been reviewed by FSS [redacted]

Summary:
Reason for delivery-NRFHT, decreased variability/tachycardia, MOB septic. The mother [redacted] had a negative UDS upon admission but was admitted due to a heroin/fentanyl overdose 24 hours before the birth. [redacted] was born at 36.2 weeks and weighed 2980g via C section. Delivered unresponsive and was hypertonic. Morphine administered. Severe perinatal anoxic-ischemic brain injury. Complication by maternal drug use.

Cord stat was positive for THC. A family conference was held on 6/1/22 and discussed [redacted] severe neurologic impairment and the likelihood of machine dependency for the rest of his life with no hope of any improvement. At this point the family elected to withdraw all supportive medical treatment and initiate comfort care. [redacted] stayed with his mother and passed away on the morning of 6/2/22 at 6:37.

Records have been uploaded into 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:	2022-11-10 10:00:00.0	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	11/10/2022
Completed date:	11/10/2022	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: 11/10/2022 09:50 AM Entered By: [redacted]

Prenatal records have been received from [redacted] on the mother [redacted] FSS [redacted] has reviewed these records.

Summary:
Problems include history of opiate use, THC use, Hep C, depression and anxiety, history of abnormal paps, history of sexual abuse, HSV2, short interval pregnancy 2/17/20 and is currently on vivitrol. Ms. [redacted] no showed 4/5/22, 1/25/22. Ms. [redacted] was positive on 3/8/22 and 3/22/22 for THC, Naltrexone, Sertraline, Desmethyistraline, Trazodone and Hydroxyzine. Ms. [redacted] was positive on 2/8/22 for THC, Naltrexone, Sertraline, Desmethyistraline.

Prenatal records have been uploaded into 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:	2022-10-31 10:00:00.0	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	11/04/2022
Completed date:	11/04/2022	Completed By:	[redacted]
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 11/04/2022 10:33 AM Entered By: [redacted]

CM to update notations, including summary of autopsy findings. CM to complete closing summary and send to CM for 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:	2022-10-06 17:00:00.0	Contact Method:	Phone Call
Contact Time:	05:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	06/09/2023
Completed date:	06/09/2023	Completed By:	[redacted]

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

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

Contact Sub Type:

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 06/09/2023 12:48 PM Entered By: [redacted]

Date: 10/06/2022
Time: 5:00pm
Location: [redacted], TN [redacted]
Purpose: Monthly ACV

CPSI [redacted] made a home visit at [redacted], TN [redacted] to follow-up with the investigation. There was no answer at the door. CPSI [redacted] contacted Ms. [redacted] who informed CPSI [redacted] that they were out of town visiting with some family and letting them meet the new baby.

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:	2022-10-06 17:00:00.0	Contact Method:	Attempted Face To Face
Contact Time:	05:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	06/09/2023
Completed date:	06/09/2023	Completed By:	[redacted]

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

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

Contact Sub Type:

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 06/09/2023 12:47 PM Entered By: [redacted]

Date: 10/06/2022
Time: 5:00pm
Location: [redacted], TN [redacted]
Purpose: Monthly ACV

CPSI [redacted] made a home visit at [redacted], TN [redacted] to follow-up with the investigation. There was no answer at the door. CPSI [redacted] contacted Ms. [redacted] who informed CPSI [redacted] that they were out of town visiting with some family and letting them meet the new baby.

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 11:00:00.0	Contact Method:	
Contact Time:	11:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	09/28/2022
Completed date:	09/28/2022	Completed By:	[redacted]
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 09/28/2022 10:49 AM Entered By: [redacted]

Presented case to CPIT on this date. CPIT team in agreement with the following classifications:

ASPS for Drug Exposed Child and Lack of Supervision for [redacted]
ASPS for Drug Exposed Infant and AUPU for Abuse Death for [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:	2022-09-28 10:00:00.0	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	09/28/2022
Completed date:	09/28/2022	Completed By:	[redacted]
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 09/28/2022 10:47 AM Entered By: [redacted]

Presented case to CPIT on this date. CPIT team in agreement with the following classifications:

ASPS for DEI and LOS for 18 month old
ASPS for DEI and AUPU for Abuse death for infant

Narrative Type: Created In Error Entry Date/Time: 09/28/2022 10:48 AM Entered By: [redacted]

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:	2022-09-06 12:00:00.0	Contact Method:	Face To Face
Contact Time:	12:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	06/09/2023
Completed date:	06/09/2023	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	ACV Interview/Observation,Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 06/09/2023 12:28 PM Entered By: [redacted]

Date: 09/06/2022
Time: 12:00pm
Location: [redacted], TN [redacted]
Purpose: Monthly ACV

CPSI [redacted] made a home visit at [redacted], TN [redacted] to follow-up with the investigation. CPSI [redacted] gained consent to enter the home by [redacted]
The following were present in the room: CPSI [redacted] and [redacted]
CPSI [redacted] went to the family home on 09/06/2022. CPSI [redacted] visited the home. CPSI [redacted] observed the trailer. The home was appropriate with no apparent hazards. The home appeared clean and slightly cluttered (no dirty dishes, floors appeared vacuumed, swept and mopped, there was no excessive dust, no visible pests, no excessive trash, no dirty clothes on the floor etc). There was food present in the home.
CPSI [redacted] observed [redacted] who is pre-verbal due to being a toddler. An interview was not completed.
CPSI [redacted] observed [redacted] unclothed and did not see any marks or bruises based on this observation. [redacted] is seen at [redacted] Pediatrics and is up to date on his vaccinations. His next follow-up appointment will be when he is 24 months old in December.

Ms. [redacted] had questions about the Preliminary Hearing that was held on August 31, 2022. Ms. [redacted] was informed that it was just the Preliminary Hearing where the mother waived and reserved her rights for the Department to put on evidence of the allegations against her. The next court hearing will be the final and severe abuse hearing where the department will put on evidence of the allegations against the mother. The Final and Severe Abuse Hearing has been set for November 10, 2023 at 9:00am in front of Magistrate [redacted]

Tennessee Department of Children's Services

Case Recording Summary

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

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:	2022-08-29 10:00:00.0	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	09/01/2022
Completed date:	09/01/2022	Completed By:	[redacted]
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 09/01/2022 05:13 PM Entered By: [redacted]

CM reports that the detective has reported that the autopsy has been completed. CM is awaiting a copy from law enforcement prior to presenting at CPIT.

Next steps: Review autopsy results once completed and present case to CPIT.

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:	2022-08-26 10:00:00.0	Contact Method:	Face To Face
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	06/09/2023
Completed date:	06/09/2023	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	ACV Interview/Observation,Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 06/09/2023 11:31 AM Entered By: [redacted]

Date: 08/26/2022
Time: 10:00 pm
Location: [redacted], TN [redacted]
Purpose: ACV Observation/Interview

CPSI [redacted] made a home visit at [redacted], TN [redacted] to follow-up with the investigation. CPSI [redacted] gained consent to enter the home by [redacted]

The following were present in the room: CPSI [redacted] and [redacted]

CPSI [redacted] went to the family home on 08/26/2022. CPSI [redacted] visited the home. CPSI [redacted] observed the trailer. The home was appropriate with no apparent hazards. The home appeared clean and slightly cluttered (no dirty dishes, floors appeared vacuumed, swept and mopped, there was no excessive dust, no visible pests, no excessive trash, no dirty clothes on the floor etc). There was food present in the home.

CPSI [redacted] observed [redacted] who is pre-verbal due to being a toddler. An interview was not completed. CPSI [redacted] observed [redacted] unclothed and did not see any marks or bruises based on this observation. [redacted] is seen at [redacted] Pediatrics and is up to date on his vaccinations. His next follow-up appointment will be when he is 24 months old in December. He will be seen as needed if he is sick.

CPSI [redacted] informed Mr. and Mrs. [redacted] that [redacted] had been appointed a GAL and the Preliminary Hearing will be held on 08/31/2022 at 9:00am at the [redacted] County Juvenile Court. [redacted] GAL is [redacted]. Ms. [redacted] was his previous GAL.

Tennessee Department of Children's Services

Case Recording Summary

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

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:	2022-07-27 12:00:00.0	Contact Method:	
Contact Time:	12:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	07/29/2022
Completed date:	07/29/2022	Completed By:	[redacted]
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 07/29/2022 08:00 PM Entered By: [redacted]

TL attempted to present case to CPIT on the 18mo but was told that the detective was not present and that it would be best to wait and present the entire case when autopsy returns on the infant.

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:	2022-07-25 18:00:00.0	Contact Method:	Face To Face
Contact Time:	06:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	09/15/2022
Completed date:	09/16/2022	Completed By:	TFACTS, Person Merge

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

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

Contact Sub Type:

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/15/2022 05:05 AM Entered By: [redacted]

Date: 07/25/2022
Time: 6:00 pm
Location: [redacted], TN [redacted]
Purpose: ACV Observation/Interview

CPSI [redacted] made a home visit at [redacted], TN [redacted] to follow-up with the family. CPSI [redacted] gained consent to enter the home by [redacted]

The following were present in the room: CPSI [redacted] and [redacted]

CPSI [redacted] went to the family home on 07/25/2022. CPSI [redacted] visited the home. CPSI [redacted] observed the trailer. The home was appropriate with no apparent hazards. The home appeared clean and slightly cluttered (no dirty dishes, floors appeared vacuumed, swept and mopped, there was no excessive dust, no visible pests, no excessive trash, no dirty clothes on the floor etc). There was food present in the home. The family is working on remodeling their home.

CPSI [redacted] observed [redacted] who is pre-verbal due to being a toddler. An interview was not completed. CPSI [redacted] observed [redacted] unclothed and did not see any marks or bruises based on this observation.

[redacted] was seen earlier today at his pediatricians office for a routine visit. [redacted] weighed 27.5 pounds and was 2 feet 9 inches tall. He was in the 64% for his weight and 45% for his height. During this visit there were no abnormal findings or concerns. [redacted] is meeting all of his age-appropriate milestones. He received his routine immunizations at this visit.

Tennessee Department of Children's Services

Case Recording Summary

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

Mr. and Mrs. [redacted] are interested in adopting [redacted] since he has been in their home since he came home from the hospital.

Mr. and Mrs. [redacted] was in agreeance for [redacted] to have reunification with his mother, Ms. [redacted] prior to her recent relapse and overdose because she had completed all the necessary steps in regaining custody of [redacted] and was allowed to have unsupervised visitations, including overnight visits. Prior to Ms. [redacted] recent relapse she only needed to go to the court to file to regain custody.

Mr. and Mrs. [redacted] have concerns that when [redacted] mother, Ms. [redacted] is released from prison she will be able to complete the necessary steps that she needs to complete and he will be able to go back home to her. At this time, it is unclear how long Ms. [redacted] will be incarcerated but it could potentially be several years. Mr. and Mrs. [redacted] have concerns that it would not be in the best interest of [redacted] to return home to him mother if she is going to be incarcerated for several years due to [redacted] viewing Mr. and Mrs. [redacted] as his parents and their children as his siblings.

Narrative Type: Created In Error Entry Date/Time: 09/29/2023 04:38 PM Entered By: [redacted]

System Completed

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:	2022-07-25 18:00:00.0	Contact Method:	Face To Face
Contact Time:	06:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	09/29/2023
Completed date:	09/29/2023	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	ACV Interview/Observation,Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/29/2023 04:39 PM Entered By: [redacted]

Date: 07/25/2022
Time: 6:00 pm
Location: [redacted], TN [redacted]
Purpose: ACV Observation/Interview

CPSI [redacted] made a home visit at [redacted], TN [redacted] to follow-up with the family. CPSI [redacted] gained consent to enter the home by [redacted]

The following were present in the room: CPSI [redacted] and [redacted]

CPSI [redacted] went to the family home on 07/25/2022. CPSI [redacted] visited the home. CPSI [redacted] observed the trailer. The home was appropriate with no apparent hazards. The home appeared clean and slightly cluttered (no dirty dishes, floors appeared vacuumed, swept and mopped, there was no excessive dust, no visible pests, no excessive trash, no dirty clothes on the floor etc). There was food present in the home. The family is working on remodeling their home.

CPSI [redacted] observed [redacted] who is pre-verbal due to being a toddler. An interview was not completed. CPSI [redacted] observed [redacted] unclothed and did not see any marks or bruises based on this observation.

[redacted] was seen earlier today at his pediatricians office for a routine visit. [redacted] weighed 27.5 pounds and was 2 feet 9 inches tall. He was in the 64% for his weight and 45% for his height. During this visit there were no abnormal findings or concerns. [redacted] is meeting all of his age-appropriate milestones. He received his routine immunizations at this visit.

Tennessee Department of Children's Services

Case Recording Summary

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

Mr. and Mrs. [redacted] are interested in adopting [redacted] since he has been in their home since he came home from the hospital.

Mr. and Mrs. [redacted] was in agreeance for [redacted] to have reunification with his mother, Ms. [redacted] prior to her recent relapse and overdose because she had completed all the necessary steps in regaining custody of [redacted] and was allowed to have unsupervised visitations, including overnight visits. Prior to Ms. [redacted] recent relapse she only needed to go to the court to file to regain custody.

Mr. and Mrs. [redacted] have concerns that when [redacted] mother, Ms. [redacted] is released from prison she will be able to complete the necessary steps that she needs to complete and he will be able to go back home to her. At this time, it is unclear how long Ms. [redacted] will be incarcerated but it could potentially be several years. Mr. and Mrs. [redacted] have concerns that it would not be in the best interest of [redacted] to return home to him mother if she is going to be incarcerated for several years due to [redacted] viewing Mr. and Mrs. [redacted] as his parents and their children as his siblings.

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:	2022-06-29 17:00:00.0	Contact Method:	Face To Face
Contact Time:	05:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	09/15/2022
Completed date:	09/16/2022	Completed By:	TFACTS, Person Merge

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

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

Contact Sub Type:

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/15/2022 05:07 AM Entered By: [redacted]

Date: 06/29/2022
Time: 5:00 pm
Location: [redacted], TN [redacted]
Purpose: ACV Observation/Interview

CPSI [redacted] made a home visit at [redacted], TN [redacted] to follow-up with the family. CPSI [redacted] gained consent to enter the home by [redacted]

The following were present in the room: CPSI [redacted] and [redacted]

CPSI [redacted] went to the family home on 06/29/2022. CPSI [redacted] visited the home. CPSI [redacted] observed the trailer. The home was appropriate with no apparent hazards. The home appeared clean and slightly cluttered (no dirty dishes, floors appeared vacuumed, swept and mopped, there was no excessive dust, no visible pests, no excessive trash, no dirty clothes on the floor etc). There was food present in the home.

CPSI [redacted] observed [redacted] who is pre-verbal due to being a toddler. An interview was not completed. CPSI [redacted] observed [redacted] unclothed and did not see any marks or bruises based on this observation. Mrs. [redacted] reported that [redacted] is doing well. He is adjusting well to the Mrs. [redacted] and Mr. [redacted] new child in the home that was born earlier in the month. Mrs. [redacted] reported [redacted] next doctors appointment is scheduled for July 25, 2022.

Narrative Type: Created In Error Entry Date/Time: 09/29/2023 04:37 PM Entered By: [redacted]

System Completed

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:	2022-06-29 17:00:00.0	Contact Method:	Face To Face
Contact Time:	05:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	09/29/2023
Completed date:	09/29/2023	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	ACV Interview/Observation,Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/29/2023 04:37 PM Entered By: [redacted]

Date: 06/29/2022
Time: 5:00 pm
Location: [redacted], TN [redacted]
Purpose: ACV Observation/Interview

CPSI [redacted] made a home visit at [redacted], TN [redacted] to follow-up with the family. CPSI [redacted] gained consent to enter the home by [redacted]

The following were present in the room: CPSI [redacted] and [redacted]

CPSI [redacted] went to the family home on 06/29/2022. CPSI [redacted] visited the home. CPSI [redacted] observed the trailer. The home was appropriate with no apparent hazards. The home appeared clean and slightly cluttered (no dirty dishes, floors appeared vacuumed, swept and mopped, there was no excessive dust, no visible pests, no excessive trash, no dirty clothes on the floor etc). There was food present in the home.

CPSI [redacted] observed [redacted] who is pre-verbal due to being a toddler. An interview was not completed. CPSI [redacted] observed [redacted] unclothed and did not see any marks or bruises based on this observation. Mrs. [redacted] reported that [redacted] is doing well. He is adjusting well to the Mrs. [redacted] and Mr. [redacted] new child in the home that was born earlier in the month. Mrs. [redacted] reported [redacted] next doctors appointment is scheduled for July 25, 2022.

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:	2022-06-06 11:00:00.0	Contact Method:	
Contact Time:	11:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	06/06/2022
Completed date:	06/06/2022	Completed By:	[redacted]
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 06/06/2022 10:59 AM Entered By: [redacted]

The following referral was screened out into the current open case on this date:

NARRATIVE:
NON-CUSTODIAL CHILD DEATH

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

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

Pending: No
Awaiting Screening: No
Submitted: No

Open CPS: INV [redacted] / DEC, LOS / 2022-05-20 / no classification / CM [redacted] Supervisor [redacted]
Substantiated: INV [redacted] / DEC / AP: [redacted] / ASPS / 2021-04-21
Death: Screened Out Intake [redacted] (6-2-22/Abuse Death)
Screen Outs: [redacted] (6-2-22/Abuse Death)

History (not listed above): No

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

Tennessee Department of Children's Services

Case Recording Summary

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

Reporters name/relationship: REDACTED
Referent:
Interpreter needed: unknown
Type of Interpreter:

Victim:
Interpreter needed: unknown
Type of Interpreter:
First Name: [redacted]
Middle Name: [redacted]
Last Name: [redacted]
Deceased: Yes
Date of Death: 06/02/2022
Describe the Victim:
Native American Descent: Unknown
Contact:
Contact Address [redacted], [redacted] TN, [redacted]
Directions:
School Name:
School Grade:
School Address:
School Contact:
Day Care Name:
Day Care Address:
Day Care Contact:

Perpetrator:
Interpreter needed: unknown
Type of Interpreter:
Anonymous Name: Unknown Perpetrator 0
Deceased: unknown
Date of Death: none
Describe the Perpetrator:
Native American Descent: unknown
Does the alleged perpetrator currently have access to the victims(s)?: unknown
Does the alleged perpetrator have a criminal record?: unknown
Does the alleged perpetrator have prior involvement with DCS?: unknown
Contact:
Contact Address:
Directions:
Employer Name:
Employer Address:
Employer Contact:

Other Person:
Interpreter needed: unknown
Type of Interpreter:

Tennessee Department of Children's Services

Case Recording Summary

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

First Name: Det. [redacted]
Last Name: [redacted]
Deceased: unknown
Date of Death: none
Describe the Other:
Native American Descent: unknown
Contact: [redacted]
Contact Address [redacted], [redacted] TN, [redacted]
Directions:
Employer Name: [redacted] County Sheriff's Office
Employer Address: [redacted], [redacted] TN, [redacted]
Employer Contact: [redacted]

Incident County: [redacted]
Describe in detail what has happened to the child. What is the abuse or neglect?:
12day/W/M- [redacted]MC/[redacted]CSO- HA- Neonatal Drug Related Death
-MOB found unresponsive by mother in residence after using heroin, Narcan administered by family and EMS
-Admitted: 05/21/22 at 1741 w/ respiratory distress after being born via emergent caesarean secondary to non-reassuring fetal heart rate tracings (UDS POS opiates and barbituates, cord blood positive for THC,)
-Dx: Hypoxic ischemic encephalopathy, fetal exposure to heroin
-Pronounced: 06/02/22 at 0637 by Dr. [redacted]

When did the abuse or neglect occur?:
6/2/2022

Does the child have any injuries from the abuse or neglect? If yes, please describe the injuries to the child.:
N/A

Does the child need medical care? Has the child received medical care? If so, where?:
N/A

Describe in detail how the child has been affected or harmed by the abuse or neglect.:
N/A

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.:
N/A

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

What do the child¿s parents/caregivers say about the abuse/neglect?:
N/A

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

Tennessee Department of Children's Services

Case Recording Summary

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

N/A

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?:
N/A

Does the child have any special needs or disabilities? Please describe.:
N/A

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

CM Notation: None
Screener Notation: None

Emailed/Paged CPSI On Call:

Notified Child Death/Preliminary Near-Death Notification Group via Email: No

Per SDM: Screen Out. Has been referred for follow up to the DCS Case Manager who has an open case on the child and/or family (INV [redacted] Approval for Screen Out to open case provided by CAH Director, [redacted], TL on 6-6-22 @ 8:28 am

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:	2022-06-02 07:15:00.0	Contact Method:	
Contact Time:	07:15 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	06/02/2022
Completed date:	06/02/2022	Completed By:	[redacted]
Purpose(s):	Well Being		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 06/02/2022 07:36 AM Entered By: [redacted]

CM [redacted] contacted TL [redacted] at 7:03am on 6/2 to report that [redacted] had just passed. She reported that both parents were present at the hospital when this occurred. She reports that Ms. [redacted] had left the hospital the day prior after determining that baby would not remain on supportive care and made funeral arrangements. She reported that she arranged for the baby to be cremated. The father is not in agreement and this is causing tension within the family.

Next steps: CM to inform law enforcement of the update and continue to partner with them during the investigation. CFTM is scheduled for 6/3 at 4:30pm to discuss placement of mother's 18 month old child and discuss her progress on the permanency plan. Ms. [redacted] will be provided resources for grief counseling as well.

Narrative Type: Addendum 1 Entry Date/Time: 06/06/2022 11:14 AM Entered By: [redacted]

NON-CUSTODIAL CHILD DEATH

Family Case IDs: [redacted]
Associated Case IDs: None

Family Case ID Detailed History:
Open Court Custody/FSS/FCIP SS Custody [redacted]/[redacted], [redacted]/8-25-21/[redacted]

Closed Court Custody SS [redacted]/2-4-13 to 12-21-14; JJ [redacted]/10-24-96 to 12-12-96; SS [redacted]/2-4-13 to 10-31-13, 4-4-13 to 12-21-13, 4-4-13 to 10-4-13, 2-4-13 to 12-21-14, SS [redacted]/9-26-11 to 9-10-12, 2-4-13 to 10-31-13, 2-4-13 to 12-21-14

Pending: None
Awaiting Screening: None
Submitted: None

Open CPS: INV [redacted]/DEC, ACV [redacted] AP [redacted]/5-10-22/No Classification/[redacted]

Tennessee Department of Children's Services

Case Recording Summary

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

Case Status: Close Organization: [redacted] Region

[redacted]
Substantiated: [redacted]/DEC/[redacted]/ASPS/10-12-21; [redacted]/EDN, PHA, DEC/[redacted]/ASPS/5-24-13

Death: None
Screen Outs: [redacted]

History (not listed above):
INV [redacted]/DEC/AUPU/4-30-21
ASMT [redacted]/EDN, ABN/SR/6-27-19
ASMT [redacted]/PYA-SR, ENN-NSN/11-21-18
ASMT [redacted]/DEC/SR/5-24-13
ASMT [redacted]/LOS-NSN, LOS, MDM SR&R/11-06-08
INV [redacted]/LOS, ENN/AUPU/3-15-07
INV [redacted]/ENN, SRPI/AUPU/4-4-06
INV [redacted]/ENN/AUPU/4-4-06
INV [redacted]/EDN, ENN/AUPU/3-31-05
INV [redacted]/SEE/AUPU/9-20-02
INV [redacted]/Medical Neglect/AUPU/3-14-01
INV [redacted]/PHA/AUPU/3-31-05
ASMT [redacted]/ABN/SR/10-6-11
ASMT [redacted]/DEC, LOS, DEI/NSN/7-22-11
INV [redacted]/DEI, DEC/AUPU/5-23-11
ASMT [redacted]/DEC, DEI/NSN/12-21-10
ASMT [redacted]/PYA/NSN/12-21-10
ASMT [redacted]/LOS/SR&A and NSN/5-23-11
ASMT [redacted]/DEC, MDM/Unable to Complete/10-8-08
ASMT [redacted]/LOS, ENN/NSN/6-3-08
ASMT [redacted]/ENN/NSN/1-10-08
ASMT [redacted]/DEC, SRPI/NSN/1-10-08
ASMT [redacted]/SRPI/Services Recommended & Refused/6-29-07
INV [redacted]/SRPI/AUPU/3-13-06
INV [redacted]/MDM/AUPU/6-9-05
INV [redacted]/DEC, SRPI, PHA/AUPU/6-9-05
INV [redacted]/ENN/AUPU/6-9-05
INV [redacted]/SRPI/AUPU/11-21-04
INV [redacted]/ENN, NUN/AUPU/9-11-03
ASMT [redacted]/EDN, NUN/NSN/1-28-12
ASMT [redacted]/ENN/SR&A/3-16-11

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

Reporter's Name/Relationship: [redacted]

-Child/Family Identification and Relationship Introduction Paragraph:
[redacted] (21 days) was expected to reside with her birth mother, [redacted] (22) and birth father, [redacted] (25), in [redacted] County.

-Are you requesting immediate assistance from DCS to your location, or only an immediate phone call?
No

-Please provide a brief summary of the concerns and why DCS is needed to respond immediately.
The current DCS case worker, [redacted] ([redacted] has already been notified this morning 5-31-22 of [redacted] being deceased. The cause of death for [redacted] is unknown, but [redacted] passed away on 5-30-22 around 7pm. [redacted] was a drug

Tennessee Department of Children's Services

Case Recording Summary

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

Case Status: Close Organization: [redacted] Region

exposed child, born premature at 23 weeks and was admitted to [redacted] Children's Hospital on the day she was born. [redacted] was believed to have been born at [redacted] Hospital. [redacted] was discharged from [redacted] Hospital, but the date is unknown. [redacted] did have access to [redacted] and was bonding with her prior to the death. [redacted] used THC during pregnancy and there was a positive cord for THC. [redacted] has had past drug history, but it is unknown what drug was used. It is not believed that [redacted] death was caused by abuse or neglect, but it is unknown for sure at this time.

-Are there any concerns for the safety of a Department of Children's Services Case Manager responding to the child's home?
No

-Anything additional to add to this initial report for the responding worker to know prior to response?
No

CM Notation: None

Screener Notation: None

Emailed/Paged CPSI On Call:

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

Per SDM:

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:	2022-06-01 14:00:00.0	Contact Method:	
Contact Time:	02:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	06/02/2022
Completed date:	06/02/2022	Completed By:	[redacted]
Purpose(s):	Service Planning,Well Being		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 06/02/2022 07:47 AM Entered By: [redacted]

TL [redacted] CM [redacted] and TC [redacted] DCS Nurses [redacted] and [redacted] participated in meeting with [redacted] MC medical, social work staff and the family to review the baby's treatment plan and next steps. The mother and father as well as family supports were present.

It was discussed during the meeting that the infant's liver, brain and kidney functioning were impacted by the current diagnoses. He is not able to feed on his own as he has no suck or gag reflexes. It is anticipated that he would have to be fitted for a feeding tube in the near future if care were to be maintained. It was reported by the doctor that [redacted] is reliant on external supports to breath and that there is little to no chance of survival without assistance. [redacted] is experiencing seizures for which he is receiving mediation.

Family and medical staff discussed Ms. [redacted] decision to implement a DNR the day prior. It was ultimately determined during this meeting that supportive care would be stopped, with a plan to remove the baby's oxygen first as well as withhold feedings and provide only comfort care starting this afternoon.

Next steps: CM [redacted] to continue regular contact with the family to provide support and [redacted] MC SW [redacted] for any medical updates. CM will provide any updates to baby's status 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:	2022-05-31 10:00:00.0	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	05/31/2022
Completed date:	05/31/2022	Completed By:	[redacted]
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 05/31/2022 09:55 AM Entered By: [redacted]

Debriefing call took place from 10am-10:50am. Discussed specifics of the case, questions and next steps. It is reported that the baby is alive and remains at [redacted] but prognosis continues to be poor. CM [redacted] reports that law enforcement intends to present case to grand jury regarding potential harm to 18 month old as he was present during mother's overdose. Should the baby die, LE intends to bring further charges. Ms. [redacted] probation officer intends to violate her as well as she was on probation for methamphetamine related charges.

Next steps:
Schedule a CFTM by end of week
Engage custodian of Ms. [redacted] 18 month old to ensure that safety is prioritized and that they are able to commit to long term care for the child.
Engage DCS nursing team and [redacted] staff in professionals meeting prior to CFTM
Pursue counseling services for Ms. [redacted] and her family
Make efforts to locate and engage the father of the 18 month old

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:	2022-05-31 10:00:00.0	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	05/31/2022
Completed date:	05/31/2022	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: 05/31/2022 10:42 AM Entered By: [redacted]

Administrative Staffing/Debriefing
Date: 5/31/2022
Investigation #: [redacted]

Child Protective Services Deputy Regional Director [redacted] Program Coordinator (PC) [redacted] Team Leaders (TLs) [redacted] and [redacted], and Child Protective Services Case Managers (CMs) [redacted] and [redacted] conducted a debriefing of the Preliminary Near-Death referral regarding Alleged Child Victim (ACV) [redacted] on this date.

CM [redacted] provided a summary of the investigation to this point. The Department became involved for allegations of Drug-Exposed Child regarding [redacted] on 5/23/2022. [redacted] (mother) reportedly overdosed on Heroin at her home on 5/20/22 and was found unresponsive by her mother. Ms. [redacted] was approximately 8 months pregnant at the time of the overdose. She was believed to be unresponsive for approximately thirty minutes to an hour after she injected Heroin and was found to be foaming at the mouth and grey according to the maternal grandmother. Ms. [redacted] was transported to [redacted] Medical Center, and [redacted] was delivered via C-section on 5/21/22. [redacted] was unresponsive at birth and was placed on a ventilator and cooling mat.

Ms. [redacted] initially reported that she had been clean for 18 months and this was her first return to use following her sobriety. She had been prescribed a Vivitrol shot through [redacted] but was recently switched to Naltrexone due to her upcoming delivery, which caused her relapse. However, after further investigation, Ms. [redacted] later admitted to using Heroin for the past month and to bringing her 18-month-old son, [redacted] with her to purchase the Heroin. On 5/20/22, Ms. [redacted] stated that she was along with [redacted] at her home. She placed [redacted] down for a nap in his Pack n Play and injected Heroin in the same room where [redacted] slept.

[redacted] was removed from Ms. [redacted] care at birth due to allegations of Drug-Exposed Child and he was placed in the custody of his maternal uncle. Ms. [redacted] began treatment following [redacted] birth, reportedly

Tennessee Department of Children's Services

Case Recording Summary

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

maintained her sobriety, and was granted unsupervised visitation in September 2021. The court order did not specify that Ms. [redacted] could not have overnight visitation, and it is believed that [redacted] was residing primarily in the home with Ms. [redacted] her adult brother, and [redacted] maternal grandmother.

[redacted] biological father is visiting [redacted] at the hospital, and often spends the night at the hospital. [redacted] biological fathers whereabouts are unknown at this time, and he has not visited [redacted] since December 2021. CPIT has been convened and Law Enforcement is involved. An Immediate Protection Agreement (IPA) was completed with the family for Ms. [redacted] to have no contact with [redacted] at this time.

[redacted] remains at [redacted] Medical Center and his prognosis is poor. He is currently prescribed Phenobarbital, is having seizures, and tests are being run to determine his brain function.

Next steps discussed by the team included:
Continue efforts to locate [redacted] biological father
Schedule a CFTM to address the placement of [redacted] and to assess for additional service needs (including grief counseling)
Continue to obtain and review medical records
Staff case with safety nurse
Follow up on hair follicle request for [redacted]
Maintain contact with [redacted] Medical Center

Information regarding EAP and support by supervision was provided.

This case will be staffed as needed and throughout the 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:	2022-05-30 17:00:00.0	Contact Method:	Phone Call
Contact Time:	05:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	06/06/2022
Completed date:	06/08/2022	Completed By:	[redacted]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 06/06/2022 10:52 AM Entered By: [redacted]

Date: 05/30/2022
Time: 5:00 pm
Location: Phone Call
Purpose: Initial Parent Interview
CPSI [redacted] spoke with [redacted] alleged father. Mr. [redacted] stated that he knew why DCS was involved with his child which was due to Ms. [redacted] overdose on 05/20/2022. Mr. [redacted] reported that he knew [redacted] was not doing well because he lost oxygen while he was in utero. Mr. [redacted] reported that he was aware of Ms. [redacted] past history of substance use, but was unaware Ms. [redacted] was using again. Mr. [redacted] reported that Ms. [redacted] had been acting strange for the past month but he thought it was just pregnancy hormones. Mr. [redacted] reported that he works a lot due lack of employees and has not been able to spend a great deal of time with Ms. [redacted] Mr. [redacted] stated he and Ms. [redacted] have been arguing a lot over stupid things. Mr. [redacted] admitted that he does use marijuana for his anxiety but since [redacted] was born he has stopped using. Mr. [redacted] has been visiting the hospital as much as possible and will continue to do so. He has also been staying over at the hospital to spend time with [redacted] Mr. [redacted] wants to be on the birth certificate but the mother does not want him to be. Mr. [redacted] stated that he loves his son and just wants what is best for him. He does not want his son to pass away but he does not want him to suffer.

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:	2022-05-26 10:00:00.0	Contact Method:	Face To Face
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	06/01/2022
Completed date:	06/26/2022	Completed By:	TFACTS, Person Merge

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)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 06/01/2022 08:42 PM Entered By: [redacted]

Date: 05/26/2022
Time: 10:00 am
Location: [redacted], [redacted] TN [redacted]
Purpose: AP/Parent Interview

CPSI [redacted] made a home visit at [redacted], [redacted] TN [redacted] to follow-up on the investigation. CPSI [redacted] gained consent to enter the home by [redacted]

The following were present in the room: CPSI [redacted] Detective [redacted] and Detective [redacted] with Family Crimes Unit, [redacted] and [redacted] with Major Crimes Unit, and Officer [redacted] Probation and Parole.

CPSI [redacted] went to the family home on 05/26/2022. CPSI [redacted] visited the home. CPSI [redacted] observed the home. The home was appropriate with no apparent hazards. The home appeared clean and slightly cluttered (no dirty dishes, floors appeared vacuumed, swept and mopped, there was no excessive dust, no visible pests, no excessive trash, no dirty clothes on the floor etc). There was food present in the home. The room that Ms. [redacted] stays in which is also the room that [redacted] was staying in was extremely cluttered and unkept. There were clothes piled up inside of the pack and play as well as on the bed and in the floor. There were two needles located inside of the trash can and medicine bottles on the counter tops. On the bed was a lock box with medication located inside, however the lock box was unlocked. The bed where Ms. [redacted] sleeps has a side rail up that is typically used for a toddler, so they do not roll off the side of the bed.

Upon arrival Detective [redacted] conducted his interview with Ms. [redacted] Ms. [redacted] reported the same information that was reported to CPSI [redacted] CPSI [redacted] and CPSI [redacted] in the initial interview at [redacted] MC. During the interview, Ms. [redacted] reported that she picked [redacted] up at the custodians Mrs. [redacted] and Mr. [redacted] home on Friday morning and brought him back to her home. At this time, CPSI [redacted] spoke out to Ms. [redacted]

Tennessee Department of Children's Services

Case Recording Summary

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

Case Status: Close Organization: [redacted] Region

informing her that new information had evolved with the case and that information was that [redacted] had actually been staying the night at her home with her multiple times a week. CPSI [redacted] informed Ms. [redacted] that information was given that [redacted] had stayed overnight on Thursday night, 05/25/2022. At that time Ms. [redacted] admitted that [redacted] had stayed overnight on Thursday night. Ms. [redacted] reported that she purchased 2 points of Heroin on Thursday 05/25/2022 and the individual she purchased from dropped it off to her at her home located at [redacted], [redacted] TN [redacted] around 2:00pm. Ms. [redacted] admitted that she used the Heroin via a needle. She stated that she mixed the heroin with water and used a spoon to draw the heroin up and she then inserted into her hand. Ms. [redacted] admitted she remembered seeing blood pull back into the needle and that is the last thing that she remembers before she became responsive again. Ms. [redacted] reported that when she became responsive, she felt as if she was on a train in a tunnel and remembers being surrounded by a lot of people. Ms. [redacted] reported that she turned her head towards the pack and play where [redacted] was laying and at that time she realized [redacted] was no longer in the pack and play. Upon completion of the interview, Officer [redacted] requested Ms. [redacted] phone. Officer [redacted] requested Ms. [redacted] give her the passcode to get into the phone. Ms. [redacted] requested the phone back to enter the passcode and Officer [redacted] request once again Ms. [redacted] give her the passcode. Ms. [redacted] gave the passcode for the phone and ask if they would be taking her phone. At this time Detective [redacted] presented Ms. [redacted] with a search warrant to retrieve the phone for further evidence. Office [redacted] stated that her phone would be taken for further evidence. Ms. [redacted] then asked if she could have another opportunity to tell the whole truth. Ms. [redacted] then admitted who she is receiving her illegal substances from. Ms. [redacted] also admitted that she had been using heroin on and off for the past month since she came off the vivitrol shot. Ms. [redacted] was asked how frequently she was using, and she reported half of the time. Ms. [redacted] then admitted she had used approximately 18 out 30 days within the last month.

Ms. [redacted] reported that she had taken [redacted] with her to a home where she uses with another gentleman who sometimes has his child. Ms. [redacted] reported that this individual lives at home with his father who is a registered sex offender and is not supposed to be around other children. CPSI [redacted] received this information and a new referral will be made regarding these individuals.

Narrative Type: Created In Error Entry Date/Time: 09/29/2023 04:35 PM Entered By: [redacted]

System Completed

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:	2022-05-26 10:00:00.0	Contact Method:	Face To Face
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	09/29/2023
Completed date:	09/29/2023	Completed By:	[redacted]

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

Contact Type(s): Alleged Perpetrator Interview

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/29/2023 04:36 PM Entered By: [redacted]

Date: 05/26/2022
Time: 10:00 am
Location: [redacted], [redacted] TN [redacted]
Purpose: AP/Parent Interview

CPSI [redacted] made a home visit at [redacted] TN [redacted] to follow-up on the investigation. CPSI [redacted] gained consent to enter the home by [redacted]

The following were present in the room: CPSI [redacted] Detective [redacted] and Detective [redacted] with Family Crimes Unit, [redacted] and [redacted] with Major Crimes Unit, and Officer [redacted] Probation and Parole.

CPSI [redacted] went to the family home on 05/26/2022. CPSI [redacted] visited the home. CPSI [redacted] observed the home. The home was appropriate with no apparent hazards. The home appeared clean and slightly cluttered (no dirty dishes, floors appeared vacuumed, swept and mopped, there was no excessive dust, no visible pests, no excessive trash, no dirty clothes on the floor etc). There was food present in the home. The room that Ms. [redacted] stays in which is also the room that [redacted] was staying in was extremely cluttered and unkept. There were clothes piled up inside of the pack and play as well as on the bed and in the floor. There were two needles located inside of the trash can and medicine bottles on the counter tops. On the bed was a lock box with medication located inside, however the lock box was unlocked. The bed where Ms. [redacted] sleeps has a side rail up that is typically used for a toddler, so they do not roll off the side of the bed.

Upon arrival Detective [redacted] conducted his interview with Ms. [redacted] Ms. [redacted] reported the same information that was reported to CPSI [redacted] CPSI [redacted] and CPSI [redacted] in the initial interview at [redacted] MC. During the interview, Ms. [redacted] reported that she picked [redacted] up at the custodians Mrs. [redacted] and Mr. [redacted] home on Friday morning and brought him back to her home. At this time, CPSI [redacted] spoke out to Ms. [redacted]

Tennessee Department of Children's Services

Case Recording Summary

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

informing her that new information had evolved with the case and that information was that [redacted] had actually been staying the night at her home with her multiple times a week. CPSI [redacted] informed Ms. [redacted] that information was given that [redacted] had stayed overnight on Thursday night, 05/25/2022. At that time Ms. [redacted] admitted that [redacted] had stayed overnight on Thursday night. Ms. [redacted] reported that she purchased 2 points of Heroin on Thursday 05/25/2022 and the individual she purchased from dropped it off to her at her home located at [redacted], [redacted] TN [redacted] around 2:00pm. Ms. [redacted] admitted that she used the Heroin via a needle. She stated that she mixed the heroin with water and used a spoon to draw the heroin up and she then inserted into her hand. Ms. [redacted] admitted she remembered seeing blood pull back into the needle and that is the last thing that she remembers before she became responsive again. Ms. [redacted] reported that when she became responsive, she felt as if she was on a train in a tunnel and remembers being surrounded by a lot of people. Ms. [redacted] reported that she turned her head towards the pack and play where [redacted] was laying and at that time she realized [redacted] was no longer in the pack and play. Upon completion of the interview, Officer [redacted] requested Ms. [redacted] phone. Officer [redacted] requested Ms. [redacted] give her the passcode to get into the phone. Ms. [redacted] requested the phone back to enter the passcode and Officer [redacted] request once again Ms. [redacted] give her the passcode. Ms. [redacted] gave the passcode for the phone and ask if they would be taking her phone. At this time Detective [redacted] presented Ms. [redacted] with a search warrant to retrieve the phone for further evidence. Office [redacted] stated that her phone would be taken for further evidence. Ms. [redacted] then asked if she could have another opportunity to tell the whole truth. Ms. [redacted] then admitted who she is receiving her illegal substances from. Ms. [redacted] also admitted that she had been using heroin on and off for the past month since she came off the vivitrol shot. Ms. [redacted] was asked how frequently she was using, and she reported half of the time. Ms. [redacted] then admitted she had used approximately 18 out 30 days within the last month.

Ms. [redacted] reported that she had taken [redacted] with her to a home where she uses with another gentleman who sometimes has his child. Ms. [redacted] reported that this individual lives at home with his father who is a registered sex offender and is not supposed to be around other children. CPSI [redacted] received this information and a new referral will be made regarding these individuals.

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:	2022-05-24 16:30:00.0	Contact Method:	Face To Face
Contact Time:	04:30 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	06/01/2022
Completed date:	06/08/2022	Completed By:	[redacted]

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

Contact Type(s): Other Persons Living in Home Interview/Observation

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 06/01/2022 11:12 AM Entered By: [redacted]

Date: 05/24/2022
Time: 4:30
Location: [redacted], [redacted] TN [redacted]
Purpose: Witness/Other Person Living in the home Interview

CPSI [redacted] went to the family home at [redacted], [redacted] TN [redacted] to follow-up on the investigation and speak to other individuals who were home at the time of the incident on 05/20/2022. CPSI [redacted] was met by [redacted] maternal uncle, who stated that the day of the incident is still a blur. Mr. [redacted] reported that he remembers seeing his sister, Ms. [redacted] and his nephew, [redacted] last between 1:00pm and 2:00pm. Mr. [redacted] reported Ms. [redacted] stated she was taking [redacted] to their room to lay down for a nap. Mr. [redacted] reported he then went to his bedroom and began playing video games. The next he heard from anyone was when his mother was screaming for him to go get the Narcan because his sister had overdosed. Mr. [redacted] reported [redacted] was in his pack and play at the time awake. Mr. [redacted] reported [redacted] is there all the time and even stays the night at the house most night because Ms. [redacted] and Mr. [redacted] have an arrangement worked out. Mr. [redacted] stated Mr. [redacted] came to home soon after Ms. [redacted] called to get [redacted] to take back to his home. Mr. [redacted] reports the room is small and cluttered and when the Fire Department, EMS, and Law Enforcement arrived he left the room because it became crowded. Mr. [redacted] reports that he had no idea that his sister was using again. He stated he does not talk with her a lot because he works night shift and usually sleeps most of the day. He reports that he is doing okay since the incident but has struggled some because it was hard to see his sister laying there lifeless.

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:	2022-05-24 15:00:00.0	Contact Method:	Face To Face
Contact Time:	03:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	05/31/2022
Completed date:	06/08/2022	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	ACV Interview/Observation,Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 05/31/2022 05:40 PM Entered By: [redacted]

Date: 05/24/2022
Time: 3:00 pm
Location: [redacted], TN [redacted]
Purpose: ACV Observation/Interview

CPSI [redacted] made a home visit at [redacted], TN [redacted] to follow-up on the investigation. CPSI [redacted] gained consent to enter the home by [redacted]

The following were present in the room: CPSI [redacted] and [redacted]

CPSI [redacted] went to the family home on 05/24/2022. CPSI [redacted] visited the home. CPSI [redacted] observed the trailer. The home was appropriate with no apparent hazards. The home appeared clean and slightly cluttered (no dirty dishes, floors appeared vacuumed, swept and mopped, there was no excessive dust, no visible pests, no excessive trash, no dirty clothes on the floor etc). There was food present in the home.

CPSI [redacted] observed [redacted] who is pre-verbal due to being a toddler. An interview was not completed. CPSI [redacted] observed [redacted] unclothed, and did not see any marks or bruises based on this observation. [redacted] was running around the house playing and seemed to be enjoying himself. Mrs. [redacted] was in the process of making him a snack.
Mrs. [redacted] reported that [redacted] goes to [redacted] Pediatrics and sees [redacted]. The address is [redacted] TN [redacted] and their phone number is [redacted]. Mrs. [redacted] reported that [redacted] last appointment was on May 2, 2022 and he has an upcoming appointment on July 25, 2022. Mrs. [redacted] reported that [redacted] also had an appointment in May 2022 with his Urologist, Dr. [redacted] for a follow-up on his kidneys. [redacted] will be seen by Dr. [redacted] next year for an additional follow-up and that should be his last

Tennessee Department of Children's Services

Case Recording Summary

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

appointment as along as nothing else shows up.
Mrs. [redacted] reported that she was under the impression that Ms. [redacted] was doing well in her recovery and did not expect this to happen. Mrs. [redacted] reported that Ms. [redacted] picks [redacted] up almost everyday unless she has an appointment. Mrs. [redacted] reported that she picks [redacted] up between 10:00am and 12:00pm each day and has to have him back home between 8:00pm and 8:30pm because that is when they start their bedtime routine. Mrs. [redacted] reported that [redacted] does not stay the night with [redacted]
Mrs. [redacted] reported that she and her husband were eating dinner when the call came in from her mother-in-law that Ms. [redacted] had overdosed. Mrs. [redacted] reported that her husband Mr. [redacted] immediately got up and left to go to his mothers home where [redacted] was to get [redacted] and bring him back home. Mrs. [redacted] reported that she contacted [redacted] old GAL to inform her that [redacted] was in Ms. [redacted] care when she overdosed and was unsure what she needed to do. The GAL instructed her to make a DCS referral so that is what Ms. [redacted] did. Mrs. [redacted] and Mr. [redacted] report that they will not be letting [redacted] around [redacted] due to her recent overdose and are in agreeance with the IPA that states the mother is to have no physical contact with [redacted] for the duration of this agreement.

On 05/20/2022 at 5:25pm a referral was made to the department that was screened out.
Intake Number: [redacted]

On 05/20/2022 at 11:50 pm a referral was made to the department that was screened out.
Intake Number: [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:	2022-05-24 12:30:00.0	Contact Method:	Face To Face
Contact Time:	12:30 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Hospital	Created Date:	06/01/2022
Completed date:	06/08/2022	Completed By:	[redacted]

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

Contact Type(s): Other Persons Living in Home Interview/Observation

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 06/01/2022 10:51 AM Entered By: [redacted]

Date: 05/24/2022
Time: 12:30
Location: [redacted] MC [redacted] TN [redacted]
Purpose: Witness/Other Person Living in the home Interview

CPSI [redacted] CPSI [redacted] and CPSI [redacted] spoke with the [redacted] maternal grandmother, at [redacted] MC. Ms. [redacted] understands the reason DCS is involved is because Ms. [redacted] used drugs during her pregnancy and endangered her 18-month-old son, [redacted] Ms. [redacted] reported that she clocked out at work at 4:10 pm on 05/20/2022 and arrived home around 4:45pm on 05/20/2022. Ms. [redacted] reported that when she arrived home she went to Ms. [redacted] room to check on her and [redacted] and that is when Ms. [redacted] found Ms. [redacted] in her bed foaming from the mouth and she was unable to wake her up. Ms. [redacted] stated that she noticed a needle in her hand and that is when she yelled for her son [redacted] to find the Narcan and call 911 that Ms. [redacted] had overdosed. Ms. [redacted] reported the Narcan was administered but Ms. [redacted] did not come to. Ms. [redacted] reported [redacted] was awake in his pack and play at this time. Ms. [redacted] reported that she was unaware that Ms. [redacted] was using again due to her daughter being on Vivitrol. Ms. [redacted] reported that the Fire Department arrived first, then EMS, and then Law Enforcement. Ms. [redacted] reported another dose of Narcan was given and her daughter became responsive again.

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:	2022-05-24 11:00:00.0	Contact Method:	Face To Face
Contact Time:	11:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Hospital	Created Date:	05/31/2022
Completed date:	06/08/2022	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)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 05/31/2022 04:38 PM Entered By: [redacted]

Date: 05/24/2022
Time: 10:30 am
Location: [redacted] MC [redacted], [redacted] TN [redacted]
Purpose: AP Interview/

CPSI [redacted] made a visit to [redacted] MC at [redacted], [redacted] TN [redacted] to initiate the investigation CPSI [redacted] gained consent to enter the room by [redacted]

The following were present in the room: CPSI [redacted] CPSI [redacted] CPSI [redacted] and [redacted] Ms. [redacted] was asked to leave the room while the interview was conducted.

In order to engage the family, CPSI [redacted] explained the current report made to the Tennessee Department of Childrens Services and the MRS/Assessment process. CPSI [redacted] explained all forms and engaged the family during the paperwork process. The custodian signed the Clients Rights Handbook Signature Page, Native American Heritage Veto Verification, Health Insurance Portability and Accountability Act (HIPAA) Acknowledgement form, Notice of Equal Access to Programs and Services, and the Release of Information. CPSI [redacted] obtained signed acknowledgements of such and copies have been placed into the file. CPSI [redacted] educated the family on safe sleep practices and the risks associated with not practicing safe sleep.

Initial Family Composition:

The family consists of the following individuals:
The mother is [redacted] Her date of birth is [redacted]. SS#: [redacted]
The father is [redacted] His date of birth is [redacted]. SS#:
Alleged child victim is [redacted] Date of birth is [redacted]. SS#
Alleged child victim is [redacted] Date of birth is [redacted]. SS# [redacted]

Tennessee Department of Children's Services

Case Recording Summary

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

Case Status: Close Organization: [redacted] Region

The Father of [redacted] is [redacted] DOB: [redacted] SSN: [redacted]
Peter is currently not involved in [redacted] like.
The Mother is not in a relationship with either one of the fathers.
The children do not attend school or daycare at this time.
Currently [redacted] is hospitalized at [redacted]MC in the NICU.
[redacted] currently resides with his maternal aunt and uncle [redacted] and [redacted] at [redacted], TN [redacted] can be reached at [redacted] and [redacted] can be reached at [redacted].
The mother resides at [redacted], [redacted] TN [redacted] The mother currently resides with her mother and father [redacted] and [redacted] and her brother [redacted] The mothers phone number is [redacted] (detectives received a search warrant and confiscated her phone for evidence) and the Maternal Grandmothers number is [redacted].
The father resides at [redacted], [redacted] TN [redacted] The phone number provided by the family for the mother is [redacted] and for the father is [redacted].
Insurance- Tenncare Blue Care
Pediatrician- [redacted] goes to the pediatrician at [redacted] Pediatrics ([redacted], [redacted] TN [redacted] Contact: [redacted]). At this time there is a not a pediatrician identified for [redacted] as his prognosis is currently unknown.
Mental Health- The mother reports that she suffers from anxiety and depression. She is currently on Zoloft, Busbar, Trazadone, and Hydroxyzine.

Parent Interviews:

CPSI [redacted] interviewed [redacted] who stated she found out in September 2021 that she was pregnant. Ms. [redacted] took a home pregnancy test which was positive, and she then made an appointment at [redacted] for confirmation of her pregnancy. Ms. [redacted] was between 5 and 6 weeks pregnant when her pregnancy was confirmed. Ms. [redacted] received prenatal care at [redacted] and [redacted]. Ms. [redacted] delivered at 36 weeks and 2 days via an emergency cesarian section due to her son having a nonreassuring heartbeat.
Ms. [redacted] reported that she has a history of substance abuse issues in the past. Ms. [redacted] reports that at the age of 14 she began to socially use Marijuana. At the age of 16 she tried oxycodone by snorting. At the age of 19 or 20 she began to use cocaine. At the age of 20-21 she began to use Methamphetamine by smoking. At the age of 22 she started using Methamphetamine intravenously. At the age of 22-23 she tried heroin for the first time by snorting it. At the age of 23-24 she began to use heroin intravenously.
Ms. [redacted] reported that she used throughout her entire first pregnancy. Once she delivered her first child he was removed from her care and placed with her brother and sister-in-law, [redacted] and [redacted] Ms. [redacted] immediately went to [redacted] for inpatient treatment. Once she was finished with inpatient treatment Ms. [redacted] began receiving Medically Assisted Treatment at [redacted]. Ms. [redacted] decided that she wanted to get on the vivitrol shot. After leaving [redacted] Ms. [redacted] reported that she went to live in a Sober Living Facility where she has been staying up until just a few weeks ago. Ms. [redacted] reported that she has been on the vivitrol shot the majority of her pregnancy but was taken off the shot around a month ago. Ms. [redacted] reported that her doctor took her off the shot because she could not be on it at the time of delivery because it is harder to reverse the side effects if medicine is needed to be given at the time of delivery. Ms. [redacted] reported that her doctor prescribed her Naltrexone to help with the withdrawal symptoms. Ms. [redacted] reported that he doctor told her that this medication is not as strong as the vivitrol shot and there could be a possibility that she could relapse so her doctor prescribed her Narcan as well. Ms. [redacted] reported that she did try taking the Naltrexone, but they made her very sick and on top of her already being sick from the pregnancy she was unable to tolerate the medication.
Ms. [redacted] reported that she currently has unsupervised visitations with [redacted] Ms. [redacted] reported

Tennessee Department of Children's Services

Case Recording Summary

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

Case Status: Close Organization: [redacted] Region

that she gets to see [redacted] almost daily but he does not stay the night with her. Ms. [redacted] reported that she picks him up around 10:00 am on most days and drops him back off before bedtime. Ms. [redacted] reported the only thing she has left to do is go to the court house and file a petition to regain custody of [redacted]
Ms. [redacted] reported that the day of the incident she was not trying to kill herself. She had been unable to sleep and was very depressed over her own personal life as well as the way the father of her baby had been treating her. Ms. [redacted] reported that she had a steady job but ended up losing it because she had to miss work so much because she was sick from the pregnancy. She received another job but was fired because of her background. Ms. [redacted] reported that she was barely able to pay her bills and felt as if she was going under. She stated that she had lost everything that she had worked so hard for. Ms. [redacted] stated that because she was so depressed all she wanted was to be okay/feel okay and the only way she knew how to feel okay was to use heroin. Ms. [redacted] used heroin intravenously on 05/20/2022 because she wanted to have instant gratification. Ms. [redacted] reported that she only used a dusting of heroin that day, less than half a point. Ms. [redacted] reported that she thought she would just go to sleep and wake up in a couple hours, however that was not the case. Ms. [redacted] reported that this incident was the first time that she has used since she became sober 18 months ago.

Ms. [redacted] reported that she is not sure of the exact time that she overdosed, but if she could estimate a time, it would have been between 3:00pm and 3:30 pm after she laid her 18-month-old son done for a nap. Ms. [redacted] reported that she put him in his pack and play and she used after that. [redacted] pack and play is in the same room as [redacted] and was next to the bed where she overdosed. Ms. [redacted] reported that her mother found her in her bed with a needle still in her hand when she returned home from work. Ms. [redacted] reported that her mother used the Narcan on her and called 911. Ms. [redacted] reported that EMS told her mother that it appeared as if she overdosed on Gray Death.
An IPA was completed at this time restricting Ms. [redacted] from having any physical contact with her 18-month-old-son [redacted] due to her recent overdose.

Narrative Type: Addendum 1 Entry Date/Time: 06/08/2022 07:58 AM Entered By: [redacted]

[redacted] is currently not involved in [redacted] like.

CPSI [redacted] miss spelled life.

[redacted] currently resides with his maternal aunt and uncle [redacted] and [redacted] at [redacted], TN [redacted] can be reached at [redacted] and [redacted] can be reached at [redacted].

CPSI [redacted] miss spelled [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:	2022-05-24 10:30:00.0	Contact Method:	Face To Face
Contact Time:	10:30 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Hospital	Created Date:	05/31/2022
Completed date:	06/08/2022	Completed By:	[redacted]

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

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

Contact Sub Type:

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 05/31/2022 03:16 PM Entered By: [redacted]

Date: 05/24/2022
Time: 10:30 am
Location: [redacted]MC [redacted], [redacted] TN [redacted]
Purpose: ACV Observation/Interview

CPSI [redacted] observed [redacted] who is non-verbal due to being an infant. An interview was not completed. CPSI [redacted] observed [redacted] unclothed, and did not see any marks or bruises based on this observation. [redacted] is currently hospitalized at [redacted]MC in the NICU. [redacted] remains intubated but has started initiating periods of spontaneous respirations. He remains on therapeutic hypothermia but will began the rewarming process at 8:30 pm on 05/24/2022. The rewarming process takes 6 hours. Once ACV has completed the warming process another EEG will be performed, and he will also have an MRI to access the extent of the damage. He is minimally reactive and is having occasional bursts of small movements that are seemingly not purposeful. ACV has no eye opening and minimal response to ET tube manipulation. ACVs gag reflexes are still absent. ACV is LOADED on Phenobarbital for presumed seizures. EEG profoundly abnormal with minimal activity and occasional random spikes though no organized seizures. ACV Remains obtunded. Medical staff to discuss DNR statues with the family. ACV tested positive for Barbiturates and Opiates. ACV was given morphine and has been given Phenobarbital which could result in the positive UDS. Cord Stat is pending.

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:	2022-05-24 10:00:00.0	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	05/31/2022
Completed date:	05/31/2022	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community,Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 05/31/2022 09:50 AM Entered By: [redacted]

This case came in as a Potential Near Death (PND).

[redacted] overdosed on Heroin/Fentanyl on Friday (5/20/22) at her home. She was given 8mg of Narcan, and transported to [redacted] Medical Center. [redacted] was 36 weeks pregnant, and underwent an emergent C-section. [redacted] was unresponsive at birth, and was placed on the ventilator. [redacted] likely experienced HIE, and is being cooled to prevent further organ and brain damage. He remains on the ventilator. He is likely having seizures. He has no gag and no eye opening. [redacted] admits to using heroin Friday to the overdose. She reports that she had been clean for 18 months prior this use. [redacted] has one other child that is in the custody of her brother. [redacted] will likely discharge home tomorrow. [redacted] does not have a discharge date.

CM to meet response and assess for safety. CM will gather relevant information to aid in investigation activities.

Next Steps: CM to request records from any involved providers, review and document findings prior to classification. CM to meet with the family f2f monthly for duration of case as well as staff with TL for monthly admin reviews. Should any significant concerns or barriers present prior to scheduled admin reviews, CM to staff with supervisor promptly.

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:	2022-05-24 09:00:00.0	Contact Method:	
Contact Time:	09:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	05/31/2022
Completed date:	06/08/2022	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)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 05/31/2022 04:32 PM Entered By: [redacted]

Initial Case Summary:

Child Protective Services (CPS) received this case on 05/23/2022 as a P1 with allegations of Drug Exposed Child. The victim (ACV) is listed as [redacted] and the perpetrator (AP) is [redacted] The referral was assessed and assigned by LI [redacted] on 05/24/2022 to Child Protective Services Investigator (CPSI) [redacted] Response is due on 05/24/2022. A copy of such notification is contained within the file. 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]

Referral Summary:

[redacted] overdosed on Heroin/Fentanyl on Friday (5/20/22) at her home. She was given 8mg of Narcan and transported to [redacted] Medical Center. [redacted] was 36 weeks pregnant and underwent an emergent C-section. [redacted] was unresponsive at birth and was placed on the ventilator. [redacted] likely experienced HIE and is being cooled to prevent further organ and brain damage. He remains on the ventilator. He is likely having seizures. He has no gag and no eye opening. [redacted] admits to using heroin Friday to the overdose. She reports that she had been clean for 18 months prior this use. [redacted] has one other child that is in the custody of her brother. [redacted] will likely discharge home tomorrow. [redacted] does not have a discharge date.

Referent Notification:

Referent notification was made by e-mail on the date of intake by the Child Abuse Reporting and Tracking system.

Tennessee Department of Children's Services

Case Recording Summary

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

CPSI [redacted] verified the familys history of involvement with DCS through a search with DCS through a search of TNKids/TFACTS and the following history was found:

Date: 12/11/2020
Investigation: [redacted]
ACV: [redacted]
AP: [redacted]
Allegations: Drug Exposed Child.
Classifications: ASPS. At this time there is a preponderance of evidence to support the allegations of drug exposed child as defined by DCS Policy. The mother delivered at [redacted]MC. Although the mother used Suboxone, Fentanyl and Heroin while pregnant, she also has history of METH use. The ACV was observed for NAS; however after observation, discharged under an IPA to the maternal grandmother, m. aunt and m. uncle. ACV remained in their care and physical custody was granted to the aunt and uncle on 1.5.21.
The father, [redacted] has a lengthy DCS history as a minor with sex offenses. He has been referred for a hair follicle and MHA to assess his current situation. Until then, both parents are to be strictly supervised by the caregivers. Severe abuse is pending for June 30, 2021 at [redacted]CJC. 3. The investigation is closed as Allegation Substantiated/ Perpetrator Substantiated against the mother

CPSI [redacted] completed checks on all Perpetrators in the residence and perpetrators at the following websites:
National Sex Offender No Results
TN Felony Offender [redacted] METH DELIVERY/SELL. On Probation until 11/06/2026.
TN Meth Offender [redacted] POSSESSION WITH INTENT TO SELL METHAMPHETAMINE LESS THAN 0.5G. Convicted 11/06/2020.
Abuse Registry No Results
Local [redacted] Date: 04/03/2019. METH - MFG, DELIVER, SALE, POSS WITH INTENT. Disposition: BOUND OVER TO GRAND JURY (HEARING WAIVED) Disposition Date: 10/06/2020. THE DEFENDANT COMMITTED THE OFFENSE OF METH - MFG, DELIVER, SALE, POSS WITH INTENT, IN VIOLATION OF TCA SECTION 39-17-434 (A). THIS INCIDENT OCCURRED ON OR ABOUT WEDNESDAY, APRIL 03, 2019 AT 19:16 AT [redacted]. I ARRIVED AT [redacted] TN IN REFERENCE TO A PACKAGE WHICH CONTAINED METHAMPHETAMINE. WHILE EXAMINING THE CONTENTS OF THE PACKAGE, THE DEFENDANT ARRIVED AT THE ADDRESS AND ATTEMPTED TO RECEIVE THE PACKAGE. CONTACT WAS MADE WITH THE DEFENDANT AT WHICH TIME SHE IDENTIFIED THE PACKAGE AS HERS. THE DEFENDANT STATED SHE WAS AWARE THE PACKAGE CONTAINED 4 OUNCES OF METHAMPHETAMINE AND THAT SHE WAS TO DELIVER THE PACKAGE TO AN ADDRESS IN [redacted] TN AND WOULD BE PAID $1400.00 UPON DELIVERY. THE DEFENDANT ALSO GAVE VERBAL CONSENT FOR A SEARCH OF HER PHONE AND PHYSICALLY ENTERED HER PASS CODE INTO THE PHONE. A SEARCH OF THE PHONE REVEALED MULTIPLE CONVERSATIONS IN REFERENCE TO THE SELL AND DELIVERY OF ILLEGAL NARCOTICS. THE DEFENDANT WAS TAKEN INTO CUSTODY WITHOUT INCIDENT AND TRANSPORTED TO THE [redacted] COUNTY JAIL. THIS DID OCCUR IN [redacted] COUNTY, TN. A CITATION WAS NOT ISSUED BECAUSE OFFENSE IS A FELONY.
Date: 07/05/2018. SPEEDING. Disposition: Pled Guilty. Disposition Date: 08/09/2018.
Date: 05/01/2018. POSS UNLAW DRUG PARAPHERNALIA USES & ACTIVITIES. Disposition: CONVICTION (PLED GUILTY). Disposition Date: 09/18/2018. THE DEFENDANT COMMITTED THE OFFENSE OF POSS UNLAW DRUG PARAPHERNALIA USES & ACTIVITIES, IN VIOLATION OF TCA SECTION 39-17-425. THIS INCIDENT OCCURRED ON OR ABOUT TUESDAY, MAY 01, 2018 AT 23:30 ,I, OFFICER [redacted] ([redacted]) ALONG WITH OFFICER [redacted] RESPONDED TO A SUSPICIOUS PERSON AT [redacted]. (THE EXTENDED STAY PARKING LOT). AN ANONYMOUS CALLER SUSPECTED SEVERAL SUSPECTS TO BE ILLEGALLY SELLING NARCOTICS IN THE PARKING LOT OF THE ABOVE BUSINESS. UPON ARRIVAL I PARKED MY [redacted]PD CRUISER IN THE BACK PARKING LOT OF THE ABOVE ADDRESS AND WALKED OVER TO THE DEFENDANT'S VEHICLE (BLUE TOYOTA COROLLA). I

Tennessee Department of Children's Services

Case Recording Summary

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

DEFENDANTS DRIVER SIDE WINDOW WITH MY RIGHT HAND AND ALERTED THE DRIVER (DEFENDANT: [redacted] DOB [redacted] DL: [redacted]) TO LET THE WINDOW DOWN AND TALK TO ME. THE DEFENDANT PROCEEDED TO DIG AROUND IN THE VEHICLE STATING SHE COULD NOT FIND HER KEYS. I OPENED THE DEFENDANTS DOOR AND RECOGNIZED THE ODOR OF RAW MARIJUANA EMITTING FROM INSIDE THE DEFENDANTS VEHICLE. IN PLAIN VIEW SITTING ON TOP OF THE MIDDLE CONSOLE BETWEEN THE PASSENGER'S SEAT AND DEFENDANT'S SEAT THERE WAS A BAG OF MARIJUANA (16.01 GRAMS). OFFICER [redacted] SEARCHED THE VEHICLE AND REVEALED METHAMPHETAMINE (3.0 GRAMS MIDDLE CONSOLE CUP AREA), 15 DEXAMETHASONE PILLS (LEGEND DRUG MIDDLE CONSOLE CUP AREA), 2 HYDROCODONE PILLS (SCHEDULE 2), 1 OXYCODONE PILL (SCHEDULE 2 BOTH IN MIDDLE CONSOLE AREA), 2 DIGITAL SCALES (1 IN BACKSEAT AND 1 IN GLOVE BOX) AND 1 GLASS PIPE (IN MIDDLE CONSOLE CUP AREA) USED TO SMOKE MARIJUANA AND 1 GLASS PIPE USED TO SMOKE METHAMPHETAMINE , 2 STRAWS (IN MIDDLE CUP CONSOLE AREA) USED TO SNORT NARCOTICS. AFTER BEING MIRANDIZED THE DEFENDANT STATED THE VEHICLE WAS HERS AND EVERYTHING IN THE VEHICLE IS HERS AS WELL. THE DEFENDANT ALSO STATED SHE WAS AT THE MOTEL BECAUSE SHE WAS MEETING SOMEONE ELSE THERE TO SELL THE DRUGS. THIS INCIDENT DID OCCUR IN [redacted] COUNTY, TN. A CITATION WAS NOT ISSUED BECAUSE DEFENDANT HAS A FELONY.

[redacted] Date: 11/21/2019. Disposition: DISMISSED (JUDICIAL DIVERSION COMPLETED). Disposition Date: 01/07/2021. THE DEFENDANT COMMITTED THE OFFENSE OF THEFT OF MERCHANDISE - UP TO $1,000, IN VIOLATION OF TCA SECTION 39-14-146. THIS INCIDENT OCCURRED ON OR ABOUT THURSDAY, NOVEMBER 21, 2019 AT 19:19 AT [redacted]. ON THURSDAY, NOVEMBER 21, 2019 AT APPROXIMATELY 1919 HOURS, OFFICERS WERE CONTACTED BY [redacted] (COMPLAINANT/WITNESS) OF A MALE AND FEMALE SHOPLIFTING INSIDE THE WALMART LOCATED AT [redacted] ONCE ON SCENE OFFICERS LOCATED THEM INSIDE THE LOSS PREVENTION OFFICE. [redacted] S [redacted] (ARRESTEE) AND [redacted] (ARRESTEE/JUVENILE)CONCEALED JEWELRY AND A BOX SET OF DVDS AND EXITED THE STORE PAST THE LAST POINT OF PURCHASE. MR. [redacted] AND MS. [redacted] WERE BOTH TAKEN INTO CUSTODY. MS. [redacted] CAR WAS LOCATED IN THE PARKING LOT AND TOWED BY [redacted] TOWING BY REQUEST OF WALMART. THE TOTAL VALUE OF ALL ITEMS STOLEN WAS $105.80. THIS DID OCCUR IN [redacted] COUNTY, TN. A CITATION WAS NOT ISSUED BECAUSE LIKELY THE OFFENSE WILL CONTINUE.

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: 05/23/2022

Assignment Date: 05/25/2022

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 Substantiated / Perpetrator Substantiated	Yes	[redacted] / 09/29/2023
2	[redacted]	[redacted]	Lack of Supervision	[redacted]	[redacted] 12:00 AM	Allegation Substantiated / Perpetrator Substantiated	Yes	Fixes, Data / 08/29/2023
3	[redacted]	[redacted]	Drug Exposed Child	[redacted]	[redacted] 12:00 AM	Allegation Substantiated / Perpetrator Substantiated	Yes	Fixes, Data / 08/29/2023
4	[redacted]	[redacted]	Abuse Death	[redacted]	[redacted] 12:00 AM	Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[redacted] / 07/17/2023

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: This investigation is being closed as ASPS. At this time, there is a preponderance of evidence to support the allegations of Drug Exposed Child. The child was placed non-custodially with [redacted] and [redacted] at [redacted], TN [redacted] on 05/24/2023.

D. Case Workers

Case Worker: [redacted]

Date: 06/13/2022

Team Leader: [redacted]

Date: 09/29/2023

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:

CPSI [redacted] observed [redacted] who is non-verbal due to being an infant. An interview was not completed. CPSI [redacted] observed [redacted] unclothed, and did not see any marks or bruises based on this observation. [redacted] is currently hospitalized at [redacted] MC in the NICU. [redacted] remains intubated but has started initiating periods of spontaneous respirations. He remains on therapeutic hypothermia but will began the

Department of Children's Services

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

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

rewarming process at 2030 on 05/24/2022. The rewarming process takes 6 hours. Once ACV has completed the warming process another EEG will be performed, and he will also have an MRI to access the extent of the damage. He is minimally reactive and is having occasional bursts of small movements that are seemingly not purposeful. ACV has no eye opening and minimal response to ET tube manipulation. ACV's gag reflexes are still absent. ACV is "LOADED" on Phenobarbital for presumed seizures. EEG profoundly abnormal with minimal activity and occasional random spikes though no organized seizures. ACV Remains obtunded. Medical staff to discuss DNR statues with the family. ACV tested positive for Barbiturates and Opiates. ACV was given morphine and has been given Phenobarbital which could result in the positive UDS. Cord Stat is pending.

CPSI [redacted] observed [redacted] who is pre-verbal due to being a toddler. An interview was not completed.
CPSI [redacted] observed [redacted] unclothed and did not see any marks or bruises based on this observation.

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

05/24/2022-[redacted] remains intubated but has started initiating periods of spontaneous respirations. [redacted] remains on therapeutic hypothermia but will began the rewarming process at 2030 on 05/24/2022. The rewarming process takes 6 hours. Once [redacted] has completed the warming process another EEG will be performed, and he will also have an MRI to access the extent of the damage. ACV is minimally reactive and is having occasional bursts of small movements that are seemingly not purposeful. ACV has no eye opening and minimal response to ET tube manipulation. ACV's gag reflexes are still absent. ACV is "LOADED" on Phenobarbital for presumed seizures. EEG profoundly abnormal with minimal activity and occasional random spikes though no organized seizures. ACV Remains obtunded. Medical staff to discuss DNR statues with the family. ACV tested positive for Barbiturates and Opiates. ACV was given morphine and has been given Phenobarbital which could result in the positive UDS.
5/26/2022-CPSI [redacted] received an update from hospital staff. [redacted] is having random movements, but they do not appear to be purposeful. He has a hypoactive gag, secretions are beginning to pool but currently he seems to be able to manage them. He does not have spontaneous eye opening. He is often maintaining a decorticate posture with arms crossed over his chest. He has sluggish response to deep pain.
CPSI [redacted] went to the hospital to meet with the family and spoke with the Neonatologist. He informed CM the prognosis for the child is poor. He sat down and spoke with the mother about potential options for the child moving forward. He stated that the child was breathing on his own at this time with assistance from a Nasal Canula 5L. He was still unable to receive feeds by mouth and was feed via NG Tube. The doctor stated that if [redacted] is able to go home that he would have to go home with oxygen and would have to have a surgical procedure to have a feeding tube placed. He stated that [redacted] would most likely be a vegetable for the remainder of his life. The doctor reported that they have given the mother the option of whether or not to continue care for [redacted] At this time the mother has decided to continue care until all the additional tests have been completed and she gets the chance to speak with the Neurologist. [redacted] will be taken off the Phenobarbital to see if that may be causing him to not have brain activity on the EEG.
06/01/2022-It was discussed during the meeting that the infant's liver, brain and kidney functioning were impacted by the current diagnoses. He is not able to feed on his own as he has no suck or gag reflexes. It is anticipated that he would have to be fitted for a feeding tube in the near future if care were to be maintained. It was reported by the doctor that [redacted] is reliant on external supports to breath and that there is little to no chance of survival without assistance. [redacted] is experiencing seizures for which he is receiving mediation.
Family and medical staff discussed Ms. [redacted] decision to implement a DNR the day prior. It was ultimately determined during this meeting that supportive care would be stopped, with a plan to remove the baby's oxygen first as well as withhold feedings and provide only comfort care starting this afternoon. [redacted] stayed with his mother and passed away on the morning of 6/2/22 at 6:37am.

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

Ms. [redacted] received prenatal care at [redacted] and [redacted]. Ms. [redacted] delivered at 36 weeks and 2 days via an emergency cesarian section due to her son having a nonreassuring heartbeat.Ms. [redacted] reported that she has a history of substance abuse issues in the past. Ms. [redacted] reports that at the age of 14 she

Department of Children's Services

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

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

began to socially use Marijuana. At the age of 16 she tried oxycodone by snorting. At the age of 19 or 20 she began to use cocaine. At the age of 20-21 she began to use Methamphetamine by smoking. At the ager of 22 she started using Methamphetamine via intravenously. At the age of 22-23 she tried heroin for the first time by snorting it. At the age of 23-24 she began to use heroin intravenously.
Ms. [redacted] reported that she used throughout her entire first pregnancy. Once she delivered her first child he was removed from her care and place with her brother. Ms. [redacted] immediately went to [redacted] for inpatient treatment. Once she was finished with inpatient treatment Ms. [redacted] began receiving Medically Assisted Treatment at [redacted]. Ms. [redacted] decided that she wanted to get on the vivitrol shot. After leaving [redacted] Ms. [redacted] reported that she went to live in a Sober Living Facility where she has been staying up until just a few weeks ago. Ms. [redacted] reported that she has been on the vivitrol shot the majority of her pregnancy but was taken off the shot around a month ago. Ms. [redacted] reported that her doctor took her off the shot because she could not be on it at the time of delivery because it is harder to reverse the side effects if medicine is needed to be given at the time of delivery. Ms. [redacted] reported that the doctor prescribed her Naltrexone to help with the withdrawal symptoms. Ms. [redacted] reported that the doctor told her that this medication is not as strong as the vivitrol shot and there could be a possibility that she could relapse, so her doctor prescribed her Narcan as well. Ms. [redacted] reported that she did try taking the Naltrexone, but they made her very sick and on top of her already being sick from the pregnancy she was unable to tolerate the medication.

Ms. [redacted] reported that the day of the incident she was not trying to kill herself. She had been unable to sleep and was very depressed over her own personal life as well as the way the father of her baby had been treating her. Ms. [redacted] reported that she had a steady job but ended up losing it because she had to miss work so much because she was sick from the pregnancy. She received another job but was fired because of her background. Ms. [redacted] reported that she was barely able to pay her bills and felt as if she was going under. She stated that she had lost everything that she had worked so hard for. Ms. [redacted] stated that because she was so depressed all she wanted was to be okay/feel okay and the only way she knew how to feel okay was to use heroin. Ms. [redacted] used heroin intravenously on 05/20/2022 because she wanted to have "instant gratification." Ms. [redacted] reported that she only used a dusting of heroin that day, less than half a point. Ms. [redacted] reported that she thought she would just go to sleep and wake up in a couple hours, however that was not the case. Ms. [redacted] reported that this incident was the first time that she has used since she became sober 18 months ago.
Ms. [redacted] reported that she is not sure of the exact time that she overdosed, but if she could estimate a time, it would have been between 3:00pm and 3:30 pm after she laid her 18-month-old son done for a nap. Ms. [redacted] reported that sshe out him in his and she used after that. [redacted] play pen is in the same room as [redacted] and was next to the bed where she overdosed. Ms. [redacted] reported that her mother found her in her bed with a needle still in her hand when she returned home from work. Ms. [redacted] reported that her mother used the Narcan on her and called 911. Ms. Per

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

On May 20, 2022, [redacted] overdosed on Heroin/Fentanyl at the family home. She was given 8mg of Narcan by Emergency Services and transported to [redacted] Medical Center ([redacted]MC). Ms. [redacted] was 36 weeks pregnant and underwent an emergency C-section. Baby [redacted] was unresponsive at birth and was placed on a ventilator. It is believed that baby [redacted] likely experienced a Hypoxic- Ischemic Encephalopathy (HIE) and is being cooled to prevent further organ and brain damage. [redacted] remains on the ventilator and its likely he is having seizures. He has no gag reflexes and is not opening his eyes. Ms. [redacted] admits to using heroin Friday which resulted in the overdose. Ms. [redacted] claims she has been clean for 18 months prior to her most recent use. Ms. [redacted] has one other child that is in the custody of her brother.

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

At this time there is a preponderance of evidence to support the allegations of Drug Exposed Child as defined by DCS Policy 14.7. Ms. [redacted] used illicit substances during her pregnancy. On 05/20/2022, Ms. [redacted] overdosed on heroin while pregnant and with her 18-month-old son [redacted] in her care during an unsupervised visit. Ms. [redacted] delivered [redacted] on 05/21/2022, who suffered an in utero hypoxic event from the heroin overdose. Ms. [redacted] admitted to using heroin the last month of her pregnancy and multiple times while

Department of Children's Services

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

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

[redacted] was in her care. As a result of [redacted] inutero hypoxic event, he passed away on 06/02/2022. Per Policy 14.7 this classification is appropriate due to there being sufficient information and evidence to support the opinion that the alleged incident occurred, or harmful situation existed. ASPS.

At this time there is not a preponderance of evidence to support the allegations of Abuse Death. This case will be closed and classified as Allegation Unsubstantiated, Perpetrator Unsubstantiated for the Abuse Death of ACV [redacted] by [redacted]

At this time there is a preponderance of evidence to support the allegations of lack of supervision as defined by DCS Policy 14.7. Ms. [redacted] used illicit substances during her pregnancy. On 05/20/2022, Ms. [redacted] overdosed on heroin while pregnant and with her 18-month-old son [redacted] in her care during an unsupervised visit. Ms. [redacted] delivered [redacted] on 05/21/2022, who suffered an in utero hypoxic event from the heroin overdose. Ms. [redacted] admitted to using heroin the last month of her pregnancy and multiple times while [redacted] was in her care. As a result of [redacted] inutero hypoxic event, he passed away on 06/02/2022. Per Policy 14.7 this classification is appropriate due to there being sufficient information and evidence to support the opinion that the alleged incident occurred, or harmful situation existed. ASPS.

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: 05/26/2022**
Assessment Type: SAFETY	**CPS Case ID:** [redacted]

OVERVIEW

Safety Level: Immediate Intervention Recommended	**Assessed at Location:** In the Home
Event Start Date: 09/29/2023	**Last Assessed Date:**
Assessment Status: Approved	**Assessor:** [redacted]
Date Approved: 06/06/2022	**Approver:**

PARTICIPANTS

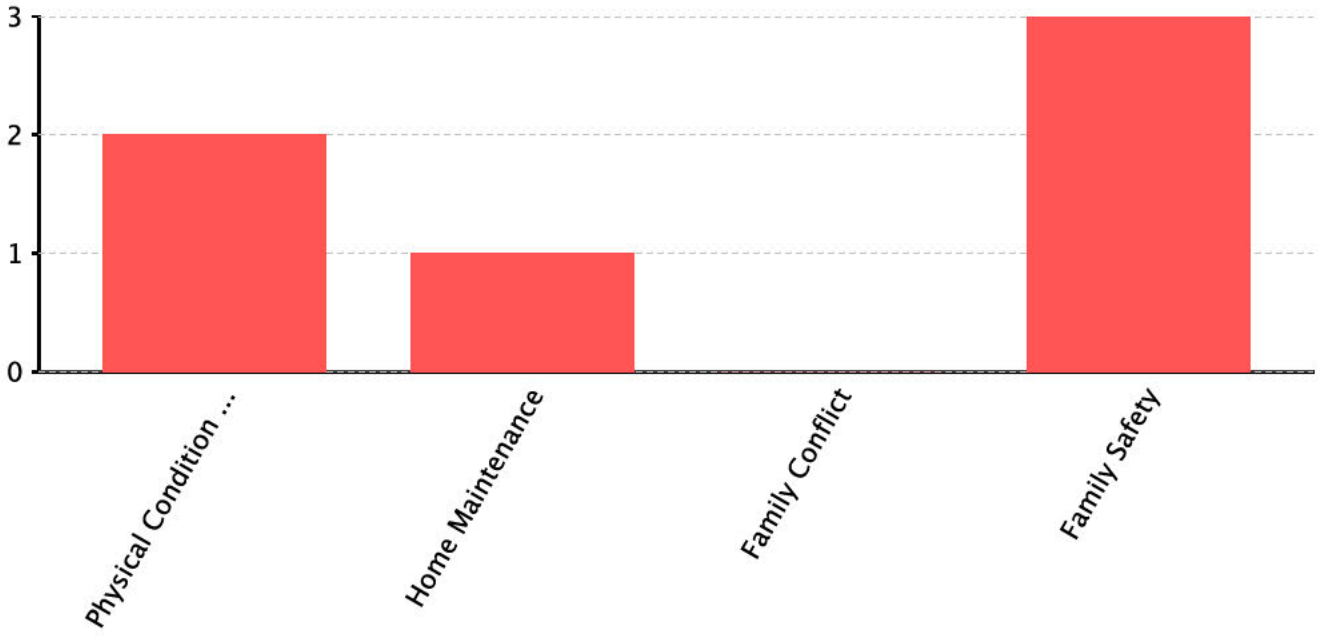
Name	Age	Role	Gender	Person ID	Trauma Score	CSEM Risk
[redacted] (AP)	26 Yrs	Primary Caregiver	F	[redacted]	N/A	N/A
[redacted] (ACV)	1 Yr 5 Mos	Youth	M	[redacted]	N/A	
[redacted] (ACV)	Deceased	Youth	M	[redacted]	N/A	

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

Event Type: CPS Case	**Assessment Date:** 05/26/2022
Assessment Type: SAFETY	**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).

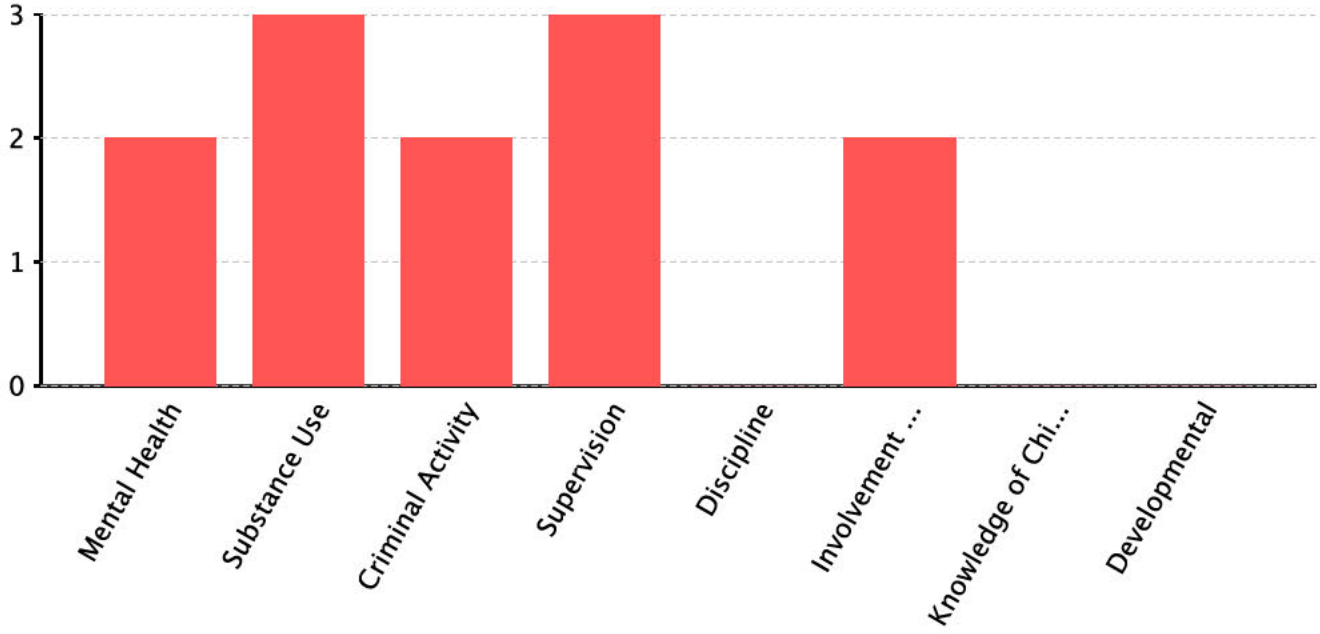


Item	Score	Justification/Narrative
Physical Condition of Home	2	The home where Ms. [redacted] lives does not have panels/walls over the framing in the living room. It did not appear as if there were any wiring accessible to the smaller child. The bedroom where Ms. [redacted] sleeps as well as the 18 month old when he is in her care is extremely cluttered and hard to walk in.
Home Maintenance	1	The room where the child sleeps when he is at his mothers home is very cluttered and hard to walk in.
Family Conflict	0	
Family Safety	3	The bedroom where the child sleeps when he is there is very cluttered. There was a lock box with medication sitting on the bed however it was unlocked. There was medication sitting on the counter top in the bedroom. Inside the trashcan where 2 needles which the mother stated were old and she had found them inside of her jacket pocket earlier in the day. There were clothes piled on the bed, in the floor, and inside the pack and play.

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

Event Type: CPS Case	**Assessment Date:** 05/26/2022
Assessment Type: SAFETY	**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
Mental Health	2	Ms. [redacted] suffers from anxiety and depression. She is currently taking Zoloft, Busbar, Trazadone, and Hydroxyzine.
Substance Use	3	The mother has a history of IV substance use and THC use. She was clean for roughly 18 months. She was on the Vivitrol shot since the birth of her last child who was born drug exposed. The mother was recently taken off of the Vivitrol shot and was prescribed Naltrexone for her substance abuse issues. The mother did not like the way it made her feel therefore she discontinued the medication. Ms. [redacted] relapsed and overdosed on heroin while she was pregnant with her 18month old son [redacted] in her care. She was given 8mg of Narcan to be revived and delivered her unborn son 24hours later due to a non-reassuring heart beat. Ms. [redacted] also has past criminal drug charges. She is also on the Drug Offender Registry.
Criminal Activity	2	Ms. [redacted] has a criminal history. METH - MFG, DELIVER, SALE, POSS WITH INTENT. POSS UNLAW DRUG PARAPHERNALIA USES & ACTIVITIES
Supervision	3	Ms. [redacted] overdosed by used IV Heroin with her 18 month old child in her care in the same room with him.
Discipline	0	

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

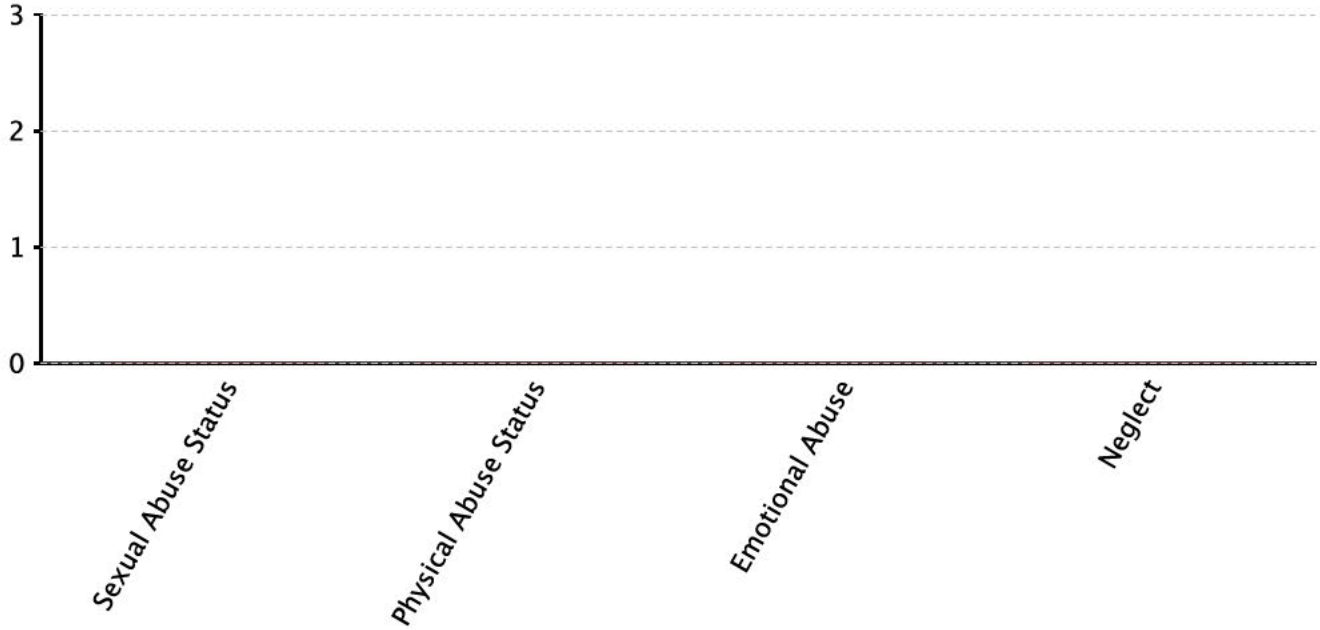
Event Type: CPS Case	**Assessment Date:** 05/26/2022
Assessment Type: SAFETY	**CPS Case ID:** [redacted]

Involvement in Caregiving Functions	2	Ms. [redacted] is unable to see her 18 month old at this time due to her recent heroin overdose. She does have the ability to go and visit with her newborn who is in the NICU at [redacted]MC on a ventilator due to suffering a hypoxic event inutero, however, Ms. [redacted] has not been to visit but a couple times for brief periods even when she was in the same hospital with him.
Knowledge of Child and Family Needs	0	
Developmental	0	

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

Event Type: CPS Case	**Assessment Date:** 05/26/2022
Assessment Type: SAFETY	**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]	Person ID: [redacted]	Age:Deceased

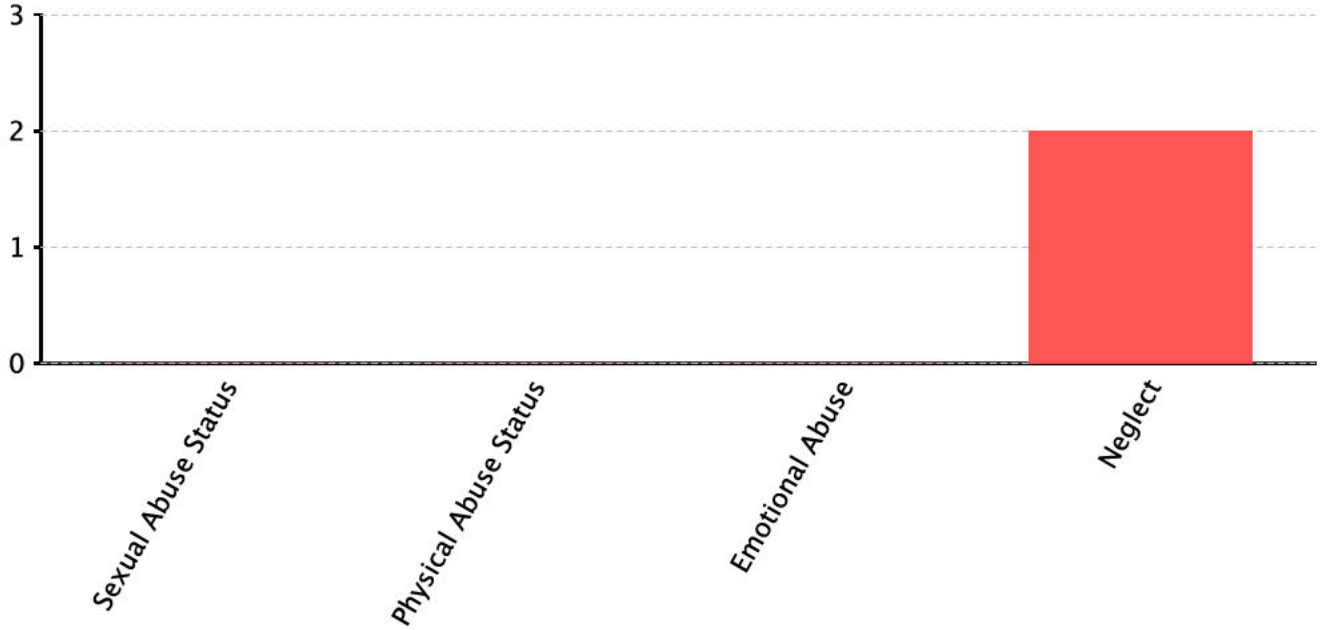


Item	Score	Justification/Narrative
Sexual Abuse Status	0	
Physical Abuse Status	0	
Emotional Abuse	0	
Neglect	0	

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

Event Type: CPS Case	**Assessment Date:** 05/26/2022
Assessment Type: SAFETY	**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]	Person ID: [redacted]	Age:1 Yr 5 Mos



Item	Score	Justification/Narrative
Sexual Abuse Status	0	
Physical Abuse Status	0	
Emotional Abuse	0	
Neglect	2	Ms. [redacted] overdosed by used IV Heroin with her 18 month old child in her care in the same room with him.

Tennessee Department of Children's Services

FAST 2.0 Assessment Summary Report

Event Type: CPS Case	**Assessment Date: 05/26/2022**
Assessment Type: FAST	**CPS Case ID:** [redacted]

OVERVIEW

Safety Level: Immediate Intervention Recommended	**Assessed at Location:** In the Home
Risk Level: High Need/Risk	
Event Start Date: 09/29/2023	**Last Assessed Date:** 05/26/2022
Assessment Status: Approved	**Assessor:** [redacted]
Date Approved: 06/06/2022	**Approver:**

PARTICIPANTS

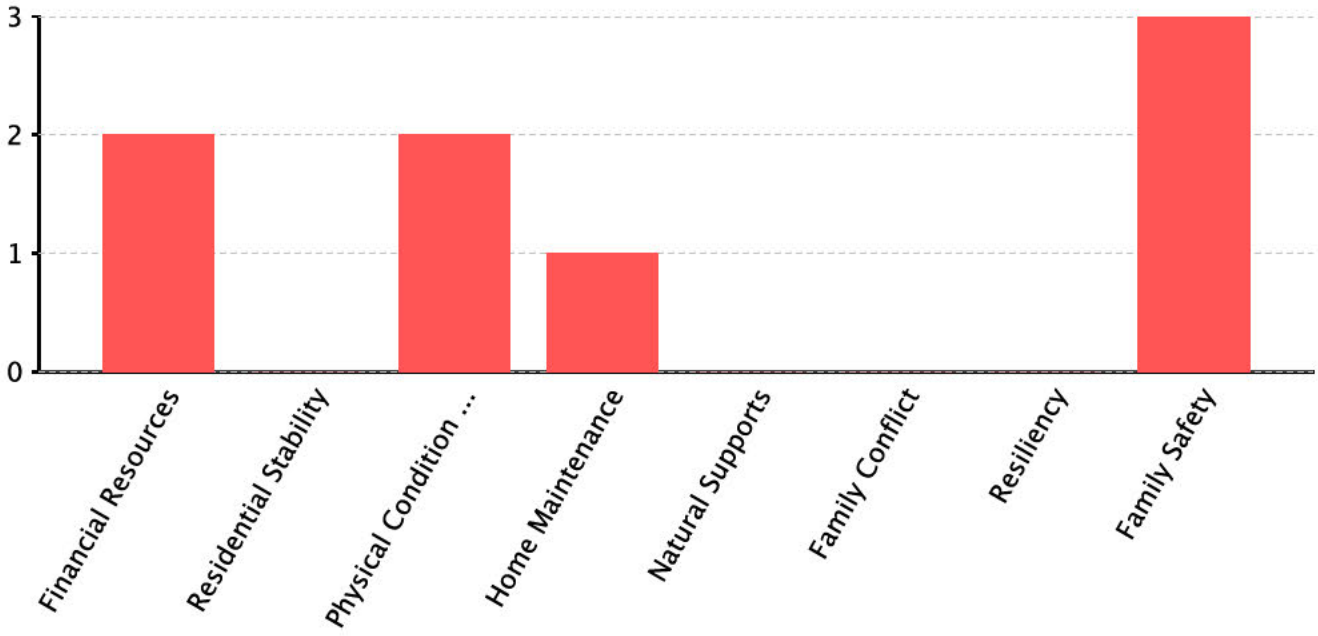
Name	Age	Role	Gender	Person ID	Trauma Score	CSEM Risk
[redacted] (AP)	26 Yrs	Primary Caregiver	F	[redacted]	N/A	N/A
[redacted] (ACV)	Deceased	Youth	M	[redacted]	0	Low
[redacted] (ACV)	1 Yr 5 Mos	Youth	M	[redacted]	2	Low

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

Event Type: CPS Case	**Assessment Date:** 05/26/2022
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	2	The mother is currently not working and struggling to financially support her family.
Residential Stability	0	
Physical Condition of Home	2	The home where Ms. [redacted] lives does not have panels/walls over the framing in the living room. It did not appear as if there were any wiring accessible to the smaller child. The bedroom where Ms. [redacted] sleeps as well as the 18 month old when he is in her care is extremely cluttered and hard to walk in.
Home Maintenance	1	The room where the child sleeps when he is at his mothers home is very cluttered and hard to walk in
Natural Supports	0	
Family Conflict	0	
Resiliency	0	
Family Safety	3	The bedroom where the child sleeps when he is there is very cluttered. There was a lock box with medication sitting on the bed however it was unlocked. There was medication sitting on the

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

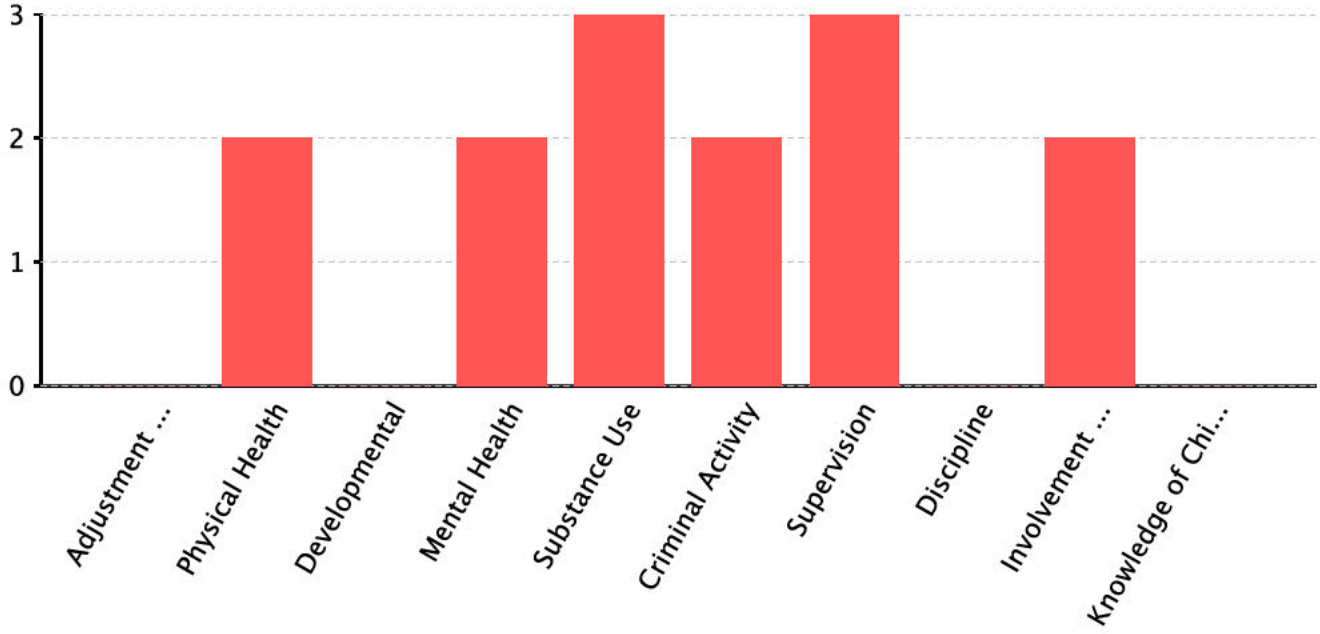
Event Type: CPS Case	**Assessment Date:** 05/26/2022
Assessment Type: FAST	**CPS Case ID:** [redacted]

counter top in the bedroom. Inside the trashcan where 2 needles which the mother stated were old and she had found them inside of her jacket pocket earlier in the day. There were clothes piled on the bed, in the floor, and inside the pack and play.

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

Event Type: CPS Case	**Assessment Date:** 05/26/2022
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	2	Ms. [redacted] does have Hep C due to her IV substance abuse us. She is currently not receiving treatment for this.
Developmental	0	
Mental Health	2	Ms. [redacted] suffers from anxiety and depression. She is currently taking Zoloft, Busbar, Trazadone, and Hydroxyzine.
Substance Use	3	The mother has a history of IV substance use and THC use. She was clean for roughly 18 months. She was on the Vivitrol shot since the birth of her last child who was born drug exposed. The mother was recently taken off of the Vivitrol shot and was prescribed Naltrexone for her substance abuse issues. The mother did not like the way it made her feel therefore she discontinued the medication. Ms. [redacted] relapsed and overdosed on heroin while she was pregnant with her 18month old son [redacted] in her care. She was given 8mg of Narcan to be revived and delivered her unborn son 24hours later due to a non-reassuring heart beat. Ms. [redacted] also has past criminal drug charges. She is also on the Drug Offender Registry.
Criminal Activity	2	Ms. [redacted] has a criminal history. METH - MFG, DELIVER, SALE, POSS WITH INTENT.

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

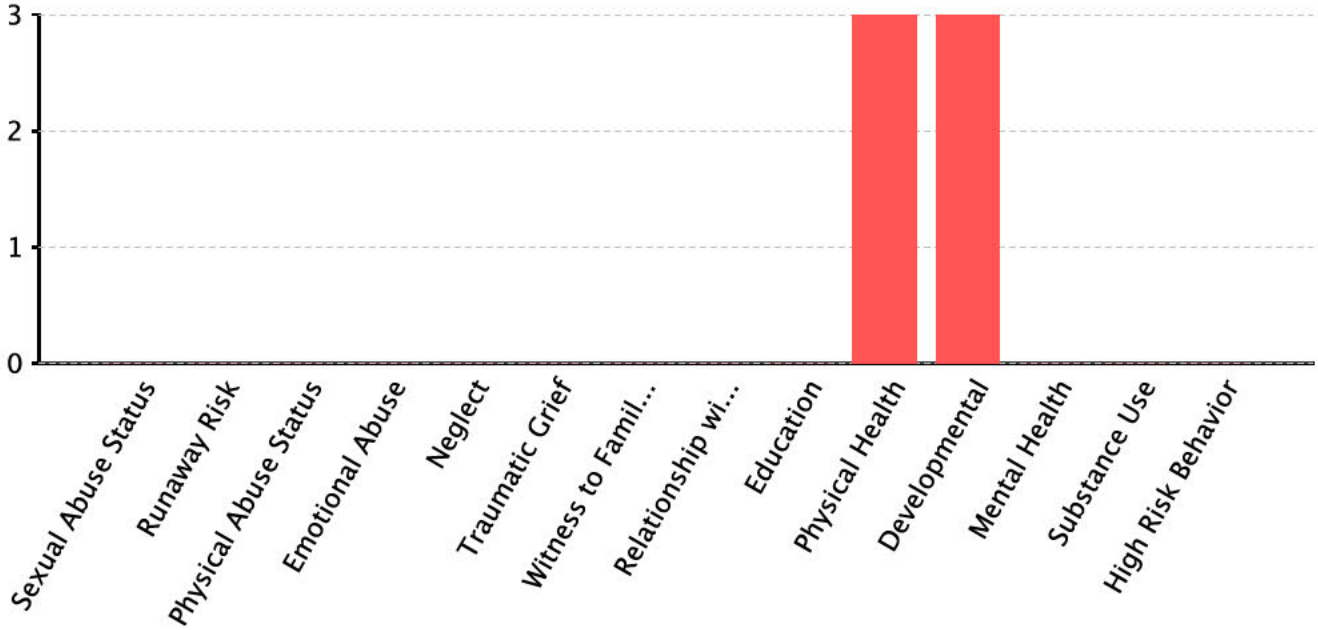
Event Type: CPS Case	**Assessment Date:** 05/26/2022
Assessment Type: FAST	**CPS Case ID:** [redacted]

		POSS UNLAW DRUG PARAPHERNALIA USES & ACTIVITIES
Supervision	3	Ms. [redacted] overdosed by used IV Heroin with her 18 month old child in her care in the same room with him.
Discipline	0	
Involvement in Caregiving Functions	2	Ms. [redacted] is unable to see her 18 month old at this time due to her recent heroin overdose. She does have the ability to go and visit with her newborn who is in the NICU at [redacted]MC on a ventilator due to suffering a hypoxic event inutero, however, Ms. [redacted] has not been to visit but a couple times for brief periods even when she was in the same hospital with him.
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:** 05/26/2022
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	0	
Physical Health	3	[redacted] is currently hospitalized at [redacted]MC in the NICU due to suffering a hypoxic event inutero. [redacted] currently has minimal brain function.
Developmental	3	[redacted] is currently hospitalized at [redacted]MC in the NICU due to

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

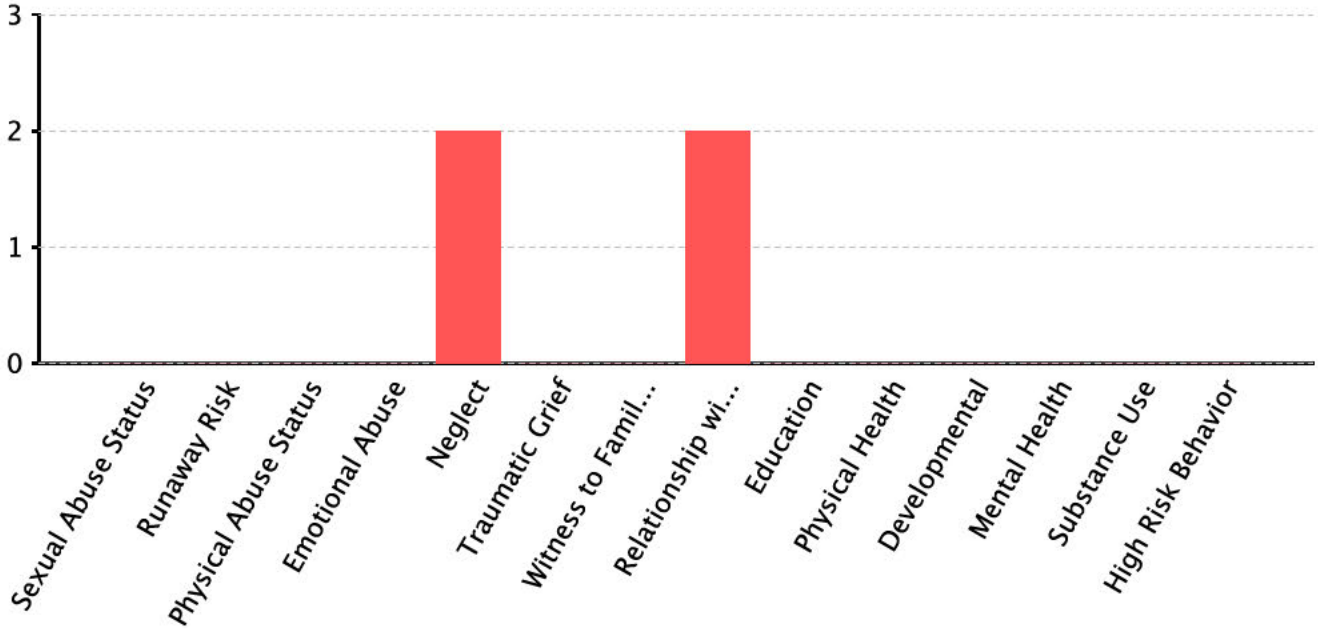
Event Type: CPS Case	**Assessment Date:** 05/26/2022
Assessment Type: FAST	**CPS Case ID:** [redacted]

		suffering a hypoxic event inutero. [redacted] currently has minimal brain function.
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:** 05/26/2022
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:1 Yr 5 Mos



Item	Score	Justification/Narrative
Sexual Abuse Status	0	
Runaway Risk	0	
Physical Abuse Status	0	
Emotional Abuse	0	
Neglect	2	Ms. [redacted] overdosed by used IV Heroin with her 18 month old child [redacted] was in her care in the same room with him.
Traumatic Grief	0	
Witness to Family, School or Community Violence	0	
Relationship with Primary Caregiver	2	Currently [redacted] is unable to have contact with his mother due to her recent heroin overdose.
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:** 05/26/2022
Assessment Type: FAST	**CPS Case ID:** [redacted]

Mental Health	0	
Substance Use	0	
High Risk Behavior	0	