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

Intake

Intake ID: [redacted]

Intake Taken By: [redacted]

Intake Date/Time: 10/17/2022 02:51 PM [redacted]

Track Assigned: Special Investigation

Priority Assigned: 1

Screened By: [redacted]

Date Screened: 10/17/2022

Investigation

Investigation ID: [redacted]

First County/Region Assigned: [redacted] CPS Special Investigation

Date/Time Assigned : 10/18/2022 09:33 AM

First Team Leader Assigned: [redacted]

Date/Time Assigned : 10/18/2022 12:00 AM

First Case Manager Assigned: [redacted]

Date/Time Assigned : 10/18/2022 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ? / CSEM ?	Alleged Perpetrator	Relationship to Alleged Victim
[redacted]	Deceased	Abuse Death	Yes	Unknown Participant [redacted] Unknown	

Referent(s)

Referent Name: [redacted]

Role to Alleged Victim(s): [redacted]

Referent Address: [redacted]

Referent Phone Number: [redacted]

Type of Contact: I-3 Phone

Notification: E-mail

Narrative: CUSTODIAL CHILD DEATH

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

Family Case ID Detailed History:
Open Court Custody/FSS/FCIP: SS [redacted] / CM [redacted] Supe. [redacted]
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 / 2021-08-06
INV [redacted] / DEC / AP: [redacted] / ASPS / 2018-10-11
Death: No
Screen Outs: No

History (not listed above):
ASMT [redacted] / DEC, LOS / NSN / 2020-11-10
INV [redacted] / PHA / AUPU / 2005-02-24

County of Jurisdiction: [redacted]
School/ Daycare: [redacted] Elementary School. [redacted] attends [redacted] Elementary Pre-K.
Active Military: Unknown

Reporter's Name/Relationship: [redacted]

-Child/Family Identification and Relationship Introduction Paragraph:
[redacted] (12), [redacted] (11), [redacted] (7), [redacted] (5), [redacted] (4), and [redacted] (1) are in a foster care kinship placement with their grandmother, [redacted] in [redacted] County. [redacted] grandmother is [redacted] The mother is unknown.

-Are you requesting immediate assistance from DCS to your location, or only an immediate phone call?
No, Immediate Assistance is not being requested.

-Please provide a brief summary of the concerns and why DCS is needed to respond immediately.
Although the children are in foster care and are in a kinship placement with [redacted] they also visit with [redacted] at times. [redacted] has severe asthma; on a recent visit with [redacted] sent over two inhalers and his breathing machine. [redacted] reported that she gave [redacted] his breathing treatment and laid him down for the night; it is unknown which room [redacted] was in and it is unknown if he was in a crib, Pack 'n Play, or something else. [redacted] that when she went back in to check on him it looked like he was not breathing. 911 was contacted and someone, Unknown, started CPR. The ambulance arrived and continued CPR on [redacted] before transporting him to [redacted] Hospital. On 10/11/2022, [redacted] was pronounced deceased. There were no marks or bruises on [redacted] body. An autopsy was performed.

Neither abuse nor neglect is suspected in [redacted] death. [redacted] reported that the doctor said that [redacted] had had an asthma attack and had passed from natural causes. The [redacted] Police Department was notified and met the family at the hospital. At this time no charges have been placed. There is no information about the living conditions in [redacted] home; the children have visited quite often. The other children are still with [redacted] at her home. There is currently no risk of harm for the other children in the home.

[redacted] death had not been reported until 10/17/2022. The birth mother has been notified; however, it is unknown if his father, Unknown, has been notified. The records from [redacted] autopsy and from the hospital are being requested. There are no reports from Law Enforcement. The responding officer's name is unknown. [redacted] reported that [redacted] home is on [redacted] Drive; the DCS Case Manager is going to get the address. The phone number is [redacted].

-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: No
Screener Notation: No

Emailed/Paged CPSI On Call: No

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

Notified Child Death/Preliminary Near Death Notification Group via Email:
[redacted]
SIU TC - [redacted]

SIU Track - P1 - Custodial Child Death
[redacted], CAH Director, on 10/17/22 @ 6:25pm

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: Black/African | Age: Deceased

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

Deceased Date: 10/11/2022

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: Yes

Contact: [redacted]

Contact Type: CELL

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: | Partipant ID: [redacted]

SSN: | Race: | Age:

Address: [redacted] Tennessee

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact: [redacted]

Contact Type: CELL

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

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

Name: [redacted]

Gender: Male

Date of Birth: [redacted]

Partipant ID: [redacted]

SSN:

Race:

Age: 10 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: Yes

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

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

Name: [redacted]

Gender: Male
Date of Birth: [redacted]
Partipant ID: [redacted]
SSN:
Race:
Age: 9 Yrs
Address:
Deceased Date:
School/ ChildCare Comments:

Alleged Perpetrator: No
DCS Foster Child: Yes
Contact:
Contact Type:
Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

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

Name: [redacted]

Gender: Male

Date of Birth: [redacted]

Partipant ID: [redacted]

SSN:

Race:

Age: 6 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: Yes

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

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

Name: [redacted]

Gender: Female

Date of Birth: [redacted]

Partipant ID: [redacted]

SSN:

Race:

Age: 14 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: Yes

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

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

Name: [redacted] [redacted]

Gender: Female

Date of Birth: [redacted]

Partipant ID: [redacted]

SSN:

Race:

Age: 15 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: Yes

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

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

Name: [redacted] [redacted]

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

SSN: | Race: | Age:

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

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

Name: Unknown Participant [redacted] Unknown

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

SSN: Race: Age:

Address:

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
Tennessee Child Abuse Hotline Summary

Name: Unknown Participant [redacted] Unknown

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

SSN: | Race: | Age:

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

Tennessee Department of Children's Services

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:	2025-06-03 09:42:00	Contact Method:	
Contact Time:	09:42 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	06/03/2025
Completed date:	06/03/2025	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: 06/03/2025 09:43 AM Entered By: [redacted]

Case Conference Admin
This case was received for completion of case closure tasks on this date of 4/16/2025. TL [redacted] reviewed the case administratively before assignment to the Special Response Team for closure. Case activities are being summarized given previous information from the original CM and TL and by SRT investigative task and gathered information in an effort to close cases through the Special Response Team.
ACV: [redacted] Deceased)
AP: Unknown Participant
Other case participants: n/a
Allegations: Abuse Death
Next Steps: Closure
This case was received through intake on 10/18/2022. Currently the case is pending a closing summary then it will be ready for closure. TL [redacted] and CM completed a case conference about this case on this date.

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:	2025-06-03 09:38:00	Contact Method:	
Contact Time:	09:38 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	06/03/2025
Completed date:	06/03/2025	Completed By:	[redacted]

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

Contact Type(s): Case Summary

Contact Sub Type: Closing

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 06/03/2025 09:41 AM Entered By: [redacted]

CASE SUMMARY ACV [redacted]

The Child Protective Services (CPS) investigation was assigned on 10/18/22 concerning the death of custodial Alleged child victim (ACV) [redacted] ACV [redacted] was found deceased while visiting at a relatives residence in [redacted] County, Tennessee on October 11th, 2023. While the police were notified, the Department of Childrens Services (DCS) was not notified until October 18th, 2022. Special investigations Unit (SIU) Case Manager(CM) [redacted] was assigned the investigation as a Priority 1.

Neither abuse nor neglect is suspected in [redacted] death. At the time of his death, it was reported by the doctor said that [redacted] had had an asthma attack and had passed from natural causes. The [redacted] Police Department was notified and met the family at the hospital.

ACV [redacted] was one year old. [redacted] lived with his five siblings. [redacted] who was four years old. [redacted] who was five years old. [redacted] who was seven years old. And [redacted] and [redacted] who were eleven and twelve years old respectively. The Children entered into DCS custody on 7/13/21 through kinship placement with their maternal grandmother, [redacted] in [redacted] County. The children have remained in the maternal grandmothers home since that time.

It was reported the children also visited the paternal grandmother [redacted] on the weekends from Friday through Sunday This arrangement has been ongoing the past 3 months. Ms. [redacted] is not the paternal grandmother of [redacted] but he would still visit the home along with the children. Additionally, it was reported [redacted] had severe asthma requiring the use of a breathing machine and inhalers at times.

On 10/11/22 [redacted] and his brothers were in the care of Ms. [redacted] at her home during Fall break. Ms. [redacted] reported putting [redacted] down to sleep between 9-10pm that night and then checking on him a short time later. It was then that she discovered that he wasnt breathing.

[redacted] suffers from severe asthma and had two inhalers, and his breathing machine that was sent with him. Ms. [redacted] reported she put [redacted] down for bed after giving him a breathing treatment. She went to check on him (time unknown) at this time she noticed he was not breathing. 911 was called and CPR was continued until the paramedics arrived. They took over performing life-performing measures while in-route to [redacted] Hospital. [redacted] was pronounced

Tennessee Department of Children's Services

Case Recording Summary

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

deceased.
Ms. [redacted] stated that she was informed by medical personnel that they believed [redacted] died of natural causes from an asthma attack. An autopsy was requested. She reported no concerns regarding Ms. [redacted] ability to provide care for the child and his needs. Ms. [redacted] reported [redacted] had an asthma attack a month prior that resulted in her taking him to the ER for treatment, but this was the first time that had occurred.
SIU CM [redacted] spoke with the ACVs siblings privately, but separately at [redacted] Elementary School on 10/19/2022.
[redacted] [redacted] (7y/o), [redacted] [redacted] (6 y/o), [redacted] [redacted] (11 y/o), and [redacted] [redacted] (10 y/o). [redacted] was observed privately and reported feeling safe. He stated he is in the 2nd grade and making good grades. When asked how he feels about his brother passing away, he did give a response. [redacted] stated he was asleep at his paternal grandmothers house when his brother passed away. The CM did not observe any marks or bruises on [redacted] during the visit. The CM offered counseling, but he declined.
[redacted] was observed privately and reported feeling safe. He is in the 1st grade. [redacted] stated he was sad about his brother passing away. He did not talk much during the interview. The CM did not observe any marks or bruises on [redacted] during the visit. The CM offered counseling, but he declined.
[redacted] was observed privately and reported feeling safe. She is in the 5th grade and stated she has As, Bs, and a C in science. She reported feeling sad about her brother passing away. [redacted] stated her brother died from asthma. The CM offered counseling to [redacted] but she stated she doesnt want everybody in her business. [redacted] stated she was at her grandmothers house (Ms. [redacted] when her brother passed away. The CM did not observe any marks or bruises on [redacted] during the visit.
[redacted] was observed privately and reported feeling safe. She is in the 4th grade and stated she has As and Bs. She reported feeling sad about her brother passing away. [redacted] stated she picked out her brothers tie, shirt, and pants. She stated her and her brothers favorite color is blue. [redacted] stated her brother passed away from asthma. She stated she was at her grandmothers house (Ms. [redacted] when her brother passed away. The CM offered counseling to [redacted] but she declined.
SIU CM [redacted] interviewed Ms. [redacted] [redacted] at [redacted], [redacted] TN 38116 on 10/19/2022 regarding the allegations in the referral.
Ms. [redacted] stated that she had found out [redacted] died on the night of 10/11/2022. [redacted] [redacted] contacted her and stated he was being rushed to [redacted] Hospital because he was not breathing. She reported that he was upstairs in the room with his mom, dad, and brothers. He was laid down. [redacted] went to check on him and he was not breathing. [redacted] said she did CPR while calling paramedics. She called me between 9:00 and 10:00 p.m.
Ms. [redacted] stated she has been an approved DCS foster parent since January or February 2022. She stated her grandchildren have been in the home with her since July 2021. Per Ms. [redacted] the male siblings go over to [redacted] house Friday-Sunday. She stated that has been occurring for the last 3 months. She stated they were also at [redacted] house for Fall Break. Ms. [redacted] stated [redacted] is not [redacted] grandmother but considers him her grandchild. She stated [redacted] died from severe asthma. Ms. [redacted] stated that she kept his asthma under control. He would have an asthma attack once a month and I would use the breathing machine. In September, she added that he had an asthma attack, and I she took him to [redacted] E.R. because [redacted] was full. Ms. [redacted] did not report any safety concerns of [redacted] being at Ms. [redacted] home.
Attempts were made to contact Ms. [redacted] by telephone and other means for the purpose of obtaining an interview. However, she has not been cooperative in providing an interview to DCS.
The autopsy report was received. The cause of death was listed as "fentanyl toxicity". Toxicological studies performed on postmortem iliac blood detected fentanyl, its metabolite norfentanyl and its precursor/metabolite 4-ANPP. Per medical records fentanyl was not given as part of treatment efforts. The presence of 4-ANPP typically denotes illicitly manufactured fentanyl.
The forensic pathologist also entered "reactive airway disease (asthma), acute bronchitis, and bronchopneumonia as contributing factors". The manner of death was determined as an "accident". The autopsy and other medical treatment records concerning ACV [redacted] have been uploaded into the case file.
SIU CM [redacted] spoke with team leader, [redacted] [redacted] on 12/13/2023 regarding the autopsy results of ACV

Tennessee Department of Children's Services

Case Recording Summary

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

[redacted] She stated the ACV's siblings no longer visit the paternal grandmother, [redacted]
The investigation of [redacted] was presented to the Child Protection Investigative Team on 12/12/2024, via video conference. The following individuals were present during meeting: [redacted] Special Investigations Team Leader, [redacted] Child Advocacy Center, [redacted] Lt. [redacted] Police Department, [redacted] and [redacted] Assistant District Attorney.
The team agreed with the classification of Allegation Substantiated Perpetrator Unknown. The team recommended the case be coordinated with Law Enforcement. Sgt. [redacted] of the Homicide Unit, of the [redacted] Police Department was requested to assist in the investigation.
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 legal custodian/caretaker failure to stop another persons direct action that resulted in the death of the child. Child deaths are always treated as severe abuse.

There is a preponderance of evidence to support the allegations of Abuse Death. The [redacted] Police Department is actively investigating the source of fentanyl responsible for the death of ACV [redacted] However, no one has been identified at this time. Accordingly, this case will be closed and classified as Allegation Substantiated, Unknown for the Abuse Death of ACV [redacted]

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-06-03 07:43:00	Contact Method:	
Contact Time:	07:43 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	06/03/2025
Completed date:	06/03/2025	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: 06/03/2025 10:01 AM Entered By: [redacted]

[redacted] approved this case for closure on this date. All case tasks have been completed. All documents have been uploaded.

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:	2025-04-16 09:00:00	Contact Method:	
Contact Time:	09:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	04/29/2025
Completed date:	04/29/2025	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: 04/29/2025 08:55 AM Entered By: [redacted]

Case Conference Admin
This case was received for completion of case closure tasks on this date of 4/16/2025. TL [redacted] reviewed the case administratively before assignment to the Special Response Team for closure. Case activities are being summarized given previous information from the original CM and TL and by SRT investigative task and gathered information in an effort to close cases through the Special Response Team.
ACV: [redacted] Deceased)
AP: Unknown Participant
Other case participants: n/a
Allegations: Abuse Death
Next Steps: F2F Interviews, Assessments, Closing Case Tasks
This case was received through intake on 10/18/2022. Currently the case is pending a closing summary then it will be ready for closure. TL [redacted] and CM completed a case conference about this case on this date.

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:	2025-03-19 16:46:00	Contact Method:	
Contact Time:	04:46 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	03/19/2025
Completed date:	03/19/2025	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/19/2025 04:47 PM Entered By: [redacted]

Closing case summary has been written and is being approved for completion. Once entered, case will be closed.

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:	2024-12-12 09:30:00	Contact Method:	Video Conference
Contact Time:	09:30 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	12/12/2024
Completed date:	12/27/2024	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	CPIT (Child Protective Investigative Team)		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 12/12/2024 12:44 PM Entered By: [redacted]

The investigation of [redacted] was presented to the Child Protection Investigative Team on 12/12/2024, via video conference due to the ongoing COVID-19 pandemic.

The following individuals were present during meeting: [redacted] Special Investigations Team Leader, [redacted] Child Advocacy Center, [redacted] Lt. [redacted] Police Department, [redacted] and [redacted] Assistant District Attorney.

The team agreed with the classification of Allegation Substantiated Perpetrator Unknown.

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:	2024-09-26 08:58:00	Contact Method:	
Contact Time:	08:58 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	09/26/2024
Completed date:	09/26/2024	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 09/26/2024 08:59 AM Entered By: [redacted]

There are no new updates regarding this investigation.

The investiagtion is ongoing.

The cause of death has been determined (Fentanyl Toxicity) and has been ruled as an accident.

The case coordinated with law enforecment. An attempted home visit was completed on 7/16/2024.

A Tfacts search revealed non-relative Ms. [redacted] has an opened CPS case and has relocated to Texas.

Case will be disccused witht the CPS Director.

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:	2024-08-06 12:16:00	Contact Method:	
Contact Time:	12:16 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	08/06/2024
Completed date:	08/06/2024	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 08/06/2024 12:21 PM Entered By: [redacted]

The investiagtion is ongoing.

The cause of death has been determined (Fentanyl Toxicity) and has been ruled as an accident.

The case coordinated with law enforecment. An attempted home visit was completed on 7/16/2024.

A Tfacts search revealed non-relative Ms. [redacted] has an opened CPS case and has relocated to Texas.

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:	2024-07-16 15:30:00	Contact Method:	Attempted Face To Face
Contact Time:	03:30 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	07/18/2024
Completed date:	07/24/2024	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 07/24/2024 09:51 AM Entered By: [redacted]

Attempted Home Visit

[redacted] TN [redacted]

Attempted home visit completed today. The attempt was unsuccessful.

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:	2023-12-14 10:00:00	Contact Method:	Video Conference
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Other Community Site	Created Date:	04/08/2024
Completed date:	04/08/2024	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	CPIT (Child Protective Investigative Team)		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 04/08/2024 12:30 PM Entered By: [redacted]

Case presented to CPIT on 12/14/2023 to update the team regarding the results of the autopsy. The team recommended the case be coordinated with Law Enforcement (Homicide Unit-Sgt. [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:	2023-12-13 16:42:00	Contact Method:	Attempted Face To Face
Contact Time:	04:42 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	04/08/2024
Completed date:	04/08/2024	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 04/08/2024 01:10 PM Entered By: [redacted]

SIU CM [redacted] attempted a visit to the home of maternal grandmother, [redacted] on 12/13/2024. No one came to the door. The CM left a business card in the door.

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:	2023-12-13 08:29:00	Contact Method:	Attempted Phone Call
Contact Time:	08:29 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	04/08/2024
Completed date:	04/08/2024	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 04/08/2024 01:08 PM Entered By: [redacted]

SIU CM [redacted] attempted to contact the maternal grandmother, [redacted] on 12/13/2023 to notify her of the results of the autopsy. The CM left a voicemail message for a returned phone call.

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:	2023-12-13 08:23:00	Contact Method:	
Contact Time:	08:23 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	04/08/2024
Completed date:	04/08/2024	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 04/08/2024 01:06 PM Entered By: [redacted]

SIU CM [redacted] spoke with team leader, [redacted] on 12/13/2023 regarding the autopsy results of ACV [redacted] TL [redacted] stated the SPG was approved for the maternal grandmother, [redacted] a couple of days ago. She stated the ACV's siblings no longer visit the paternal grandmother, [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:	2023-12-12 19:07:00	Contact Method:	
Contact Time:	07:07 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	04/05/2024
Completed date:	04/05/2024	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: 04/05/2024 03:05 PM Entered By: [redacted]

Autopsy received. Cause of death is listed as "fentanyl toxicity".
Contributing factors: "reactive airway disease (asthma), acute bronchitis, and bronchopneumonia"
Manner of Death: "accident".

Autopsy will be uploaded

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:	2023-08-23 10:30:00	Contact Method:	
Contact Time:	10:30 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	09/07/2023
Completed date:	09/07/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 09/07/2023 11:00 AM Entered By: [redacted]

Case staffing held with [redacted]

The investigation is ongoing. The autopsy 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:	2023-08-18 15:29:00	Contact Method:	
Contact Time:	03:29 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	08/18/2023
Completed date:	08/18/2023	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 08/18/2023 03:30 PM Entered By: [redacted]

Autopsy results are 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:	2023-07-21 16:00:00	Contact Method:	
Contact Time:	04:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	08/18/2023
Completed date:	08/18/2023	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 08/18/2023 03:29 PM Entered By: [redacted]

Autopsy results are 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:	2023-07-20 10:45:00	Contact Method:	
Contact Time:	10:45 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	08/02/2023
Completed date:	08/02/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 08/02/2023 01:51 PM Entered By: [redacted]

The allegation of abuse death is being investigated regarding [redacted]

The investigation is ongoing. The autopsy 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:	2023-06-21 09:45:00	Contact Method:	
Contact Time:	09:45 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	07/03/2023
Completed date:	07/03/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 07/03/2023 02:24 PM Entered By: [redacted]

The allegation of abuse death is being investigated regarding [redacted]

The investigation is ongoing. The autopsy 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:	2023-05-19 10:45:00	Contact Method:	
Contact Time:	10:45 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	06/01/2023
Completed date:	06/01/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 06/01/2023 12:58 PM Entered By: [redacted]

The allegation of abuse death is being investigated regarding [redacted]

The investigation is ongoing.

The autopsy is pending.

Once the autopsy has been received the case manager will need to present the case to CPIT, complete the closing case summary, and send 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:	2023-04-14 10:00:00	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	05/02/2023
Completed date:	05/02/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 05/02/2023 01:29 PM Entered By: [redacted]

The allegation of abuse death is being investigated regarding [redacted]

The investigation is ongoing.

The autopsy is pending.

Once the autopsy has been received the case manager will need to present the case to CPIT, complete the closing case summary, and send 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:	2023-03-31 15:40:00	Contact Method:	
Contact Time:	03:40 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	03/31/2023
Completed date:	03/31/2023	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/31/2023 04:13 PM Entered By: [redacted]

Email sent to the CPIT coordinator to see if LE was assigned to this case.

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:	2023-03-21 10:00:00	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	03/29/2023
Completed date:	03/29/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/29/2023 01:12 PM Entered By: [redacted]

The allegation of abuse death is being investigated regarding [redacted]

The investigation is ongoing.

The autopsy is pending.

Once the autopsy has been received the case manager will need to present the case to CPIT, complete the closing case summary, and send 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:	2023-02-21 11:15:00	Contact Method:	
Contact Time:	11:15 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	03/02/2023
Completed date:	03/02/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/02/2023 04:31 PM Entered By: [redacted]

The allegation of abuse death is being investigated regarding [redacted]

The investigation is ongoing.

The autopsy is pending.

Once the autopsy has been received the case manager will need to present the case to CPIT, complete the closing case summary, and send 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:	2023-01-27 11:00:00	Contact Method:	
Contact Time:	11:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	02/07/2023
Completed date:	02/07/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 02/07/2023 09:48 AM Entered By: [redacted]

The allegation of abuse death is being investigated regarding [redacted]

The investigation is ongoing.

The autopsy is pending.

Once the autopsy has been received the case manager will need to present the case to CPIT, complete the closing case summary, and send 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:	2023-01-03 11:54:00	Contact Method:	
Contact Time:	11:54 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	03/27/2023
Completed date:	03/27/2023	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/27/2023 10:43 AM Entered By: [redacted]

The following medical records were reviewed by DCS Safety nurse, [redacted] on 01/03/2023...

- [redacted] Hospital [redacted] (08/23/2022)
- [redacted] Hospita [redacted] (10/11/2022)
-PCP records

"I have reviewed the attached records for [redacted] I was also assigned this case as part of our regional office child death review so his incident was familiar to me. [redacted] has asthma and was treated for an some respiratory distress 1 hour prior to the call to EMS according to the medical records reviewed. I am curious if the follow up appt with the pediatrician that was scheduled for 09.23.2022 occurred as scheduled? He was seen for a visit the week before (09.16.22) and was treated for his asthma and an upper respiratory infection with follow up to occur a week later. As you know his date of death was 10.11.22. (The 3rd attachment- from the PCP that Georgia sent to me as I was working on my report to central office for child death review.) This poor kiddo had been dealing with asthma from at least 4 months old and probably 2 months old as I saw where he was diagnosed with RSV at that time and I bet asthma was going on as well. There is a strong family history for asthma and unfortunately he suffered from significant asthma as well throughout his short life. He was to the doctor on a regular basis for monitoring and treatment. The grandmother was compliant with seeing the doctor and follow up visits. Including his significant improvement with failure to thrive early on in his life.
I have attached my highlighted notes of his pediatrician visits.
I would like to review his pharmacy records just to prove she was picking up his medications on a routine/regular basis. We will know more when the autopsy returns as to the cause and manner of death but I would not be surprised if it is due to his asthma. He was ALWAYS with a wheeze at his pediatrician visits, it seemed to be his way of life and the grandmother was reporting the medication she was administering to him as appropriate and per the orders she was given."

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	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):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 01/03/2023 02:41 PM Entered By: [redacted]

The allegation of abuse death is being investigated regarding [redacted]

The investigation is ongoing.

The ACV passed away on 10/11/2022 after he was found unresponsive after being put to bed.
The ACV's medical records have been received but the autopsy is pending.
An attempt has been made to speak with [redacted] who is the grandmother of the ACV's siblings.

The case manager will need to follow up with CPIT to see if law enforcement will be assigned, complete an interview with Ms. [redacted] and other family member who were present at the home, follow up with the FSW regarding grief counseling, and send the medical records to the DCS safety nurse 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:	2022-12-09 16:30:00	Contact Method:	
Contact Time:	04:30 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	03/31/2023
Completed date:	03/31/2023	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/31/2023 04:05 PM Entered By: [redacted]

Birth records received from [redacted] Hospital on 12/09/2022.

Patient name: [redacted]
Admit Date: 06/16/2021
Discharge date: 06/22/2021
Attending Physician: [redacted]
Admit Reason: Single liveborn infant, delivered vaginally
Diagnosis: Single liveborn infant, delivered vaginally, Preterm Newborn Gestational Age 35 completed weeks, prematurity without major problems, drug use complicating pregnancy, unspecified trimester

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:	2022-12-09 12:00:00	Contact Method:	
Contact Time:	12:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	03/31/2023
Completed date:	03/31/2023	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/31/2023 04:04 PM Entered By: [redacted]

Medical records (Primary Care Physician) from [redacted] received on 12/09/2022

Well Child Visit- 09/23/2022
Exam findings- normal, Patient still intermittently wheezing. He has started Flovent although pt. had not gotten albuterol as pharmacy did not have it until last night and gave first tx this morning. On amoxicillin with sig improvement in nasal drainage.

Well Child Visit- 09/16/2022
Exam findings- Nose, lips, tongue, gums, pharynx: mucoid secretions b/l
Unlabored breathing, lungs clear to auscultation good air movement with end exp wheezing; no nasal flaring; no signs of resp distress.
Follow up in one week to recheck asthma

Well child Visit- 06/22/2022
Exam Findings- Nose, lips, tongue, gums, pharynx: mild nasal congestion; no nasal flaring.

Well Child Visit- 06/17/2022
Exam findings- Nose, lips, tongue, gums, pharynx: clear rhinorrhea b/l; no oral lesions.
Unlabored breathing, lungs clear to auscultation intermittent productive cough; faint end exp wheeze along mid lung fields; no costal retractions/nasal flaring
Schedule follow up: Wed f/up asthma/vaccine

Well Child Visit: 04/04/2022
Exam Findings- Nasal Drainage: thick, mucoid secretions; Nasal Mucosa: pink.
Unlabored breathing, lungs clear to auscultation referred upper airway nasal congestion. Normal skin inspection and palpation, no lesions, rashes, or masses excoriated dry patches on cheeks.

Tennessee Department of Children's Services

Case Recording Summary

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

Well Child Visit: 03/22/2022
Exam Findings: Rash: erythematous rash with satellite lesions along buttocks.

Well Child Visit: 02/01/2022
Exam findings: Nose, lips, tongue, gums, pharynx: minimal left nasal irritation-mucoid secretions from b/l area. Unlabored breathing, lungs clear to auscultation no wheezing but referred upper airway nasal congestion

Well Child Visit: 01/24/2022
Exam Findings: Nose, lips, tongue, gums, pharynx: scant mucoid secretions b/l. Unlabored breathing, lungs clear to auscultation referred upper airway nasal congestion as well as end exp wheezing along mid posterior lung fields.

Well Child Visit- 01/07/2022
Exam findings- Unlabored breathing, lungs clear to auscultation no signs of increased work of breathing; faint end exp intermittent wheezing noted; no retractions; no nasal flaring

Well Child Visit- 10/18/2021
Exam findings- Nose, lips, tongue, gums, pharynx; nasal congestion noted. Normal otherwise.
Unlabored breathing, lungs clear to auscultation exp wheezing with mild belly breathing; no signs of resp distress; post suctioning with resolution of wheezes; pt. comfortable sleeping on grandmother upright with residual nasal congestion noted although no signs of increased work of breathing.

Well Child Visit- 08/06/2021
Exam findings- Normal

Well Child Visit- 07/28/2021
Exam findings- General Appearance: Thin and small for age

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:	2022-12-08 12:00:00	Contact Method:	
Contact Time:	12:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	03/31/2023
Completed date:	03/31/2023	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/31/2023 04:09 PM Entered By: [redacted]

SIU CM [redacted] emailed Lt. [redacted] and Lt. [redacted] with [redacted] Police Department, Felony Response Unit on 12/08/2022. The CM inquired if Law Enforcement is assigned to the death investigation of ACV [redacted]

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2022-12-08 11:52:00	Contact Method:	
Contact Time:	11:52 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	03/31/2023
Completed date:	03/31/2023	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/31/2023 04:09 PM Entered By: [redacted]

SIU CM [redacted] contacted the grandmother, Ms. [redacted] on 12/08/2022 and offered the family grief counseling. Ms. [redacted] declined the grief counseling. She stated none of the kids have expressed feeling down. Ms. [redacted] stated her and the kids are doing great. The CM inquired about the name of any officers that arrived at the hospital on the night of the ACVs death. Ms. [redacted] stated Lt. [redacted] with felony response came out and Lt. [redacted]. The CM thanked Ms. [redacted] for the information and the call ended.

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:	2022-12-06 12:00:00	Contact Method:	
Contact Time:	12:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	03/31/2023
Completed date:	03/31/2023	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/31/2023 04:08 PM Entered By: [redacted]

Certified letter mailed to paternal grandmother, [redacted] on 12/06/2022 requesting her to contact the CM to schedule an interview.

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:	2022-12-06 09:19:00	Contact Method:	
Contact Time:	09:19 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	03/31/2023
Completed date:	03/31/2023	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/31/2023 04:00 PM Entered By: [redacted]

Phone call to [redacted] regarding records request on 10/24/2022. 2nd request faxed on 12/06/2022.

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:	2022-12-02 12:00:00	Contact Method:	
Contact Time:	12:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	03/31/2023
Completed date:	03/31/2023	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/31/2023 04:06 PM Entered By: [redacted]

Birth records 2nd request emailed on 12/02/2022.

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:	2022-12-02 09:43:00	Contact Method:	
Contact Time:	09:43 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	12/02/2022
Completed date:	12/02/2022	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 12/02/2022 09:57 AM Entered By: [redacted]

[redacted] medical records (death/baptist children's hospital) emailed to DCS Safety Nurse, [redacted] on 12/02/2022 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:	2022-11-15 10:00:00	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	12/09/2022
Completed date:	12/09/2022	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 12/09/2022 11:36 AM Entered By: [redacted]

The allegation of abuse death is being investigated regarding [redacted]

The investigation is ongoing.

The ACV passed away on 10/11/2022 after he was found unresponsive after being put to bed.
The ACV's medical records have been received but the autopsy is pending.
An attempt has been made to speak with [redacted] who is the grandmother of the ACV's siblings.

The case manager will need to follow up with CPIT to see if law enforcement will be assigned, complete an interview with Ms. [redacted] and other family member who were present at the home, follow up with the FSW regarding grief counseling, and send the medical records to the DCS safety nurse 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:	2022-11-04 12:00:00	Contact Method:	
Contact Time:	12:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	03/31/2023
Completed date:	03/31/2023	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/31/2023 04:00 PM Entered By: [redacted]

Death records received from [redacted] Hospital

Patient name: [redacted]
Admit Date: 10/11/2022
Discharge date: 10/12/2022
Attending Physician: [redacted]
Discharge disposition: Deceased
Admit Reason: Cardiac arrest, cause unspecified
Diagnosis: Cardiac arrest, cause unspecified

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:	2022-11-02 14:43:00	Contact Method:	
Contact Time:	02:43 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	03/31/2023
Completed date:	03/31/2023	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/31/2023 04:12 PM Entered By: [redacted]

SIU CM [redacted] attempted to contact the grandmother, [redacted] on 11/02/2022 to schedule an interview. The CM left a voicemail message for a returned phone call.

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:	2022-10-25 13:44:00	Contact Method:	
Contact Time:	01:44 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	03/31/2023
Completed date:	03/31/2023	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/31/2023 04:07 PM Entered By: [redacted]

Medical records received from [redacted] Hospital for [redacted] on 10/25/2022.

Patient: [redacted]
Physician: [redacted], MD
Admit/Discharge date: 08/23/2022
Chief Complaint: Cough, Wheezing
Deep nasal suction with saline performed. Thick pink tinged mucous removed from bilateral nostrils and oropharyngeal airway. Follow up with PCP in 3 days.

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:	2022-10-24 12:12:00	Contact Method:	
Contact Time:	12:12 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	10/24/2022
Completed date:	10/24/2022	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 10/24/2022 12:15 PM Entered By: [redacted]

This referral was assigned to Special Investigations Case Manager [redacted] a priority one on 10/18/2022.
The response time was due by 10/18/2022 2:51 PM [redacted].
Per DCS Policy, Chapter 14, Work Aid 2: It is not required for the DCS Case Manager to observe the deceased child.
The ACV passed away on 10/11/2022 after he was found unresponsive after being put to bed.
CPR was initiated and 911 was called. The ACV was transported to the hospital and was pronounced deceased.
The ACVs siblings have been observed and there were no concerns observed.
The ACVs maternal grandmother has been interviewed and stated the ACV has a history of asthma.
The ACV uses an inhaler and has a breathing machine.
The ACVs funeral services were held on 10/20/2022.
Grief counseling has been offered to the family.
The fast assessment has been completed.
The autopsy is pending.
The 48-hour case debriefing was held on 10/19/2022.
The investigation is ongoing.
The case manager will need to notify CPIT of the referral and follow the recommendations.
Speak with law enforcement-if assigned and obtain a copy of the police report.
Request medical records and send the DCS safety nurse for review.
Speak with the paternal grandmother-Ms. [redacted] and other household members.

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:	2022-10-24 11:14:00	Contact Method:	
Contact Time:	11:14 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	03/31/2023
Completed date:	03/31/2023	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/31/2023 04:10 PM Entered By: [redacted]

SIU CM [redacted] attempted to contact the grandmother, [redacted] on 10/24/2022 to schedule an interview. The CM left a voicemail message for a returned phone call.

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:	2022-10-24 10:30:00	Contact Method:	
Contact Time:	10:30 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	12/02/2022
Completed date:	12/02/2022	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 12/02/2022 09:49 AM Entered By: [redacted]

Birth records and death records requested from [redacted] Hospital on 10/24/2022.

Medical records requested from [redacted] Children's Hospital on 10/24/2022.

PCP records requested from [redacted] on 10/24/2022.

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:	2022-10-20 12:09:00	Contact Method:	
Contact Time:	12:09 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	10/20/2022
Completed date:	10/20/2022	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 10/20/2022 12:38 PM Entered By: [redacted]

FAST Assessment completed. Risk category is rated None. [redacted] has severe asthma; on a recent visit with [redacted] sent over two inhalers and his breathing machine. [redacted] reported that she gave [redacted] his breathing treatment and laid him down for the night; it is unknown which room [redacted] was in, and it is unknown if he was in a crib, Pack n Play, or something else. [redacted] that when she went back in to check on him it looked like he was not breathing. 911 was contacted and someone, Unknown, started CPR. The ambulance arrived and continued CPR on [redacted] before transporting him to [redacted] Hospital. On 10/11/2022, [redacted] was pronounced deceased. There were no marks or bruises on [redacted] body. An autopsy was performed and is pending. Neither abuse nor neglect is suspected in [redacted] death. The investigation is ongoing.

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:	2022-10-19 15:30:00	Contact Method:	
Contact Time:	03:30 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	10/31/2022
Completed date:	10/31/2022	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: 10/31/2022 09:33 AM Entered By: [redacted]

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

The CPS investigation was assigned on 10/18/22 concerning the death of custodial ACV [redacted] (1yo). and his five siblings [redacted] 4yo, [redacted] 5yo, [redacted] 7yo, [redacted] 11yo, and [redacted] 12yo] entered DCS custody on 7/13/21 through kinship placement with their maternal grandmother [redacted] in [redacted] County. The children have remained in the maternal grandmothers home since that. It was reported the children also visit the paternal grandmother [redacted] on the weekends from Friday through Sunday, an arrangement that has been ongoing the past 3 months. Ms. [redacted] is not the paternal grandmother of [redacted] but he would still visit the home along with the children. Additionally, it was reported [redacted] had severe asthma requiring the use of a breathing machine and inhalers at times.

On 10/11/22 [redacted] and his brothers were in the care of Ms. [redacted] at her home during Fall break. Ms. [redacted] reported putting [redacted] down to sleep between 9-10pm that night and then checking on him a short time later and discovering he wasnt breathing. Ms. [redacted] immediately contacted 911 and performed CPR until EMS arrived. [redacted] was transported to [redacted] where he was pronounced deceased. Ms. [redacted] is reporting medical personnel informed her [redacted] died of natural causes from an asthma attack. Autopsy is pending. She reported no concerns of Ms. [redacted] ability to provide care for the child and his needs. There was some delay in Ms. [redacted] being able to make contact with the FSW to report [redacted] death to DCS, but contact efforts were made with the death reported on 10/17/22. Ms. [redacted] reported [redacted] most recent PCP appointment occurred on 9/19/22 at which time he was given COVID and flu shots as well as other shots and the appointment resulted in no concerns or abnormal findings. Ms. [redacted] reported [redacted] had an asthma attack a month prior that resulted in her taking him to the ER for treatment, but this was the first time that had occurred.

CM observed/interviewed the siblings at their school on 10/19/22 with no immediate concerns. CM has interviewed the maternal grandmother at her home and grief counseling services were offered. CM plans to interview the paternal

Tennessee Department of Children's Services

Case Recording Summary

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

grandmother following the funeral [10/20/22] and time allowed to process grief. CPIT was convened and efforts are being made to contact LE assigned to case.

Next Steps:
-- CM will request ACVs birth, PCP, and recent ER record. Records will be reviewed and uploaded to TFACTS. CM will request Safety Nurse consult/review of medical records to ensure ACV caregiver was adhering to any treatment plan concerning asthma.
-- CM will complete interview with paternal grandmother and household members.
-- CM will request all interviews and information/evidence collected by LE within their investigation and review, summarize, and upload what is shared to TFACTS if applicable.
-- CM will document and upload autopsy into TFACTS once received.
-- CM will complete Closing FAST prior to case closure.
-- CM will present findings to the Child Protective Investigative Team (CPIT) for classification review.

Employee Assistance Program (EAP) information and supervisory support was discussed with involved staff.

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:	2022-10-19 13:11:00	Contact Method:	Correspondence
Contact Time:	01:11 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	10/20/2022
Completed date:	10/20/2022	Completed By:	[redacted]

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

Contact Type(s): CPIT (Child Protective Investigative Team)

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 10/20/2022 12:35 PM Entered By: [redacted]

Lanarda Parker
[redacted] Child Advocacy Center
Team Services Data Coordinator
[redacted]

CPIT convened via email correspondence on 10/19/2022. A copy of referral [redacted] has been sent to the Team Services Data Coordinator.

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:	2022-10-19 11:00:00	Contact Method:	
Contact Time:	11:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	10/20/2022
Completed date:	10/20/2022	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 10/20/2022 12:31 PM Entered By: [redacted]

SIU CM [redacted] interviewed Ms. [redacted] at [redacted], [redacted] TN [redacted] on 10/19/2022 regarding the allegations in the referral. Ms. [redacted] stated, I found out [redacted] died on the night of 10/11/2022. [redacted] contacted me and stated he was being rushed to [redacted] Hospital because he was not breathing. He was upstairs in the room with his mom, dad, and brothers. He was laid down. [redacted] went to check on him and he was not breathing. [redacted] said she did CPR while calling paramedics. She called me between 9:00 and 10:00 p.m.

Ms. [redacted] stated she has been a licensed DCS foster parent since January or February 2022. She stated her grandchildren have been in the home with her since July 2021. Per Ms. [redacted] the male siblings go over to [redacted] house Friday-Sunday. She stated that has been occurring for the last 3 months. She stated they were also at [redacted] house for Fall Break. Ms. [redacted] stated [redacted] is not [redacted] grandmother but considers him her grandchild. She stated [redacted] is the paternal grandmother to siblings [redacted] and [redacted]

Ms. [redacted] stated, [redacted] was picked up from the city morgue on Saturday and taken to [redacted] funeral home. I was told the autopsy is pending. I notified the worker, Ms. [redacted] on Wednesday night, October 12th. Her mailbox was full. I called her the next day which was Thursday and sent a text message. I didnt want to leave anything about death on a voicemail or text message. We played phone tag that day. I called her Friday and then again on Monday.

Ms. [redacted] reported that [redacted] last doctors appointment was on September 19, 2022, in which he got a COVID shot, FLU shot, and other routine shots. His doctor is [redacted] at [redacted] on [redacted]. She stated she also got a prescription refilled for 2 inhalers. She reported [redacted] was given 2 puffs every four hours. Ms. [redacted] stated he also had a breathing machine in which was used in case of an emergency. She stated [redacted] died from severe asthma. Ms. [redacted] stated, I kept his asthma under control. He would have an asthma attack once a month and I would use the breathing machine. In September, he had an asthma attack, and I took him to [redacted] E.R. because [redacted] was full.

Ms. [redacted] did not report any safety concerns of [redacted] being at Ms. [redacted] home. Ms. [redacted] supports are

Tennessee Department of Children's Services

Case Recording Summary

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

her sister, [redacted] and daughter, [redacted] She stated [redacted] biological father is [redacted] but he was not involved.

Grief counseling was offered to Ms. [redacted] She stated she will see [redacted] at the funeral home tomorrow and will know how she feels afterwards. The CM informed Ms. [redacted] she can always call the CM if she decides she and the children want grief counseling.

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:	2022-10-19 10:20:00	Contact Method:	Face To Face
Contact Time:	10:20 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	School	Created Date:	10/20/2022
Completed date:	10/20/2022	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Sibling Interview/Observation		
Contact Sub Type:			

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/20/2022 12:27 PM Entered By: [redacted]

SIU CM [redacted] observed 4 y/o sibling, [redacted] at [redacted] Elementary School privately on 10/19/2022. [redacted] is in the Pre-K program. When asking questions, the CM was unable to understand [redacted] answers due to a speech delay. [redacted] was dressed in a Paw Patrol jogger set. He kept pointing to the characters on his shirt. The CM did not observe any marks or bruises [redacted] during the visit.

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:	2022-10-19 09:46:00	Contact Method:	Face To Face
Contact Time:	09:46 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	School	Created Date:	10/20/2022
Completed date:	10/20/2022	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Sibling Interview/Observation		
Contact Sub Type:			

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/20/2022 12:26 PM Entered By: [redacted]

SIU CM [redacted] spoke with the ACVs siblings privately, but separately at [redacted] Elementary School on 10/19/2022. [redacted] (7y/o), [redacted] (6 y/o), [redacted] (11 y/o), and [redacted] (10 y/o).

[redacted] was observed privately and reported feeling safe. He stated hes in the 2nd grade and making good grades. When asked how he feels about his brother passing away, he did give a response. [redacted] stated he was asleep at his paternal grandmothers house when his brother passed away. The CM did not observe any marks or bruises on [redacted] during the visit. The CM offered counseling, but he declined.

[redacted] was observed privately and reported feeling safe. He is in the 1st grade. [redacted] stated he was sad about his brother passing away. He did not talk much during the interview. The CM did not observe any marks or bruises on [redacted] during the visit. The CM offered counseling, but he declined.

[redacted] was observed privately and reported feeling safe. She is in the 5th grade and stated she has As, Bs, and a C in science. She reported feeling sad about her brother passing away. [redacted] stated her brother died from asthma. The CM offered counseling to [redacted] but she stated she doesnt want everybody in her business. [redacted] stated she was at her grandmothers house (Ms. [redacted] when her brother passed away. The CM did not observe any marks or bruises on [redacted] during the visit.

[redacted] was observed privately and reported feeling safe. She is in the 4th grade and stated she has As and Bs. She reported feeling sad about her brother passing away. [redacted] stated she picked out her brothers tie, shirt, and pants. She stated her and her brothers favorite color is blue. [redacted] stated her brother passed away from asthma. She stated she was at her grandmothers house (Ms. [redacted] when her brother passed away. The CM offered counseling to [redacted] but she declined.

Tennessee Department of Children's Services

Case Recording Summary

Case Id:	[redacted]	Case Name:	[redacted] [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:	2022-10-19 09:04:00	Contact Method:	
Contact Time:	09:04 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	10/20/2022
Completed date:	10/20/2022	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 10/20/2022 12:28 PM Entered By: [redacted]

SIU CM [redacted] contacted Ms. [redacted] on 10/19/2022 to find out if she is available for a home visit today at 11:00 a.m. Ms. [redacted] stated she will be available at that time.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2022-10-18 15:35:00	Contact Method:	
Contact Time:	03:35 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	10/20/2022
Completed date:	10/20/2022	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 10/20/2022 12:18 PM Entered By: [redacted]

SIU CM [redacted] attempted a home visit at [redacted], [redacted] TN [redacted] on 10/18/2022. The CM was unable to knock on the door or leave a business card due to the home being gated in.

The CM contacted Ms. [redacted] via phone on 10/18/2022 regarding the allegations in the referral. Ms. [redacted] stated she was picking up the siblings of the ACV from school and running errands for the funeral. She said she has family coming over at 6 p.m. today to prepare for the funeral on Thursday. The grandmother said she understands that the CM need to do my job, but she needs more time. She said the siblings will be at school tomorrow but not Thursday. Ms. [redacted] stated the CM can call her tomorrow to see if she is available for an interview at the home.

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:	2022-10-18 13:34:00	Contact Method:	
Contact Time:	01:34 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	10/20/2022
Completed date:	10/20/2022	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 10/20/2022 12:16 PM Entered By: [redacted]

Special Investigations Unit (SIU) Case Manager (CM) [redacted] attempted to contact the maternal grandmother/foster parent, [redacted] on 10/18/2022. The CM left a voicemail message for a returned phone call.

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:	2022-10-18 09:38:00	Contact Method:	Attempted Face To Face
Contact Time:	09:38 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Resource Home	Created Date:	10/20/2022
Completed date:	10/20/2022	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Good Faith Effort		
Contact Sub Type:	Attempted Home Visit/Home Visit		

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/20/2022 12:15 PM Entered By: [redacted]

Per DCS Policy, Chapter 14, Work Aid 2: It is not required for the DCS Case Manager to observe the deceased child.

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:	2022-10-18 08:33:00	Contact Method:	Phone Call
Contact Time:	08:33 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:		Created Date:	10/20/2022
Completed date:	10/20/2022	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Referent Interview		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 10/20/2022 12:19 PM Entered By: [redacted]

TL [redacted] spoke with the referent on 10/18/2022. The concerns are notated in a separate recording.

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:	2022-10-18 08:33:00	Contact Method:	
Contact Time:	08:33 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:		Created Date:	10/20/2022
Completed date:	10/20/2022	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/20/2022 12:22 PM Entered By: [redacted]

Spoke with Team Leader [redacted]

[redacted] (12), [redacted] (11), [redacted] (7), [redacted] (5), [redacted] (4), and [redacted] (1) went to go visit with [redacted] & [redacted] grandmother who is [redacted] They visit with Ms. [redacted] regularly. [redacted] suffers from severe asthma and two inhalers, and his breathing machine is sent with him. Ms. [redacted] reported she put [redacted] down for bed after giving him a breathing treatment. She went to check on him (time unknown) at this time she noticed he was not breathing. Someone in the home called 911 and someone started CPR. CPR was continued until the paramedics arrived. They took over performing life-performing measures while en-route to [redacted] Hospital. [redacted] was pronounced deceased. This is the only home he has been in since entering care. Ms. [redacted] stated she received a call from Ms. [redacted] on 10/12/2022 but Ms. [redacted] did not leave a voicemail. Ms. [redacted] stated on 10/13/2022 but they played phone tag throughout the day. Ms. [redacted] stated she was in court on 10/13/2022 and then she was off on Friday 10/14/2022. Ms. [redacted] stated received a phone call on 10/14/2022 at 8:50 am informing her of [redacted] death. Ms. [redacted] stated she was busy trying to get things together and it slipped her mind.

Ms. [redacted] visited the home of Ms. [redacted] on 10/17/2022. The children were observed. [redacted] stated she was thinking about her brother, and she misses him. [redacted] was quiet and did not speak. [redacted] was at home because he got sick at school (he gets sick when he eats chicken at school). The other children were observed and appeared to be fine. Ms. [redacted] stated there were a lot of people at the home. The birthmother [redacted] was at the home. She has supervised visits with the children. Everyone is aware of [redacted] condition with asthma and knows how to give him breathing treatments. Ms. [redacted] stated the doctor told her that [redacted] died of a severe asthma attack and died of natural causes.

Ms. [redacted] informed Ms. [redacted] her 24-year-old son died of asthma and her husband died of asthma 2 years ago.

[redacted] was born weighing 6 pounds and stayed in the hospital for 1-2 months. He had a checkup last week and he

Tennessee Department of Children's Services

Case Recording Summary

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

received a flu shot, a vaccination shot, and a COVID shot. She was told to monitor him. She stated he did not develop a fever.

Ms. [redacted] stated the case was transferred to her 4 months ago. She stated Ms. [redacted] has a strong support system and her two daughters often help her with the children. She calls if she needs anything. Ms. [redacted] has no concerns with Ms. [redacted] or her home. She completed a visit in September [redacted] was observed to be smiling and happy. Ms. [redacted] stated she was scheduled to complete a visit this week. She will follow up with the family regarding grief counseling.

Birth mother was substantiated for DEC-she was tested and was positive for Marijuana, Benozdiapine, and Cocaine at [redacted] birth. The drugs were detected in his system, but his meconium was negative. It didnt meet the threshold to be a NAS baby. The mother denied drug use and stated she does not smoke marijuana and went to the store, and someone handed her a bill with a white substance on it. The mother also reported she has surgery for an abscess in November 2020. In January 2021 she was prescribed Percocets, Lortabs, Bilirubin, and Dillaudid. She used pain medication throughout her pregnancy and received prenatal care with Dr. [redacted]

Ms. [redacted] reached out to family members to help assist with the funeral.
The body was released on 10/13/2022 and the autopsy is pending.
The body was released to [redacted] Funeral Home.
There will be a graveside service on 10/20/2022 and private viewing for the family.
Burial will occur at [redacted] Cemetery.

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:	2022-10-17 14:51:00	Contact Method:	
Contact Time:	02:51 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	10/20/2022
Completed date:	10/20/2022	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Well Being		
Contact Type(s):	Case Summary		
Contact Sub Type:	Opening		

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 10/20/2022 12:37 PM Entered By: [redacted]

Initial Case Summary:

Central Intake received the following referral on 10/17/2022 at 2:51 p.m. The investigation was assigned to SIU Case Manager [redacted] as a Priority 1 investigation on 10/18/2022.

ACV: [redacted]
DOB: [redacted]
Adjudication: D/N
Number of Prior SIU Referrals: 0
County of Residence: [redacted]

AP: Unknown
Relationship to ACV:
Number of Prior SIU referrals:
County Of Incident: [redacted]
Placement: [redacted] DCS FH
Allegation: Child Death

Details of Allegation: Although the children are in foster care and are in a kinship placement with [redacted] they also visit with [redacted] at times. [redacted] has severe asthma; on a recent visit with [redacted] sent over two inhalers and his breathing machine. [redacted] reported that she gave [redacted] his breathing treatment and laid him down for the night; it is unknown which room [redacted] was in and it is unknown if he was in a crib, Pack n Play, or something else. [redacted] that when she went back in to check on him it looked like he was not breathing. 911 was contacted and someone, Unknown, started CPR. The ambulance arrived and continued CPR on [redacted] before transporting him to [redacted] Hospital. On 10/11/2022, [redacted] was pronounced deceased. There were no marks or bruises on [redacted] body. An autopsy was performed.

Tennessee Department of Children's Services

Case Recording Summary

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

Neither abuse nor neglect is suspected in [redacted] death. [redacted] reported that the doctor said that [redacted] had had an asthma attack and had passed from natural causes. The [redacted] Police Department was notified and met the family at the hospital. At this time no charges have been placed. There is no information about the living conditions in [redacted] home; the children have visited quite often. The other children are still with [redacted] at her home. There is currently no risk of harm for the other children in the home.

[redacted] death had not been reported until 10/17/2022. The birth mother has been notified; however, it is unknown if his father, Unknown, has been notified. The records from [redacted] autopsy and from the hospital are being requested. There are no reports from Law Enforcement. The responding officers name is unknown. [redacted] reported that [redacted] s home is on [redacted] the DCS Case Manager is going to get the address. The phone number is [redacted]

TFACTS History:

1) [redacted] Investigation, 06/17/2021, ACV: [redacted] AP: [redacted] Allegation: Drug Exposed Child, Classification: ASPS

Initial notification sent to appropriate parties by SIU Reader, [redacted] on 10/18/2022.

Referral sent to Juvenile Court per regional protocol.

All severe abuse referrals will be sent to DAs office per regional protocol.

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: 10/17/2022

Assignment Date: 04/16/2025

Street Adress: [redacted],

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

B. Allegation

#	Children's Name	DOB	Specific Allegation for Each	Alleged Perpetrator's Name	DOB	Classification	Severe Abuse / CSEM	Classified By / Classified
1	[redacted]	[redacted]	Abuse Death	Unknown Participant, Unknown		Allegation Substantiated / Perpetrator Unknown	Yes	[redacted] / 12/12/2024

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: The Child Protective Services (CPS) investigation was assigned on 10/18/22 concerning the death of custodial Alleged child victim (ACV) [redacted] ACV [redacted] was found deceased while visiting at a relatives residence in [redacted] County, Tennessee on October 11th, 2023.

D. Case Workers

Case Worker: [redacted] Date: 12/17/2024

Team Leader: [redacted] Date: 12/20/2024

E. Investigation Summary

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

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

[redacted] suffers from severe asthma and had two inhalers, and his breathing machine that was sent with him. Ms. [redacted] reported she put [redacted] down for bed after giving him a breathing treatment. She went to check on him (time unknown) at this time she noticed he was not breathing. 911 was called and CPR was continued until the paramedics arrived. They took over performing life-performing measures while in-route to [redacted] Hospital. [redacted] was pronounced deceased.

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

The autopsy report was received. The cause of death was listed as "fentanyl toxicity". Toxicological studies performed on postmortem iliac blood detected fentanyl, its metabolite norfentanyl and its precursor/metabolite 4-ANPP. Per medical records fentanyl was not given as part of treatment efforts. The presence of 4-ANPP typically denotes illicitly manufactured fentanyl. The forensic pathologist also entered "reactive airway disease (asthma), acute bronchitis, and bronchopneumonia as contributing factors". The manner of death was determined as an "accident".

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

Department of Children's Services

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

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

At the time of his death, it was reported by the doctor said that [redacted] had had an asthma attack and had passed from natural causes. The [redacted] Police Department was notified and met the family at the hospital. Attempts were made to contact Ms. [redacted] by telephone and other means for the purpose of obtaining an interview. However, she has not been cooperative in providing an interview to DCS.

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

There were not witnesses to the death. All individuals who were associated with this case and present the night the incident occurred were not cooperative with DCS.

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

There is a preponderance of evidence to support the allegations of Abuse Death. The [redacted] Police Department is actively investigating the source of fentanyl responsible for the death of ACV [redacted] However, no one has been identified at this time. Accordingly, this case will be closed and classified as Allegation Substantiated, Unknown for the Abuse Death of ACV [redacted]

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