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

Intake

Intake ID: [redacted]

Intake Taken By: [redacted]

Intake Date/Time: 03/30/2023 07:43 AM [redacted]

Track Assigned: Investigation

Priority Assigned: 1

Screened By: [redacted]

Date Screened: 04/06/2023

Investigation

Investigation ID: [redacted]

First County/Region Assigned: [redacted]

Date/Time Assigned : 04/06/2023 02:45 PM

First Team Leader Assigned: [redacted]

Date/Time Assigned : 04/06/2023 12:00 AM

First Case Manager Assigned: [redacted]

Date/Time Assigned : 04/06/2023 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:

Referent Phone Number: [redacted]

Type of Contact: I-3 Phone

Notification: None

Narrative: NON-CUSTODIAL CHILD DEATH

Family Case IDs: [redacted]
Associated Case IDs: [redacted]

Family Case ID Detailed History:
Open Court Custody/FSS/FCIP None
Closed Court Custody JJ Custody [redacted] /10-27-05 to 8-19-06
SS Custody [redacted] 11-13-14 to 11-26-14, [redacted] 6-3-02 to 2-24-06
SS Custody [redacted] 8-31-06 to 3-6-08

Pending: None
Awaiting Screening: None
Submitted: None

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Open CPS: None
Substantiated: [redacted]/ASPS/2-28-23
[redacted]/DEC/[redacted]ASPS/8-10-22
[redacted]/DEC, PHA AUPU, SEE ASPS/[redacted]/8-20-08
[redacted]/ENN, SRPI AUPU, ENN ASPU/[redacted]5-22-03
[redacted]/DEI, DEC ASPS, ENN - AUPU/[redacted]/2-18-10

Death: None
Screen Outs: [redacted]

History (not listed above):
ASMT [redacted]/DEC/SR/2-24-23
ASMT [redacted]/MDM/NSN/10-31-22
INV [redacted]/DEC/AUPU/3-18-21
ASMT [redacted]/PYA/SR/7-11-19
INV [redacted]/DEC, PHA, ENN/AUPU/7-26-18
INV [redacted]/SEE/AUPU/12-17-17
ASMT [redacted]/ENN, PHA/NSN/10-11-17
ASMT [redacted]/DEC, ENN, ABN/NSN/6-16-17
ASMT [redacted]/PHA, DEC/SR/1-26-17
ASMT [redacted]/DEC/SR&R/11-15-16
INV [redacted]/PHA/AUPU/1-28-16
ASMT [redacted]/PYA SR&A, LOS NSN/10-27-15
ASMT [redacted]/PYA/NSN/5-26-15
ASMT [redacted]/DEC/NSN/11-29-16
INV [redacted]/ENN, DEC, SRPI/AUPU/6-27-06
INV [redacted]/Minor PHA/AUPU/9-19-00
INV [redacted]/Minor PHA/9-19-00
INV [redacted]/Medical Neglect/AUPU/1-13-00
ASMT [redacted]/ENN/NSN/10-30-14
INV [redacted]/DEI, ENN/AUPU/8-28-13
INV [redacted]/DEC, ENN/AUPU/8-28-13
ASMT [redacted]/DEI/SR&R/8-28-13
INV [redacted]/DEC/AUPU/6-25-13
ASMT [redacted]/LOS, DEC/NSN/3-13-09
ASMT [redacted]/PHA/NSN/8-20-08
SIU [redacted]/NUN, LOS/AUPU/11-15-06
INV [redacted]/EDN/UTC/11-15-06
INV [redacted]/ENN/AUPU/9-2-05
INV [redacted]/LOS, PHA/AUPU/6-30-04
INV [redacted]/Physical Neglect/AUPU/5-22-03
INV [redacted]/Minor PHA, Other/AUPU/7-23-01
INV [redacted]/Physical Neglect/AUPU/7-23-01
INV [redacted]/Physical Neglect, Minor PHA/AUPU/5-15-00

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

Reporter's name/relationship: [redacted].

-Child/Family Identification and Relationship Introduction Paragraph:
[redacted] (1) lived with her father ([redacted] unknown age), mother ([redacted] unknown age),

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

and two siblings (unknown names and ages), in [redacted] County.

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

-Please provide a brief summary of the concerns and why DCS is needed to respond immediately.
On 3-30-23 at 7:14 am [redacted] officers were dispatched to [redacted], [redacted] TN in response to an unresponsive child. As officers were enroute, dispatch notified them that [redacted] and [redacted] were putting [redacted] in the car and taking her to [redacted] Hospital. Officers stopped the family's vehicle on [redacted] in [redacted] Officers did chest compressions on [redacted] for five minutes before EMS workers [redacted] (driver) [redacted] and [redacted] arrived. The EMS workers worked on [redacted] before putting her in the ambulance and transporting her to [redacted] Hospital, where they continued to work on her. Dr. [redacted] declared [redacted] time of death at 8:27 am. The cause of death is unknown. It is also unknown if abuse or neglect is suspected as the cause of death, as the incident is currently under investigation. [redacted] body is at [redacted] Hospital Emergency Room [redacted] Detectives [redacted] (contact information unknown), and [redacted] (contact information unknown) are currently at the hospital. [redacted] and [redacted] were spoken with and stated [redacted] bumped her head on 3-29-23 around 7:00 pm. Neither parent provided any details on the incident, stated what [redacted] bumped her head on, or explained how the incident occurred. According to [redacted] and [redacted] the last time they saw [redacted] breathing was around 3:00 am, when they went back to bed. When [redacted] and [redacted] woke up at 7:00 am they noticed that [redacted] was lifeless. It is unknown where the other children were located during the time of the incident and the home has not been observed. It is unknown if there are any current issues with domestic violence, drug/alcohol abuse, or mental health concerns that pose a risk to the children. DCS has been involved with the family in the past. The police report number is unknown.

-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: CM tried to collect additional information, but the officer asked to "speed up the process" because he had to get back into the hospital.
Screener Notation: [redacted] is also listed as [redacted] in TFACTS.

Emailed/Paged CPSI On Call: [redacted] Region [redacted] county was emailed at 2:18 pm on 4-6-23. [redacted] received the email at 2:20 pm, [redacted].

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

Additional info provided by TC [redacted]
After review of the scene and interviews with the family, there does not appear to be signs of abuse or neglect that would indicate the need to assign a case at this time.
A timeline was completed with the family who stated [redacted] (the deceased) fell while playing with a cousin last night around 7 pm causing a small blue/purple bruise on the right side of her forehead. [redacted] continued to play with her cousins after the fall and the family did not report any concerns. The paternal grandmother witnessed the fall and also did not have concerns. The injury appeared consistent with the explanation provided by the family [redacted] went to bed as normal and woke up around 3 am for a feeding and then went back to sleep. The parents, [redacted] and two siblings were sleeping in the same bed which appeared to be a king size.
A walk through of the home was completed by CM [redacted] and Detective [redacted] No evidence of drugs were seen in the home and neither of the parents appeared to be impaired.
Initial thinking is the cause of death could be a rollover/smothering incident or a medical issue. [redacted] was born with a heart murmur possibly caused by prenatal drug exposure. [redacted] also had a "finger prick" blood sugar test completed and the reading was 220. An autopsy is being completed to determine the exact cause of death, but it does not appear to be abuse or neglect at this time.

Per SDM: Investigation, P1. Intake is being Submitted per CAH Director [redacted]. [redacted], TL on 4-6-23 @ 2:18 pm

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Participant(s)

Name: [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:

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Name: [redacted]

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

SSN: | Race: White | Age: Deceased

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

Deceased Date: 03/30/2023

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact:

Contact Type: UNKNOWN

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: | 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

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:	2024-04-04 14:35:00	Contact Method:	
Contact Time:	02:35 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	04/04/2024
Completed date:	04/04/2024	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 04/04/2024 01:29 PM Entered By: [redacted]

The Department received a referral with an allegation of Abuse Death and DEC (Non-Severe) with the alleged child victim (ACV) listed as [redacted] on Abuse Death and [redacted] (5) and [redacted] (3) on DEC. and the alleged perpetrators (AP) listed as Unknown on Abuse Death. [redacted] Father and [redacted] Mother on DEC.

After completing the Investigation, there was not a preponderance of evidence to substantiate the allegations of Abuse Death as evidenced by: on March 30, 2023, [redacted] was found unresponsive at the family home. [redacted] was taken to the hospital where she was pronounced deceased. CM conducted interviews of the family. It was determined that the family of five were all sleeping in the same bed the night leading up to the death of [redacted] The final autopsy revealed that the cause of death was undetermined. CM presented the case to the [redacted] County Child Protective Investigative Team (CPIT) on July 12, 2023. The CPIT team agreed with the classification of AUPU.

After completing the Investigation, there was a preponderance of evidence to substantiate the allegations of DEC as evidenced by: Ms. [redacted] and Mr. [redacted] were drug screened and tested positive for methamphetamine during the investigation. Due to the parents drug use, CM added allegations of Drug Exposed Child to the case. Mr. [redacted] and Ms. [redacted] admitted using but noted that they were not in a caretaking role of the children when they used. [redacted] and [redacted] were removed and placed with the paternal grandparents, [redacted] and [redacted] Ms. [redacted] and Mr. [redacted] have supervised visitation, and both are working services. The case has been transferred to Family Support Services (FSS) to monitor the family's progress. The classification for the allegation of DEC are ASPS.

TL [redacted] has reviewed and approved this case for closure. All documentation has been completed, and all information and decisions have been reviewed. Notifications will be made to Juvenile Court and District Attorney per DCS policy.

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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:	2024-04-04 10:11:00	Contact Method:	
Contact Time:	10:11 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	04/04/2024
Completed date:	04/04/2024	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: 04/04/2024 09:12 AM Entered By: [redacted]

The Department of Childrens Services received a referral on March 30, 2023, for an allegation of Abuse Death regarding Alleged Child Victim (ACV) [redacted] (AKA: [redacted] (Date of Birth: [redacted]; age 1). The Alleged Perpetrator (AP) was listed as unknown. This investigation was initially held for further review before being assigned to Child Protective Services Investigations Case Manager (CM) [redacted] on April 6, 2023. This case was worked in conjunction with Detective [redacted] of the [redacted] County Sheriffs Office.
The Household consisted of [redacted] (23/Mother to ACV), [redacted] (24/Father to ACV), [redacted] (5/Brother to ACV), [redacted] (2/Brother to ACV) and [redacted] (1/ACV).
On March 30, 2023, officers were dispatched to the home in response to an unresponsive child. As law enforcement was enroute, they were notified that the parents were in the car, driving the child to [redacted] Hospital. Law enforcement stopped the family on Highway [redacted] Officers conducted chest compressions for five minutes before Emergency Medical Services (EMS) arrived. EMS transported [redacted] to [redacted] Hospital where they continued to attempt to revive [redacted] Dr. [redacted] declared [redacted] time of death at 8:27am. The cause of death was unknown. The parents were spoken with, and they reported that [redacted] hit her head on March 29, 2023 around 7:00 pm. The parents reported that they last saw [redacted] breathing around 3:00am and they went back to bed. The parents reported that when they woke up around 7:00am, they noticed that [redacted] was lifeless.
On April 12, 2024, CM [redacted] interviewed [redacted] birth mother. She reported that on March 29, 2023, the family went to sleep around 1am. At around 4:00 am, [redacted] woke up. [redacted] head was on Mr. [redacted] right arm. [redacted] bottle had a little milk left in it. [redacted] rolled over and went to sleep on top of two quilt blankets. Ms. [redacted] woke up around 7:30am and [redacted] was at the foot of the bed. Ms. [redacted] reported she was going to scoop up [redacted] and put her next to Mr. [redacted] when she noticed [redacted] arm was limp when it normally moves. Ms. [redacted] stated she attempted to do CPR on the bed. Mr. [redacted] brother, ([redacted] Resides next door), ran in and picked [redacted] up. [redacted] laid [redacted] on the left side of the couch and attempted CPR. Another brother of Mr. [redacted] ([redacted] Resides next door), came in and took them to his truck. Ms. [redacted] reported that she called 911 and Mr. [redacted] (father to ACV) ran to his mothers residence. Mr. [redacted] drove, Mr. [redacted] (father to ACV) and Ms. [redacted] to meet the ambulance on the side of the road. Law enforcement attempted CPR as well and they took her to [redacted] Hospital. Ms. [redacted] consented to a drug screen, and she was positive for THC.

Tennessee Department of Children's Services

Case Recording Summary

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

On April 12, 2023, CM [redacted] spoke with [redacted] birth father. He reported that after he got home from work, he stayed up watching television until 4:00 am and [redacted] woke up at that time. [redacted] had some milk left in her bottle, so he gave it to her and went to sleep. Mr. [redacted] reported that he woke up to Ms. [redacted] screaming and telling him to get help. He stated that when Ms. [redacted] called 911 and they told her it would be 45 minutes before they could reach them. Mr. [redacted] brothers, [redacted] and [redacted] gave [redacted] CPR. Mr. [redacted] took them to the hospital and met the ambulance on the way. The officer tried to do CPR. The officer tried first and then the ambulance arrived. Mr. [redacted] denied her being sick or congested.

On March 31, 2023, an autopsy was completed on ACV [redacted] by [redacted] M.D., Regional Forensic Center, [redacted] County, [redacted] TN. The autopsy states the following: there was a bruise on the right side of the forehead that was not life threatening. There were no internal injuries. No significant natural disease was seen. The vitreous electrolytes were within normal range. Blood and cerebrospinal fluid cultures were negative for microorganisms, and the nasopharyngeal swab was negative for viral organisms. Toxicology was negative for alcohol and drugs. Although no definitive cause of death was identified, the possibility of an un-diagnosed natural cause or non-natural cause, such as asphyxia, cannot be excluded. Therefore, the cause of death is undetermined, and the manner of death is classified as undetermined.

On July 12, 2023, CPSI [redacted] presented this case to the [redacted] County Child Protective Investigative Team (CPIT). The details and evidence of the investigation were discussed with all members present and it was determined that the recommended classification should be Allegation Unsubstantiated Perpetrator Unsubstantiated (AUPU) for the allegation of Abuse Death.

Present for CPIT:

Detective [redacted] County Sheriffs Office
[redacted] - CAC Director
[redacted] - Forensic Interviewer
[redacted] - CAC Victim Advocate
[redacted] - [redacted] District Attorneys Office
[redacted] County Juvenile Court Team Member

Per DCS Policy Wok Aide 1 Section G:

1. Child Death:

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.

On November 28, 2023, CM [redacted] went to the family home, to see the family. CM [redacted] performed urine drug screens on Ms. [redacted] and Mr. [redacted] Ms. [redacted] admitted that she has relapsed and is using methamphetamine. Ms. [redacted] tested positive for amphetamine, methamphetamine, and THC. Mr. [redacted] also admitted to using methamphetamine, though not with Ms. [redacted] Mr. [redacted] tested positive for amphetamine, methamphetamine and MDMA. CM [redacted] completed an Immediate Protection Agreement (IPA) placing the children in the care of paternal grandparents, [redacted] and [redacted] while Ms. [redacted] and Mr. [redacted] complete services to address their drug use.

On November 29, 2023. CM [redacted] completed a Child and Family Team Meeting (CFTM). Mr. [redacted] and Ms. [redacted] are to only have supervised visits with the children. Mr. and Mrs. [redacted] are also to complete an alcohol and drug assessment,

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Case Recording Summary

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

complete the recommendations, attend parenting classes.

CM [redacted] filed in court to place the children in the custody of [redacted] and [redacted] Mr. [redacted] and Ms. [redacted] have been working their services and have been testing negative on random drug screens. The case has been transferred to Family Support Services.

Due to the parents drug use, CM [redacted] added allegations of Drug Exposed Child to the case. The ACVs are listed as [redacted] and [redacted] and the APs are Ms. [redacted] and Mr. [redacted] Due to the significant drug use impacting their ability to parent, the allegations are classified as Allegation Substantiated, Perpetrator Substantiated against Ms. [redacted] and Mr. [redacted]

There is preponderance of evidence that supports the substantiation for the allegation of Drug Exposed Child. The case is closed as allegation substantiated, perpetrator Substantiated for Drug Exposed Child against APs [redacted] and [redacted] regarding ACVs [redacted] and [redacted]

There is not a preponderance of evidence that supports the substantiation for the allegation of Abuse Death. This case will be closed as Allegation Unsubstantiated/Perpetrator Unsubstantiated for Abuse Death with an Unknown Alleged Perpetrator.

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:	2024-04-04 10:00:00	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	04/04/2024
Completed date:	04/04/2024	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 04/04/2024 09:27 AM Entered By: [redacted]

CM [redacted] had a discussion with FSW [redacted] that the CPS case is closing. FSW [redacted] acknowledged and noted that she will continue to work with the family.

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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:	2024-03-07 16:30:00	Contact Method:	Face To Face
Contact Time:	04:30 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	03/26/2024
Completed date:	03/26/2024	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	ACV Interview/Observation,Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/26/2024 02:26 PM Entered By: [redacted]

3/7/24 FSW completed a HV and the custodian reported that the parents were going to classes tonight at [redacted] They were not present. FSW spoke to the custodians, and they reported everything is going well and the children are doing well. The custodian reported they have missed because the car was not running, and they just got it fixed today. FSW asked how the parents are doing and the custodian reported they are doing really well and working. FSW asked if they have any concerns with drug use. They reported no they do not have any concerns, and [redacted] the custodian keeps a good eye on them and the kids. The custodian showed FSW they got a new stove, deep freezer, and couch. They are still working to get the last remaining bugs in the home cleaned out. They reported they have sprayed, and they are going to bomb soon when everyone is out of the house. They want to make the Livingroom bigger.
The custodian reported that [redacted] ([redacted] Goes by [redacted] went to a dr appointment, and they talked to them about him being nervous and scared to go to school or leave. The DR started him with therapy, and they will do that there at the DR office at [redacted] They will start at the end of the month and go once a week. The Dr wants to do this before trying any types of medications. Both children are caught up on vaccines. [redacted] was sick with the stomach bug, but they called the DR and gave him sprite and he got better quickly. The DR told them a stomach bug was going around. Both kids have Tenn Care. [redacted] and [redacted] need dentist appointments. They have gone to [redacted] in the past. FSW advised to get them appointments. The custodian reported she would do that. FSW asked if [redacted] has any needs and she reported no he has been well.
FSW attempted to speak to [redacted] & [redacted] in private, but they do not speak to FSW and are shy at times. [redacted] told FSW about taking naps. Both children sat with the custodians and appeared to be bonded as the custodians cared for them. FSW asked them if they have enough food and the custodians reported yes and they are getting ready to butcher a pig. Thats why they have the deep freezer now.
FSW asked the custodians to scale progress and they reported a 10. They reported safety a 10. The custodian reported that the parents are doing well but that [redacted] does need to try counseling he needs someone to talk to and that he talks to her. She reported that [redacted] is thinking about counseling to help with the grief from the death of their youngest daughter. The mother has attended some trauma/ individual sessions.
FSW will follow up with parents about services and attendance.

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

The children's uncles came in while FSW was present to visit. FSW observed the children appear to be bonded with them. They played with uncles and hugged.
[redacted] & [redacted] advised they are following the court ordered visitation. The family lives on one large compound in separate houses.

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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:	2024-02-15 09:30:00	Contact Method:	Face To Face
Contact Time:	09:30 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Court	Created Date:	02/27/2024
Completed date:	02/27/2024	Completed By:	[redacted]

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

Contact Type(s): Court Hearing

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 02/27/2024 10:33 AM Entered By: [redacted]

Court was held on this date for the family. The order remains in place that the children stay in the care of [redacted] and [redacted] Ms. [redacted] and Mr. [redacted] are actively working services with [redacted] FSS is to remain in place but can close out before the next court date. A review date was set for May 16th at 9:30am. Ms. [redacted] and Mr. [redacted] stipulated to improper supervision due to drug use.

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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:	2024-02-05 16:00:00	Contact Method:	Face To Face
Contact Time:	04:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	02/27/2024
Completed date:	02/27/2024	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	ACV Interview/Observation,Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 02/27/2024 10:34 AM Entered By: [redacted]

2/5/24 [redacted] HV FSW completed a HV with GAL [redacted] at the family home on this day. The mother [redacted] and father [redacted] were present. Also present were custodians [redacted] & [redacted] FSW asked the parents if they went to [redacted] and they reported they could not go last week due to work but they are going this week. FSW asked them to let FSW know what days they plan to go. The mother advised that [redacted] who they call [redacted] has anxiety over going to school and displays behiors of being nervous and scared. FSW advised her to follow up with his pediatrician to address this. [redacted] will have to start school in the fall this year. FSW asked they can talk about school and wait for the bus with the other children to get him used to this prior. FSW also advised if he needs extra help in school that can be accommodated for him as well. The family wants to homeschool but may not have high school diplomas. They have concerns about it. FSW advised in her expiernce it was hard for many to homeschool over COVID and school being out. FSW reported that it is a very important time while he is learning to read and write. Also homeschool program can cost money. The family does not have a plan right now. The mother reported that the child has never been without the family so that may be a cause of it. The mother reported no delays from the child. [redacted] was asleep and he did not wake up while FSW was present. FSW was unable to speak to him in private.

FSW attempted to speak to [redacted] and he does not respond to FSW. He curled up behind his mother and appeared to be shy. FSW was unable to speak to him in private. The home was picked up and clean. The home was observed with some cockroaches. The family advised that they have been repainting and pulling up base boards and treating so they have aggravated them. They are working with using pest control supplies and other methods.

FSW went over the NCPP with the steps the parents are required and others they may need or want. The parents agreed to continue working with DCS, services, and are completing drug screes. The family agreed to follow all court orders and understand supervised visits.

Both children have an upcoming appointment to get shots and they will be up to date. The family is working at the [redacted] and they also received food stamps. The family has Tenn Care as well. The custodians reported no concerns and reported the parents are doing well and following visitation guidelines. The family advised they provide supervision of the children constantly due to having a saw mill. Parents live on a farm and have animals as well. FSW observed food in the home.

Tennessee Department of Children's Services

Case Recording Summary

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

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2024-01-31 14:45:00	Contact Method:	
Contact Time:	02:45 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	01/31/2024
Completed date:	01/31/2024	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: 01/31/2024 01:49 PM Entered By: [redacted]

CM and TL participated in an FSS transfer meeting on 1/9/24 with the [redacted] Region FSS TL and CM. CPS CM and FSS CM completed the shared home visit on 1/23/24. The FSS case is now open. TL and CM are waiting on final approval of the closing summary before the CPS case can be closed out.

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:	2024-01-23 16:00:00	Contact Method:	Face To Face
Contact Time:	04:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	01/24/2024
Completed date:	01/24/2024	Completed By:	[redacted]

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

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

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 01/24/2024 11:07 AM Entered By: [redacted]

CM [redacted] and FSW [redacted] went to the family home on an announced visit to conduct the FSS transfer meeting. FSW [redacted] completed paperwork with Ms. [redacted] Mr. [redacted] and Mrs. [redacted] CM [redacted] performed drug screens on Ms. [redacted] and Mr. [redacted] Both parties were negative for all substances. Ms. [redacted] apologized for missing classes last week at [redacted] The family was unable to get out of their driveway due to the ongoing winter weather. Ms. [redacted] stated that they will be doing their individual sessions this week at [redacted] as part of their recommendations. The family had just got home from work. Mrs. [redacted] stated that the parents are doing very well. No concerns were noted with the children at this time. The children appeared healthy and well bonded with the family. FSW [redacted] explained the FSS case and process. No safety concerns were noted at this time.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2024-01-23 16:00:00	Contact Method:	Face To Face
Contact Time:	04:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	02/15/2024
Completed date:	02/15/2024	Completed By:	[redacted]

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

Contact Type(s): ACV Interview/Observation

Contact Sub Type:

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 02/15/2024 06:22 PM Entered By: [redacted]

CM [redacted] and FSW [redacted] went to the family home on an announced visit to conduct the FSS transfer meeting. FSW [redacted] completed paperwork with Ms. [redacted] Mr. [redacted] and Mrs. [redacted] CM [redacted] performed drug screens on Ms. [redacted] and Mr. [redacted] Both parties were negative for all substances. Ms. [redacted] apologized for missing classes last week at [redacted] The family was unable to get out of their driveway due to the ongoing winter weather. Ms. [redacted] stated that they will be doing their individual sessions this week at [redacted] as part of their recommendations. The family had just got home from work. Mrs. [redacted] stated that the parents are doing very well. No concerns were noted with the children at this time. The children appeared healthy and well bonded with the family. FSW [redacted] explained the FSS case and process. No safety concerns were noted at this time.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2024-01-04 15:58:00	Contact Method:	Phone Call
Contact Time:	03:58 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	01/05/2024
Completed date:	01/05/2024	Completed By:	[redacted]

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

Contact Type(s): Parent/Caretaker Interview

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 01/05/2024 11:22 AM Entered By: [redacted]

CPSI [redacted] reached out via phone call to Mrs. [redacted] Mrs. [redacted] stated that the family is doing well and the parents are doing great. Mrs. [redacted] stated that they went to their class as well. CPSI asked to speak with Ms. [redacted] Ms. [redacted] got on the phone. Ms. [redacted] stated that things are going well. Ms. [redacted] stated that they completed their A&D assessments today and start classes tonight at 5pm. CPSI noted that a home visit would be conducted next week. CPSI thanked them for their 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:	2023-12-28 10:50:00	Contact Method:	
Contact Time:	10:50 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	12/28/2023
Completed date:	12/28/2023	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 12/28/2023 09:53 AM Entered By: [redacted]

CM will complete an FSS referral to work with the family per Director [redacted] and TC [redacted] guidance.

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:	2023-12-19 11:00:00	Contact Method:	Face To Face
Contact Time:	11:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	12/19/2023
Completed date:	12/19/2023	Completed By:	[redacted]

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

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

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 12/19/2023 10:57 AM Entered By: [redacted]

CPSI [redacted] went to the family home to check in with the family. Ms. [redacted] was outside. Ms. [redacted] stated that she and Mr. [redacted] stayed home today due to not feeling well. Ms. [redacted] stated that things were going well. [redacted] was inside eating cantaloupe. [redacted] was inside the home and came outside as well. [redacted] was playing on Ms. [redacted] phone. Both of the kids appeared healthy with no marks or bruises noted. CPSI drug screened Mr. [redacted] and Ms. [redacted] They were negative for all substances. No safety concerns were noted at this time. CPSI provided Ms. [redacted] with [redacted] contact information again for her to reschedule their assessments. CPSI thanked them for their 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:	2023-12-18 14:36:00	Contact Method:	Phone Call
Contact Time:	02:36 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	12/19/2023
Completed date:	12/19/2023	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 12/19/2023 07:06 AM Entered By: [redacted]

CPSI [redacted] contacted Mrs. [redacted] via phone call. CPSI asked how things were going. Mrs. [redacted] stated that things are going really well with the parents. Mrs. [redacted] stated that she has no concerns of them currently using. Mrs. [redacted] stated that she was in conversation with Ms. [redacted] and it seems like the removal needed to happen for Ms. [redacted] to get back on track. CPSI asked about seeing the kids. Mrs. [redacted] stated that she has them with her at work currently. Mrs. [redacted] stated that Ms. [redacted] and Mr. M. [redacted] have started working there as well for money for the kids Christmas' gifts. CPSI asked if Ms. [redacted] was nearby and she stated yes. CPSI spoke with Ms. [redacted] Ms. [redacted] stated that their A&D assessments were scheduled for last Wednesday at 4:30p but they didn't get off work until 6p so they missed it. Ms. [redacted] stated that she still needs to reschedule it for them. CPSI expressed the importance of getting that rescheduled and making progress with the program. Ms. [redacted] acknowledged. Ms. [redacted] stated that they are going to try and schedule it for 12/27 so they can continue working for money for the boys' Christmas. Ms. [redacted] stated that Mr. [redacted] currently has a high grade fever and will be going to the doctor tomorrow. Ms. [redacted] stated that she can pass a drug screen. CPSI thanked her for her time and spoke with Mrs. [redacted] again. Mrs. [redacted] stated that she would leave the children with [redacted] tomorrow for CPSI to come see the boys. Mrs. [redacted] noted that the parents wouldn't be there as they would be at work. CPSI thanked her for her 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:	2023-12-07 09:30:00	Contact Method:	Face To Face
Contact Time:	09:30 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Court	Created Date:	12/11/2023
Completed date:	12/18/2023	Completed By:	[redacted]

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

Contact Type(s): Court Hearing

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 12/11/2023 10:35 AM Entered By: [redacted]

A preliminary hearing was held on this date. Ms. [redacted] and Mr. [redacted] waived their right to a hearing. Mr. [redacted] and Ms. [redacted] agreed to work services. [redacted] was excused from any further hearings. [redacted] was appointed as the GAL. [redacted] was appointed to represent Ms. [redacted] was appointed to represent Mr. [redacted] An adjudication status was set for 02/15/2024.

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:	2023-11-29 15:00:00	Contact Method:	Face To Face
Contact Time:	03:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	12/19/2023
Completed date:	12/19/2023	Completed By:	[redacted]

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

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

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 12/19/2023 06:56 AM Entered By: [redacted]

CPSI [redacted] went back to the home to complete paperwork and drug screens with [redacted] and [redacted] Both Mrs. and Mr. [redacted] were negative for all substances on their drug screens. The removal packet was completed with Mr. and Mrs. [redacted] Ms. [redacted] and Mr. [redacted] sat on the couch during the visit. The children played around the home and outside. CPSI explained the process and noted that she would be in touch.

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:	2023-11-28 16:11:00	Contact Method:	Face To Face
Contact Time:	04:11 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	12/19/2023
Completed date:	12/19/2023	Completed By:	[redacted]

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

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

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 12/19/2023 06:53 AM Entered By: [redacted]

CPSI [redacted] went to the family home on an unannounced visit. CPSI [redacted] spoke with Mr. [redacted] and Ms. [redacted] and explained that drug screens were needed. Ms. [redacted] stated that she would fail for methamphetamine. Ms. [redacted] stated that she is unsure about Mr. [redacted] as they don't use together. Ms. [redacted] stated that she doesn't want to lose the kids. Ms. [redacted] stated that she uses away from the house. Ms. [redacted] consented to a drug screen where she was positive for amphetamine, methamphetamine, and THC. Mr. [redacted] consented to a drug screen where he was positive for amphetamine, methamphetamine and MDMA. CPSI [redacted] staffed with LI [redacted] and an IPA was completed with the paternal grandparents, [redacted] and [redacted] were playing inside of the home and eating. CPSI explained that Mr. [redacted] and Ms. [redacted] can only have supervised visits with the children and cannot remain in the home. The family acknowledged. CPSI discussed services with Mr. [redacted] and Ms. [redacted] CPSI thanked them for their 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:	2023-11-27 11:26:00	Contact Method:	Face To Face
Contact Time:	11:26 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	11/27/2023
Completed date:	11/27/2023	Completed By:	[redacted]

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

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

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 11/27/2023 11:59 AM Entered By: [redacted]

CPSI [redacted] went to the family home on an unannounced visit to see the family. [redacted] was running around the house without a shirt on. He appeared clean and healthy. [redacted] was still asleep in bed with Mr. [redacted] He woke up briefly when CPSI entered the room with Ms. [redacted] Ms. [redacted] stated that things are good. The family had food, electricity and running water. The paternal grandfather was present along with a family friend and paternal uncle. No concerns were noted at this time.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2023-11-22 13:20:00	Contact Method:	
Contact Time:	01:20 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	11/22/2023
Completed date:	11/22/2023	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 11/22/2023 12:22 PM Entered By: [redacted]

CM is scheduled to see the family on 11/27/23. CM will continue to meet with the family monthly until the case has been approved for closure. CM has already talked with the family about grief counseling and services and has declined such services at this time.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2023-10-27 16:00:00	Contact Method:	
Contact Time:	04:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	11/17/2023
Completed date:	11/17/2023	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 11/17/2023 03:07 PM Entered By: [redacted]

The Case Manager's closing case summary with the Team Leader and Team Coordinator revisions was sent to Director [redacted] 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:	2023-10-05 14:47:00	Contact Method:	Face To Face
Contact Time:	02:47 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	10/12/2023
Completed date:	10/12/2023	Completed By:	[redacted]

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

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

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/12/2023 11:39 AM Entered By: [redacted]

CPSI [redacted] went to the family home on an unannounced visit. Mr. [redacted] was outside working on a truck. [redacted] was playing around the truck. [redacted] appeared dirty as he was playing outside in the dirt. CPSI did not observe any marks or bruises on him. Mr. [redacted] father, [redacted] came to the home. CPSI [redacted] asked where Ms. [redacted] and [redacted] were. Mr. [redacted] stated that they were inside the home. Mr. [redacted] took CPSI [redacted] inside the home. Mrs. [redacted] came out of the bedroom and she had a towel on her head. Mrs. [redacted] stated that she just got home from getting vegetables so she was dirty. Mr. [redacted] got Ms. [redacted] from another bedroom. Ms. [redacted] came out with [redacted] who was playing with his cars. He appeared healthy with no marks or bruises observed. [redacted] would not speak with CPSI despite CPSI attempting to speak with him. Mrs. [redacted] stated that they started him in Kindergarten but it was unsuccessful so they pulled him out. Mrs. [redacted] stated that they were waiting another year for him to start. Ms. [redacted] stated that she received the autopsy about a month ago and she was upset that in it, it states that Det. [redacted] expressed that the home was dirty. Ms. [redacted] asked what CPSI's version of the autopsy said. CPSI [redacted] explained that the manner of death was classified as undetermined. Ms. [redacted] stated that she called the autopsy center multiple times and they told her that suffocation could not be ruled out but they believed it was more likely a heart attack. CPSI [redacted] offered services to the family but they declined the need for any at this time. The home had food, electricity and running water. CPSI thanked them for their 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:	2023-09-29 16:00:00	Contact Method:	
Contact Time:	04:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	10/06/2023
Completed date:	10/06/2023	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 10/06/2023 04:23 PM Entered By: [redacted]

CM has presented this case to [redacted] County CPIT and received the autopsy report back. CM will prepare the closing case summary and submit it to TL by 10/15/23 so that TL can review and begin the approval process in order to close the 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:	2023-09-05 15:01:00	Contact Method:	
Contact Time:	03:01 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	09/29/2023
Completed date:	09/29/2023	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/29/2023 09:10 AM Entered By: [redacted]

CPSI [redacted] requested records from Emergency Medical Services (EMS) again on this date. This was received and 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:	2023-08-02 15:00:00	Contact Method:	
Contact Time:	03:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	08/14/2023
Completed date:	08/14/2023	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 08/14/2023 10:32 AM Entered By: [redacted]

Today, this case was presented to the Child Fatality Review Team (CFRT). The case was discussed in detail and they reported the cause and manner of death is undetermined. The case was presented to [redacted] County CPIT on 7/12/23 and the CPIT team agreed with the classification of AUPU. CM will prepare and submit the closing case summary to TC [redacted] to begin the review process.

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:	2023-07-12 09:00:00	Contact Method:	Face To Face
Contact Time:	09:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	10/05/2023
Completed date:	10/05/2023	Completed By:	[redacted]

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

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

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/05/2023 08:07 AM Entered By: [redacted]

CPIT Presentation:

This case was presented to [redacted] County CPIT on 07/12/2023.

Participating Members:
Det. [redacted] County Sheriffs Office
[redacted] Judicial District Attorneys Office
[redacted] Juvenile Court
[redacted] CAC
[redacted] CAC
[redacted] - CAC

CPSI [redacted] and LI [redacted] discussed this case, and based on the evidence gathered during the course of the investigation, it was determined that the classification should be allegation unsubstantiated/perpetrator unsubstantiated. This classification decision was presented to CPIT, and the majority agreed with the classification decision.

The team made the following recommendations: None.

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:	2023-07-06 11:18:00	Contact Method:	
Contact Time:	11:18 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	10/05/2023
Completed date:	10/05/2023	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/05/2023 08:10 AM Entered By: [redacted]

CPSI [redacted] received the final autopsy on this date for [redacted] The autopsy results were as followed:

At autopsy, there was a bruise on the right side of the forehead that was not life threatening. There were no internal injuries. No significant natural disease was seen. The vitreous electrolytes were within normal range. Blood and cerebrospinal fluid cultures were negative for microorganisms, and the nasopharyngeal swab was negative for viral organisms. Toxicology was negative for alcohol and drugs. Although no definitive cause of death was identified, the possibility of an un-diagnosed natural cause or non-natural cause, such as asphyxia, cannot be excluded. Therefore, the cause of death is undetermined, and the manner of death is classified as undetermined.

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:	2023-07-06 11:00:00	Contact Method:	
Contact Time:	11:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	08/10/2023
Completed date:	08/10/2023	Completed By:	[redacted]
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 08/10/2023 06:57 AM Entered By: [redacted]

Autopsy received via email and submitted to the team. CM and TL to update all notes, present to CPIT and submit final closing summary for review and approval. Upload all documents which maybe outstanding.

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:	2023-05-31 16:00:00	Contact Method:	
Contact Time:	04:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	06/19/2023
Completed date:	06/19/2023	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 06/19/2023 03:02 PM Entered By: [redacted]

This case will remain open until the autopsy report comes back and then the case can be presented to CPIT.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2023-04-14 09:00:00	Contact Method:	
Contact Time:	09:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	05/14/2023
Completed date:	05/14/2023	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 05/14/2023 08:32 PM Entered By: [redacted]

4/10/2023 8:58 AM [redacted]

TL [redacted] and CM [redacted] were notified by Health Unit/Safety Nurse Consultant, [redacted], that [redacted], Director of Nursing, will be requesting the autopsy from the Medical Examiner and as soon as it is received, it will be sent to us by OCS 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:	2023-04-12 11:07:00	Contact Method:	Face To Face
Contact Time:	11:07 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	10/12/2023
Completed date:	10/12/2023	Completed By:	[redacted]

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

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

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/12/2023 11:22 AM Entered By: [redacted]

Initial Contact with Family:

Date: 04/12/2023
Time: 11:07am
Location: Family Home

Household Composition:
[redacted] Birth Mother [redacted]
ACV [redacted]
Birth Father [redacted]
Brother [redacted]
Brother [redacted]

Family Address: [redacted] TN [redacted]

Family Contact Information: [redacted]

CPSI met with the family to discuss the concerns, assess for safety, and determine what the next steps will be.

Documentation of Contact:

Child Protective Services Investigator (CPSI) [redacted] went to the family home on an unannounced visit. The mother, [redacted] was present. Also present was the birth father, [redacted] and the children, [redacted] and [redacted]

Tennessee Department of Children's Services

Case Recording Summary

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

Extended family members also came in and out of the home.

CPSI [redacted] spoke with Ms. [redacted] privately. Ms. [redacted] stated that [redacted] was born with a heart murmur. Ms. [redacted] stated that no follow up has been needed regarding the heart murmur. Ms. [redacted] stated that [redacted] was eating what everyone else ate. Ms. [redacted] stated that [redacted] was still on the bottle. Ms. [redacted] stated that [redacted] drank 1% milk, apple juice and Hawaiian Punch. Ms. [redacted] stated that [redacted] slept in the pack-n-play until about a month and a half ago. Ms. [redacted] stated that it stayed up against the wall in their bedroom. Ms. [redacted] stated that all of the family members slept in the queen bed and they slept sideways to have more room. Ms. [redacted] stated that the only injury [redacted] suffered was hitting her head on the bathroom door near the toilet but she didnt cry. Ms. [redacted] stated that [redacted] and [redacted] [redacted] are [redacted] parents.

Ms. [redacted] stated that on March 29, 2023, she woke up between 9:30am-10:45am. Ms. [redacted] stated that she got clothes on and made waffles or noodles. Ms. [redacted] stated that she helped Mr. [redacted] mother, [redacted] [redacted] move stuff from one trailer to another. Ms. [redacted] stated that in the afternoon, some of the guys through the lumber business got into a fight. Ms. [redacted] stated that Mrs. [redacted] called the police. Ms. [redacted] stated that law enforcement showed up. Ms. [redacted] stated that [redacted] was sitting outside in a green chair. Ms. [redacted] stated that they stayed down at Mrs. [redacted] residence and ate dinner. Ms. [redacted] stated that [redacted] was playing with her cousins that were over. Ms. [redacted] stated that they went home around 7pm where they played for a bit longer with [redacted] and [redacted] (child) [redacted] Ms. [redacted] stated that [redacted] went home around 10pm and Ms. [redacted] went home around 11:30pm. Ms. [redacted] stated that she swept the floor after they left. Ms. [redacted] stated that [redacted] played the whole time. Ms. [redacted] stated that she got all three kids bathed, fixed [redacted] a bottle and got them dressed for bed. Ms. [redacted] stated that they went to sleep around 1am. Ms. [redacted] stated that at almost 4am, [redacted] woke up. Ms. [redacted] stated that [redacted] head was on Mr. [redacted] right arm. Ms. [redacted] stated that her bottle had a little milk left in it. Ms. [redacted] stated that [redacted] rolled over and went to sleep on top of two quilt blankets. Ms. [redacted] stated that when she woke up around 7:30am, [redacted] was at the foot of the bed. Ms. [redacted] stated that she scooped her up and was going to put her next to Mr. [redacted] Ms. [redacted] stated that her arm was limp when it normally moves. Ms. [redacted] stated that she tried to do CPR on the bed. Ms. [redacted] stated that Mr. [redacted] brother, [redacted] [redacted] ran in and picked [redacted] up. Ms. [redacted] stated that [redacted] [redacted] laid her on the left side of the couch and tried CPR. Ms. [redacted] stated that another brother of Mr. [redacted] [redacted] [redacted] came in and took them to his truck. Ms. [redacted] stated that she called 911 and Mr. [redacted] ran to his mothers residence. Ms. [redacted] stated that [redacted] [redacted] drove him, Mr. [redacted] and Ms. [redacted] to meet the ambulance on Highway [redacted] on the side of the road. Ms. [redacted] stated that law enforcement attempted CPR as well and they took her to [redacted] Hospital. Ms. [redacted] consented to a drug screen and she was positive for THC.

CPSI [redacted] spoke with [redacted] at the home. Ms. [redacted] stated that she was at their residence the night before and things seemed fine. Ms. [redacted] stated that [redacted] was happy and dancing. Ms. [redacted] stated that they were making TikToks. Ms. [redacted] denied any problems. Ms. [redacted] daughter, [redacted] was unable to be interviewed due to just having surgery.

[redacted] [redacted] and [redacted] [redacted] were not present and were not able to be located or reached at this time.

CPSI [redacted] spoke with a family friend [redacted] who had visited the home the night prior. Mr. [redacted] stated that he had just come up to the home to shower. Mr. [redacted] stated that the kids were in bed and they were watching television and talking. Mr. [redacted] denied seeing anything out of the normal.

CPSI [redacted] spoke with [redacted] [redacted] Mr. [redacted] stated that on March 29, 2023, he woke up maybe around 7am. Mr. [redacted] stated that he thinks [redacted] woke up. Mr. [redacted] stated that they were in the living room and breakfast was made and ate. Mr. [redacted] stated that he left for work around 10am and came back around 6pm. Mr. [redacted] stated that he was in and out of the home throughout the day. Mr. [redacted] stated that [redacted] was playing with rocks outside of a home. Mr. [redacted] stated that when he went home, Ms. [redacted] and the kids were present. Mr. [redacted] stated that Mr. [redacted] came to the house and showered. Mr. [redacted] stated that they ate dinner at his mothers residence. Mr. [redacted] stated that [redacted] ate one hot dog. Mr.

Tennessee Department of Children's Services

Case Recording Summary

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

[redacted] stated that he stayed up watching television until 4am. Mr. [redacted] stated that [redacted] woke up at 4am. Mr. [redacted] stated that [redacted] had some milk left in her bottle so he gave it to her. Mr. [redacted] stated that in bed from left to right they laid in the following order: Ms. [redacted] Mr. [redacted] and [redacted] Mr. [redacted] stated that he kissed her and went to sleep. Mr. [redacted] stated that he woke up to Ms. [redacted] screaming and telling him to get help. Mr. [redacted] stated that Ms. [redacted] called 911 and they told her it would be 45 minutes before they could reach them. Mr. [redacted] stated that his brothers [redacted] and [redacted] gave [redacted] CPR. Mr. [redacted] stated that [redacted] took them to the hospital and met the ambulance on the way. Mr. [redacted] stated the officer tried to do CPR. Mr. [redacted] stated that the officer tried first and then the ambulance arrived. Mr. [redacted] denied her being sick or congested. Mr. [redacted] stated that they usually go to bed around 8p-9pm. CPSI [redacted] attempted to do a drug screen while at the home but Mr. [redacted] was unable to provide a specimen. Mr. [redacted] did not appear under the influence of anything at this time.

CPSI [redacted] spoke with [redacted] at the residence. Mrs. [redacted] stated that the family had come over for dinner. Mrs. [redacted] stated that [redacted] ate a hot dog and played. Mrs. [redacted] denied any injuries occurring. Mrs. [redacted] stated that the family went home. Mrs. [redacted] stated that she was woken the next day to be told about [redacted] being unresponsive. No additional information was reported.

CPSI [redacted] observed [redacted] and [redacted] The boys appeared healthy. [redacted] would not speak with CPSI [redacted] and [redacted] was not able to be interviewed due to his age. The kids appeared dirty from playing outside without shoes on and digging in the dirt. CPSI [redacted] did not observe any marks or bruises on them at this time. No safety concerns were noted.

The following strengths were identified: The family has an abundance of informal supports.

The following needs/concerns were identified: [redacted] passed away due to unknown circumstances.

The plan to address the concerns identified above includes the following: CPSI [redacted] will continue to investigate.

In order to assist the family in addressing the concerns/harm factors, the family listed the following people as informal supports: The family uses extended family and friends as supports.

Worker observations: CPSI [redacted] observed the home to have food, electricity and running water. The family moved to a trailer down from their original home. The children have everything they need.

CPSI thoroughly explained and reviewed the information contained in CS-0050, Case Intake Packet Documents Verification, and obtained the appropriate initials and signatures.
The information within the packet and reviewed with the parent/caregiver is as follows:
Clients Rights Handbook
Notification of Equal Access to Programs and Services and Grievance Procedures
Notice of Privacy Practices
In addition to the forms provided, CPSI inquired as to if the child(ren) were affiliated with a Native American Tribe.

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:	2023-04-10 07:27:00	Contact Method:	
Contact Time:	07:27 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	10/05/2023
Completed date:	10/05/2023	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/05/2023 08:20 AM Entered By: [redacted]

CPSI [redacted] faxed off for medical records from [redacted] Hospital on this date for [redacted]

9:51am - CPSI [redacted] received the medical records from [redacted] Hospital. The records include [redacted] primary care visit records as well. The records reflect that [redacted] had been see at the doctor's regularly with no concerns noted.

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:	2023-04-10 07:25:00	Contact Method:	
Contact Time:	07:25 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	10/05/2023
Completed date:	10/05/2023	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/05/2023 08:21 AM Entered By: [redacted]

CPSI [redacted] faxed off for records from [redacted] County Emergency Medical Services (EMS) on this date for [redacted]

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2023-03-30 10:05:00	Contact Method:	Face To Face
Contact Time:	10:05 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Hospital	Created Date:	04/11/2023
Completed date:	04/11/2023	Completed By:	[redacted]

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

Contact Type(s): Initial ACV Face To Face

Contact Sub Type:

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 04/11/2023 09:05 AM Entered By: [redacted]

Per Department of Children's Services (Work Aid 2), it is not necessary for CPS Case Manager to view the body of a deceased child. The child was identified as [redacted] by law enforcement.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2023-03-30 07:56:00	Contact Method:	Phone Call
Contact Time:	07:56 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	04/11/2023
Completed date:	04/11/2023	Completed By:	[redacted]

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

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

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 04/11/2023 09:24 AM Entered By: [redacted]

CPIT Convened:

[redacted] County Child Protective Investigate Team (CPIT) was convened on March 30, 2023 with Det. [redacted] with [redacted] County Sheriffs Office. The District Attorneys Office is notified of all severe abuse cases per local protocol within three days of the referral. Upon classification, the District Attorneys Office is notified at the monthly CPIT meeting.

Next Steps: To meet Det. [redacted] at [redacted] Hospital.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2023-03-30 07:50:00	Contact Method:	
Contact Time:	07:50 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	04/11/2023
Completed date:	04/11/2023	Completed By:	[redacted]

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

Contact Type(s): Case Summary

Contact Sub Type: Opening

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 04/11/2023 09:21 AM Entered By: [redacted]

Initial Case Summary Death

This case was assigned to Child Protective Service Investigator (CPSI) [redacted] by Lead Investigator (LI) [redacted] The allegation is Abuse Death. This case was assigned as a Child Death. The alleged perpetrators are listed as unknown. The response is due on March 31, 2023 at 08:43am [redacted]. The case was assigned to the Investigation track. DCS policy Work Aid 1 (E) defines the following criteria for Child Neglect Death:

1. Child Death

Child death is defined as:
Any unexplained death of a child when the cause of death is unknown or pending an autopsy report.

Any child death caused by abuse or neglect resulting from the parent or caretakers failure to stop another persons direct action that resulted in the death of the child. Child deaths are always treated as severe child abuse.

Any child death caused by abuse or neglect resulting from the parent or caretakers to stop another persons direct action that resulted in the death of the child.

HOUSEHOLD COMPOSITION AND RELATIONSHIP TO ACV(S)
[redacted] Birth Mother
[redacted] Birth Father
[redacted] Brother
[redacted] Brother

ENTER SUMMARY OF REFERRAL
-Child/Family Identification and Relationship Introduction Paragraph:

Tennessee Department of Children's Services

Case Recording Summary

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

[redacted] (1) lived with her father ([redacted] unknown age), mother ([redacted] unknown age), and two siblings (unknown names and ages), in [redacted] County.

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

-Please provide a brief summary of the concerns and why DCS is needed to respond immediately.
On 3-30-23 at 7:14 am [redacted] officers were dispatched to [redacted], [redacted] TN in response to an unresponsive child. As officers were enroute, dispatch notified them that [redacted] and [redacted] were putting [redacted] in the car and taking her to [redacted] Hospital. Officers stopped the family's vehicle on Hwy [redacted] in [redacted] Officers did chest compressions on [redacted] for five minutes before EMS workers [redacted] (driver) [redacted] and [redacted] arrived. The EMS workers worked on [redacted] before putting her in the ambulance and transporting her to [redacted] Hospital, where they continued to work on her. Dr. [redacted] declared [redacted] time of death at 8:27 am. The cause of death is unknown. It is also unknown if abuse or neglect is suspected as the cause of death, as the incident is currently under investigation. [redacted] body is at [redacted] Hospital Emergency Room [redacted] Detectives [redacted] (contact information unknown), and [redacted] (contact information unknown) are currently at the hospital. [redacted] and [redacted] were spoken with and stated [redacted] bumped her head on 3-29-23 around 7:00 pm. Neither parent provided any details on the incident, stated what [redacted] bumped her head on, or explained how the incident occurred. According to [redacted] and [redacted] the last time they saw [redacted] breathing was around 3:00 am, when they went back to bed. When [redacted] and [redacted] woke up at 7:00 am they noticed that [redacted] was lifeless. It is unknown where the other children were located during the time of the incident and the home has not been observed. It is unknown if there are any current issues with domestic violence, drug/alcohol abuse, or mental health concerns that pose a risk to the children. DCS has been involved with the family in the past. The police report number is unknown.
DCS and/or other history: The family has previous/no previous history with the Department.

December 2022
Investigation ID: [redacted]
ACV: [redacted] and [redacted]
Allegation: Drug Exposed Child
Alleged Perpetrator: [redacted]
Classification: Services Recommended

February 2022
Investigation ID: [redacted]
ACV: [redacted]
Allegation: Drug Exposed Child
Alleged Perpetrator: [redacted]
Classification: Allegation Substantiated/Perpetrator Substantiated

January 2021
Investigation ID: [redacted]
ACV: [redacted]
Allegation: Drug Exposed Child
Alleged Perpetrator: [redacted]
Classification: Allegation Unsubstantiated/Perpetrator Unsubstantiated

NEXT STEPS: To speak with Detective (Det.) [redacted] with [redacted] County Sheriff's Office.

Department of Children's Services

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

A. Investigation

Case Name: [redacted]

Investigation ID: [redacted]

Referral Date: 03/30/2023

Assignment Date: 11/27/2023

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]	Drug Exposed Child	[redacted]	[redacted], 12:00 AM	Allegation Substantiated / Perpetrator Substantiated	No	[redacted] / 02/09/2024
2	[redacted]	[redacted]	Drug Exposed Child	[redacted]	[redacted], 12:00 AM	Allegation Substantiated / Perpetrator Substantiated	No	[redacted] / 02/09/2024
3	[redacted]	[redacted]	Drug Exposed Child	[redacted]	[redacted]0, 12:00 AM	Allegation Substantiated / Perpetrator Substantiated	No	[redacted] / 02/09/2024
4	[redacted]	[redacted]	Drug Exposed Child	[redacted]	[redacted], 12:00 AM	Allegation Substantiated / Perpetrator Substantiated	No	[redacted] / 02/09/2024
5	[redacted]	[redacted]	Abuse Death	Unknown Participant [redacted]		Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[redacted] / 10/05/2023

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: Due to the parent's drug use, CM [redacted] added allegations of Drug Exposed Child to the case. The ACVs are listed as [redacted] and [redacted] and the AP's are Ms. [redacted] and Mr. [redacted] Due to the significant drug use impacting their ability to parent, the allegations are classified as Allegation Substantiated, Perpetrator Substantiated against Ms. [redacted] and Mr. [redacted]

There is not a preponderance of evidence that supports the substantiation for the allegation of Abuse Death. This case will be closed as Allegation Unsubstantiated/Perpetrator Unsubstantiated for Abuse Death with an Unknown Alleged Perpetrator.

D. Case Workers

Case Worker: [redacted]

Date: 02/09/2024

Team Leader: [redacted]

Date: 02/09/2024

Department of Children's Services

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

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

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:

Per Department of Children's Services (Work Aid 2), it is not necessary for CPS Case Manager to view the body of a deceased child. The child was identified as [redacted] by law enforcement.

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

CPSI [redacted] received the final autopsy on this date for [redacted] The autopsy results were as followed:

At autopsy, there was a bruise on the right side of the forehead that was not life threatening. There were no internal injuries. No significant natural disease was seen. The vitreous electrolytes were within normal range. Blood and cerebrospinal fluid cultures were negative for microorganisms, and the nasopharyngeal swab was negative for viral organisms. Toxicology was negative for alcohol and drugs. Although no definitive cause of death was identified, the possibility of an un-diagnosed natural cause or non-natural cause, such as asphyxia, cannot be excluded. Therefore, the cause of death is undetermined, and the manner of death is classified as undetermined.

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

There was no perpetrator identified to be interviewed at this time.

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

-Child/Family Identification and Relationship Introduction Paragraph:
[redacted] (1) lived with her father ([redacted] unknown age), mother ([redacted] unknown age), and two siblings (unknown names and ages), in [redacted] County.

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

-Please provide a brief summary of the concerns and why DCS is needed to respond immediately.
On 3-30-23 at 7:14 am [redacted] officers were dispatched to [redacted], [redacted] TN in response to an unresponsive child. As officers were enroute, dispatch notified them that [redacted] and [redacted] were putting [redacted] in the car and taking her to [redacted] Hospital. Officers stopped the family's vehicle on Hwy [redacted] in [redacted] Officers did chest compressions on [redacted] for five minutes before EMS workers [redacted] [redacted] (driver) [redacted] [redacted] and [redacted] [redacted] arrived. The EMS workers worked on [redacted] before putting her in the ambulance and transporting her to [redacted] Hospital, where they continued to work on her. Dr. [redacted] [redacted] declared [redacted] time of death at 8:27 am. The cause of death is unknown. It is also unknown if abuse or neglect is suspected as the cause of death, as the incident is currently under investigation. [redacted] body is at [redacted] Hospital Emergency Room [redacted] Detectives [redacted] [redacted] (contact information unknown), and [redacted] [redacted] (contact information unknown) are currently at the hospital. [redacted] and [redacted] were spoken with and stated [redacted] bumped her head on 3-29-23 around 7:00 pm. Neither parent provided any details on the incident, stated what [redacted] bumped her head on, or explained how the incident occurred. According to [redacted] and [redacted] the last time they saw [redacted] breathing was around 3:00 am, when they went back to bed. When [redacted] and [redacted] woke up at 7:00 am they noticed that [redacted] was lifeless. It is unknown where the other children were located during the time of the incident and the home has not been observed. It is unknown if there are any current issues with domestic violence, drug/alcohol abuse, or mental health concerns that pose a risk to the children. DCS has been involved with the family in the past. The police report number is unknown.

-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

Department of Children's Services

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

Case Name : [redacted]

Investigation ID: [redacted]

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

The Department of Children's Services received a referral on March 30, 2023, for an allegation of Abuse Death regarding Alleged Child Victim (ACV) [redacted] (AKA: [redacted] (Date of Birth: [redacted] age 1). The Alleged Perpetrator (AP) was listed as unknown. This investigation was initially held for further review before being assigned to Child Protective Services Investigations Case Manager (CM) [redacted] on April 6, 2023. This case was worked in conjunction with Detective [redacted] of the [redacted] County Sheriff's Office.
The Household consisted of [redacted] (23/Mother to ACV), [redacted] (24/Father to ACV), [redacted] (5/Brother to ACV), [redacted] (2/Brother to ACV) and [redacted] (1/ACV).
On March 30, 2023, officers were dispatched to the home in response to an unresponsive child. As law enforcement was enroute, they were notified that the parents were in the car, driving the child to [redacted] Hospital. Law enforcement stopped the family on Highway 68. Officers conducted chest compressions for five minutes before Emergency Medical Services (EMS) arrived. EMS transported [redacted] to [redacted] Hospital where they continued to attempt to revive [redacted] Dr. [redacted] declared [redacted] time of death at 8:27am. The cause of death was unknown. The parents were spoken with, and they reported that [redacted] hit her head on March 29, 2023 around 7:00 pm. The parents reported that they last saw [redacted] breathing around 3:00am and they went back to bed. The parents reported that when they woke up around 7:00am, they noticed that [redacted] was lifeless.
On April 12, 2024, CM [redacted] interviewed [redacted] birth mother. She reported that on March 29, 2023, the family went to sleep around 1am. At around 4:00 am, [redacted] woke up. [redacted] head was on Mr. [redacted] right arm. [redacted] bottle had a little milk left in it. [redacted] rolled over and went to sleep on top of two quilt blankets. Ms. [redacted] woke up around 7:30am and [redacted] was at the foot of the bed. Ms. [redacted] reported she was going to scoop up [redacted] and put her next to Mr. [redacted] when she noticed [redacted] arm was limp when it normally moves. Ms. [redacted] stated she attempted to do CPR on the bed. Mr. [redacted] brother, [redacted] Resides next door), ran in and picked [redacted] up. [redacted] laid [redacted] on the left side of the couch and attempted CPR. Another brother of Mr. [redacted] Resides next door), came in and took them to his truck. Ms. [redacted] reported that she called 911 and Mr. [redacted] (father to ACV) ran to his mother's residence. Mr. [redacted] drove, Mr. [redacted] (father to ACV) and Ms. [redacted] to meet the ambulance on the side of the road. Law enforcement attempted CPR as well and they took her to [redacted] Hospital. Ms. [redacted] consented to a drug screen, and she was positive for THC.
On April 12, 2023, CM [redacted] spoke with [redacted] birth father. He reported that after he got home from work, he stayed up watching television until 4:00 am and [redacted] woke up at that time. [redacted] had some milk left in her bottle, so he gave it to her and went to sleep. Mr. [redacted] reported that he woke up to Ms. [redacted] screaming and telling him to get help. He stated that when Ms. [redacted] called 911 and they told her it would be 45 minutes before they could reach them. Mr. [redacted] brothers, [redacted] and [redacted] gave [redacted] CPR. Mr. [redacted] took them to the hospital and met the ambulance on the way. The officer tried to do CPR. The officer tried first and then the ambulance arrived. Mr. [redacted] denied her being sick or congested.
On March 31, 2023, an autopsy was completed on ACV [redacted] by [redacted] M.D., Regional Forensic Center, [redacted] County, [redacted] TN. The autopsy states the following: "there was a bruise on the right side of the forehead that was not life threatening. There were no internal injuries. No significant natural disease was seen. The vitreous electrolytes were within normal range.

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

Tennessee Department of Children's Services

FAST 2.0 Assessment Summary Report

Event Type: CPS Case	**Assessment Date: 04/06/2023**
Assessment Type: SAFETY	**CPS Case ID:** [redacted]

OVERVIEW

Safety Level: Immediate Intervention Not Recommended	**Assessed at Location:** In the Home
Event Start Date: 04/04/2024	**Last Assessed Date:**
Assessment Status: Approved	**Assessor:** [redacted]
Date Approved: 05/19/2023	**Approver:** [redacted]

PARTICIPANTS

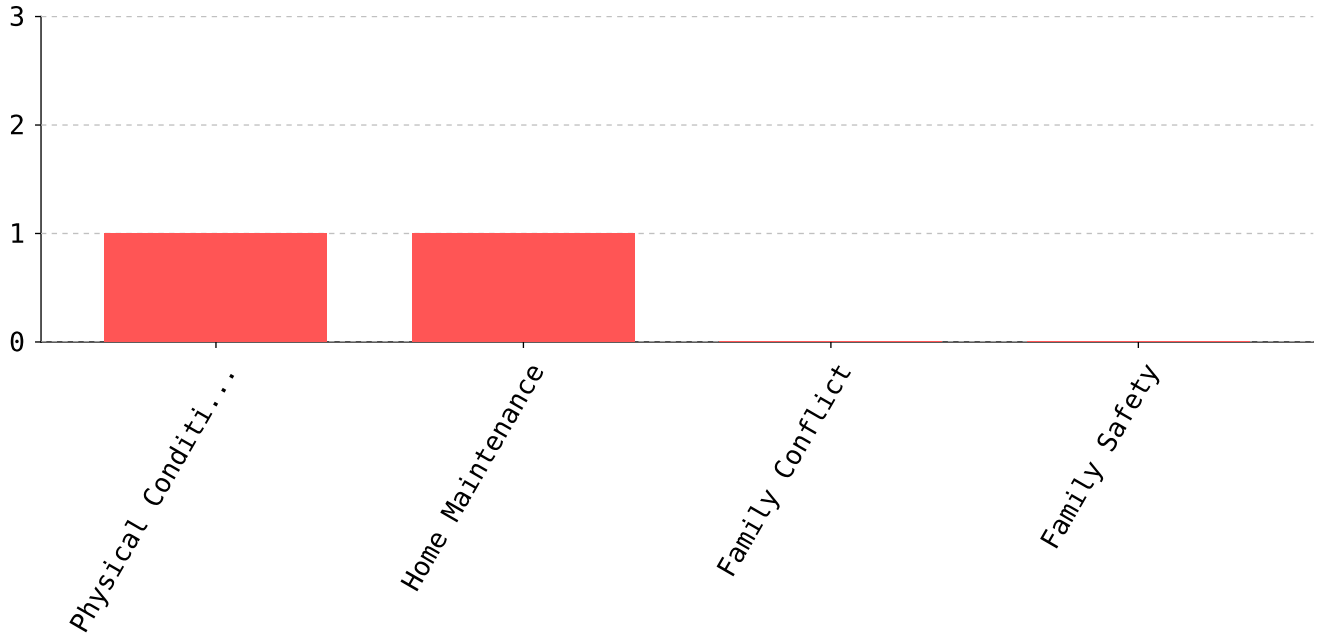
Name	Age	Role	Gender	Person ID	Trauma Score	CSEM Risk
[redacted] (ACV)	2 Yrs 2	Youth	M	[redacted]	N/A	
[redacted] (AP)	23 Yrs	Primary	F	[redacted]	N/A	N/A
[redacted] (ACV)	4 Yrs	Youth	M	[redacted]	N/A	
[redacted] (AP)	23 Yrs	Caregiver	M	[redacted]	N/A	N/A

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

Event Type: CPS Case	**Assessment Date:** 04/06/2023
Assessment Type: SAFETY	**CPS Case ID:** [redacted]

THE FAMILY TOGETHER

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

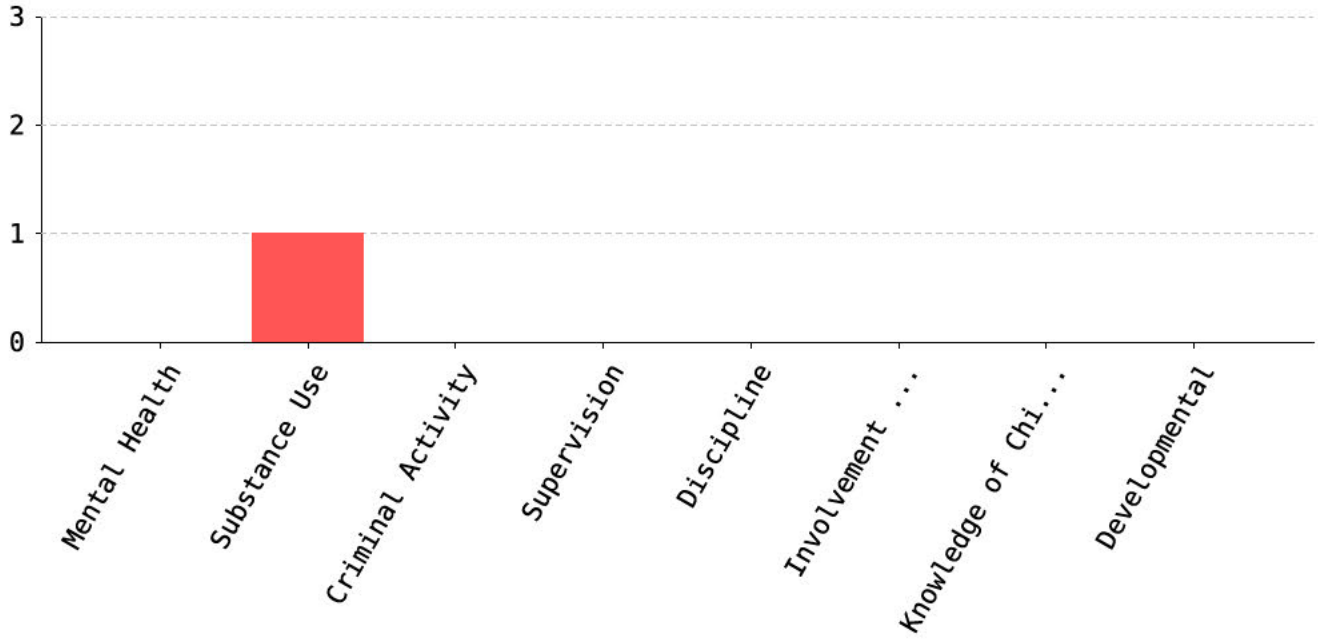


Item	Score	Justification/Narrative
Physical Condition of Home	1	History of issues with the physical condition of the home.
Home Maintenance	1	History of issues with cleanliness and safety issues.
Family Conflict	0	
Family Safety	0	

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

Event Type: CPS Case	**Assessment Date:** 04/06/2023
Assessment Type: SAFETY	**CPS Case ID:** [redacted]

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

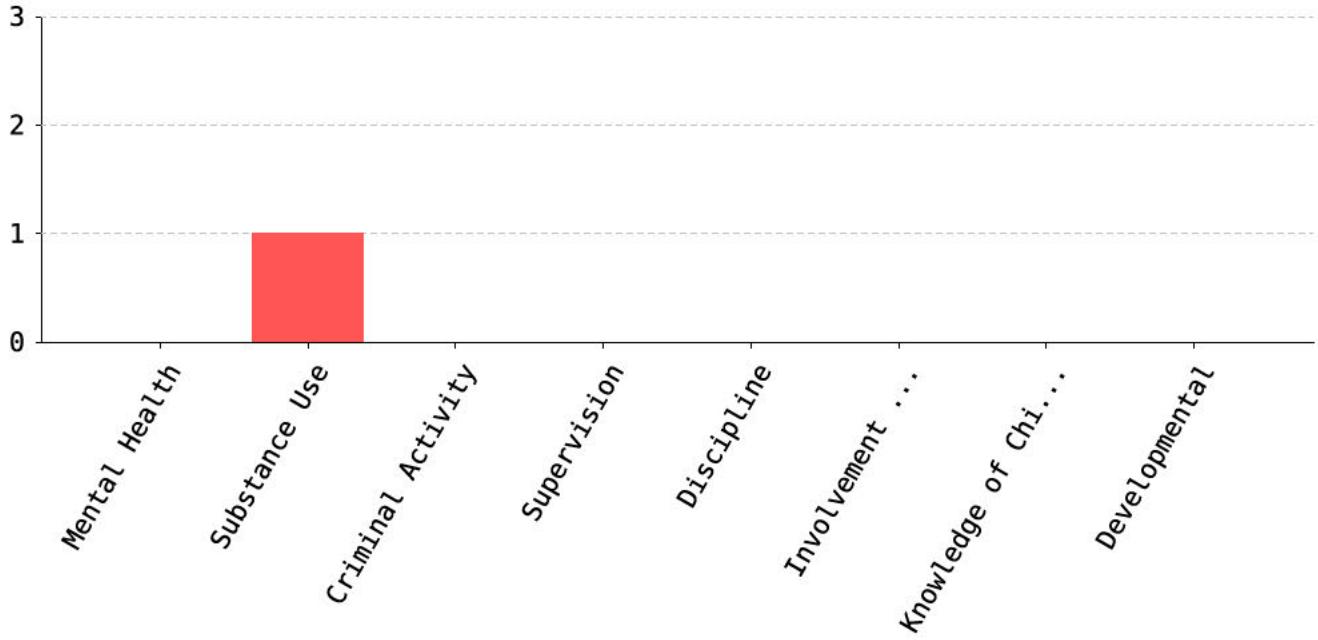


Item	Score	Justification/Narrative
Mental Health	0	
Substance Use	1	History of substance use.
Criminal Activity	0	
Supervision	0	
Discipline	0	
Involvement in Caregiving Functions	0	
Knowledge of Child and Family Needs	0	
Developmental	0	

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

Event Type: CPS Case	**Assessment Date:** 04/06/2023
Assessment Type: SAFETY	**CPS Case ID:** [redacted]

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

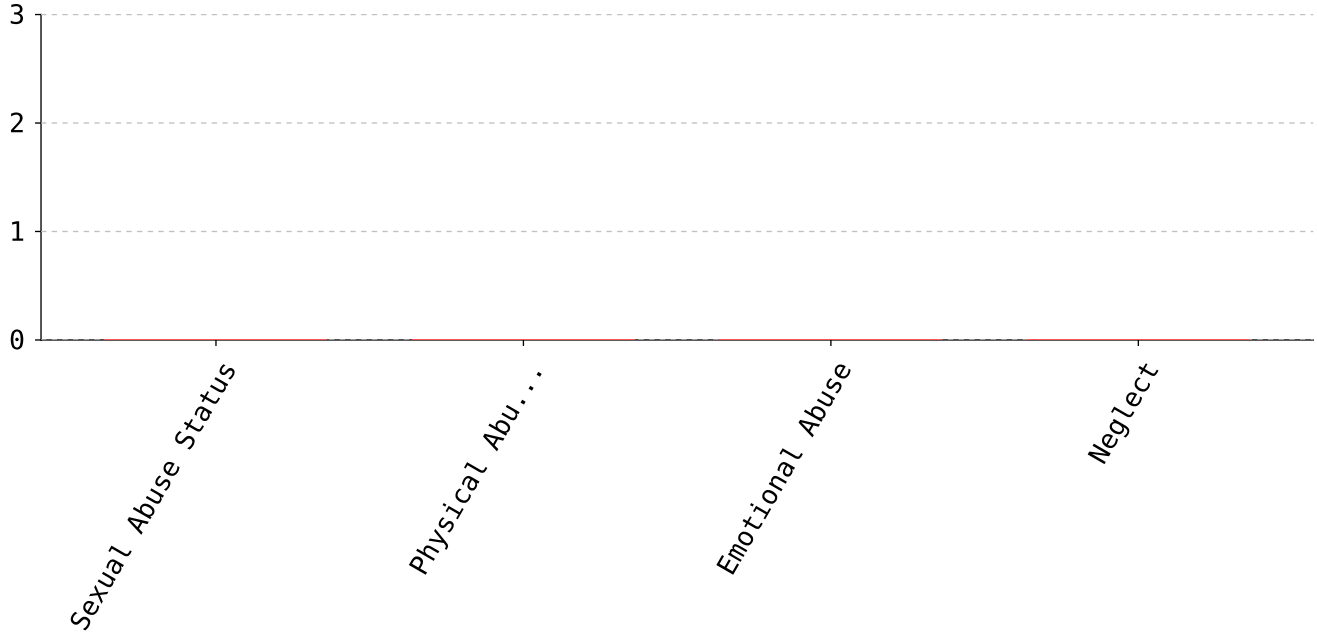


Item	Score	Justification/Narrative
Mental Health	0	
Substance Use	1	History of substance use.
Criminal Activity	0	
Supervision	0	
Discipline	0	
Involvement in Caregiving Functions	0	
Knowledge of Child and Family Needs	0	
Developmental	0	

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

Event Type: CPS Case	**Assessment Date:** 04/06/2023
Assessment Type: SAFETY	**CPS Case ID:** [redacted]

YOUTH		
This section is used to describe the strengths and needs of all children and youth whose age, at the time of the assessment, is 0 to 18 years.		
Participant: [redacted]	Person ID: [redacted]	Age:4 Yrs

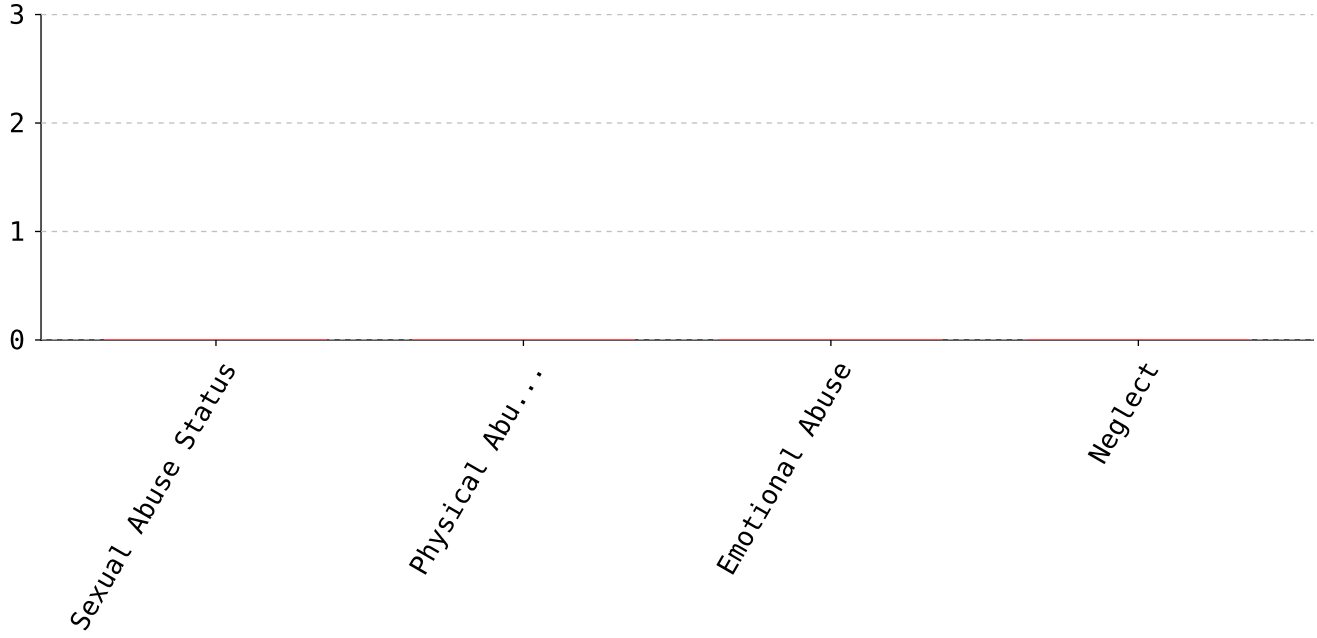


Item	Score	Justification/Narrative
Sexual Abuse Status	0	
Physical Abuse Status	0	
Emotional Abuse	0	
Neglect	0	

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

Event Type: CPS Case	**Assessment Date:** 04/06/2023
Assessment Type: SAFETY	**CPS Case ID:** [redacted]

YOUTH		
This section is used to describe the strengths and needs of all children and youth whose age, at the time of the assessment, is 0 to 18 years.		
Participant: [redacted]	Person ID: [redacted]	Age:2 Yrs 2 Mos



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

Tennessee Department of Children's Services

FAST 2.0 Assessment Summary Report

Event Type: CPS Case	**Assessment Date: 04/06/2023**
Assessment Type: FAST	**CPS Case ID:** [redacted]

OVERVIEW

Safety Level: Immediate Intervention Not Recommended	**Assessed at Location:** In the Home
Risk Level: No Need/Risk	
Event Start Date: 04/04/2024	**Last Assessed Date:** 04/06/2023
Assessment Status: Approved	**Assessor:** [redacted]
Date Approved: 05/19/2023	**Approver:** [redacted]

PARTICIPANTS

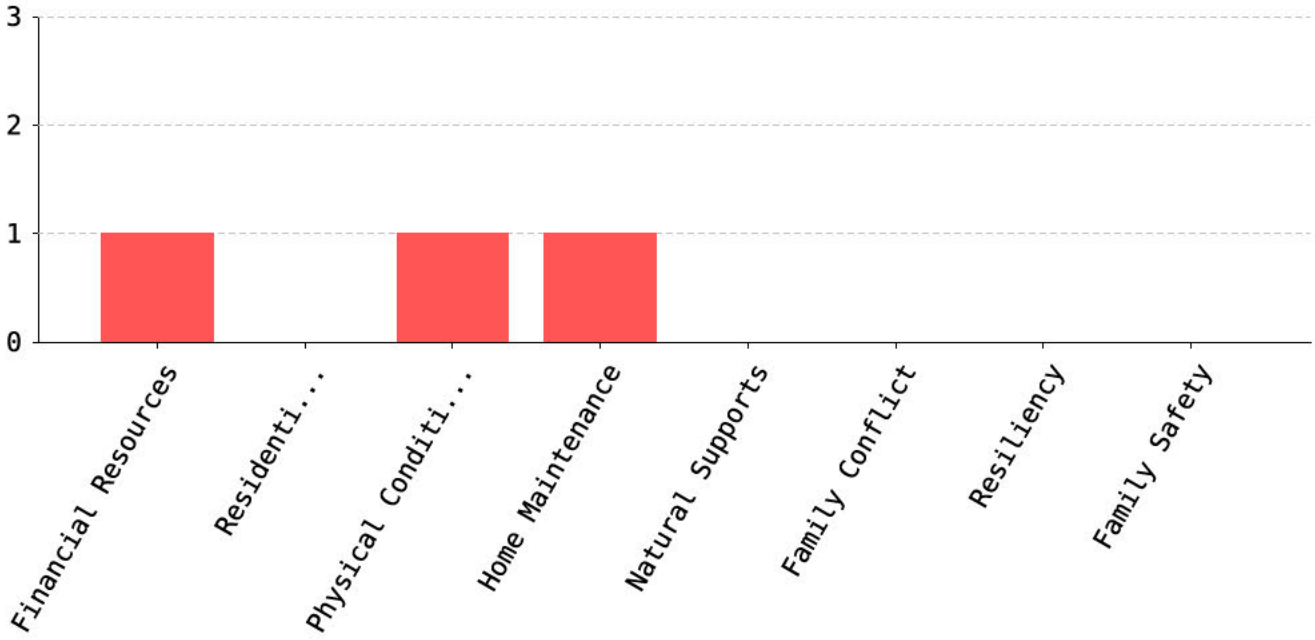
Name	Age	Role	Gender	Person ID	Trauma Score	CSEM Risk
[redacted] (ACV)	4 Yrs	Youth	M	[redacted]	0	Low
[redacted] (ACV)	2 Yrs 2	Youth	M	[redacted]	0	Low
[redacted] (AP)	23 Yrs	Primary	F	[redacted]	N/A	N/A
[redacted] (AP)	23 Yrs	Caregiver	M	[redacted]	N/A	N/A

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

Event Type: CPS Case	**Assessment Date:** 04/06/2023
Assessment Type: FAST	**CPS Case ID:** [redacted]

THE FAMILY TOGETHER

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

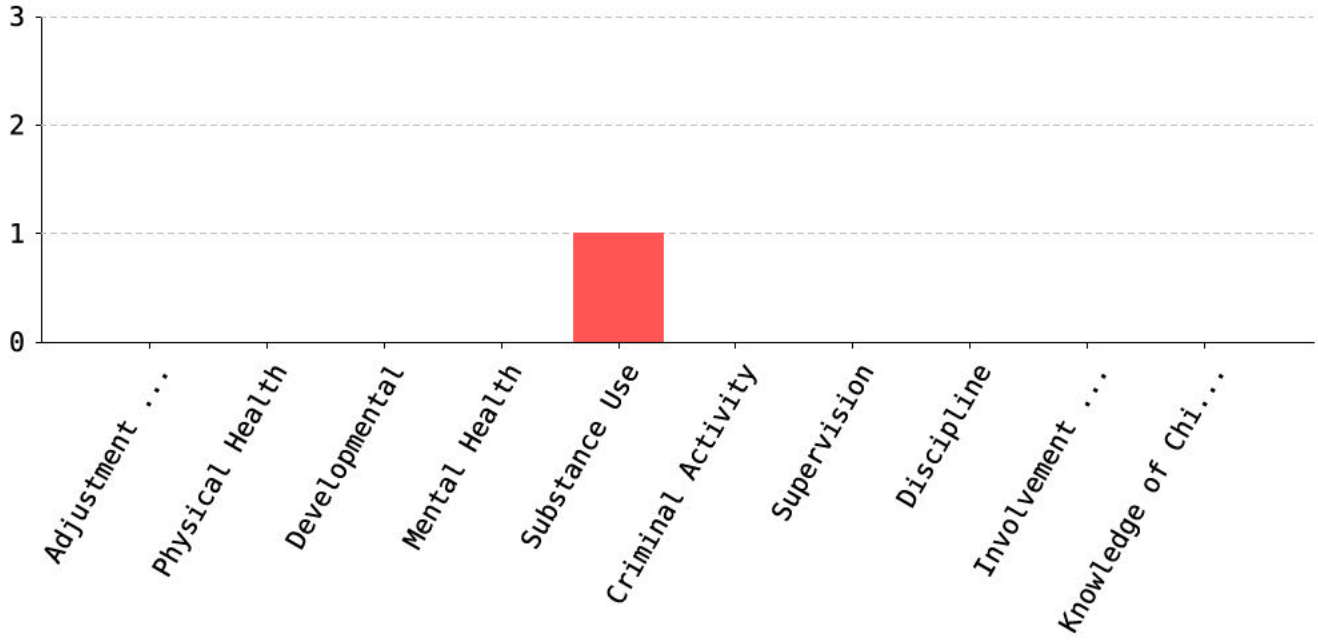


Item	Score	Justification/Narrative
Financial Resources	1	History of financial resource shortage
Residential Stability	0	
Physical Condition of Home	1	History of issues with the physical condition of the home.
Home Maintenance	1	History of cleanliness problems
Natural Supports	0	
Family Conflict	0	
Resiliency	0	
Family Safety	0	

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

Event Type: CPS Case	**Assessment Date:** 04/06/2023
Assessment Type: FAST	**CPS Case ID:** [redacted]

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

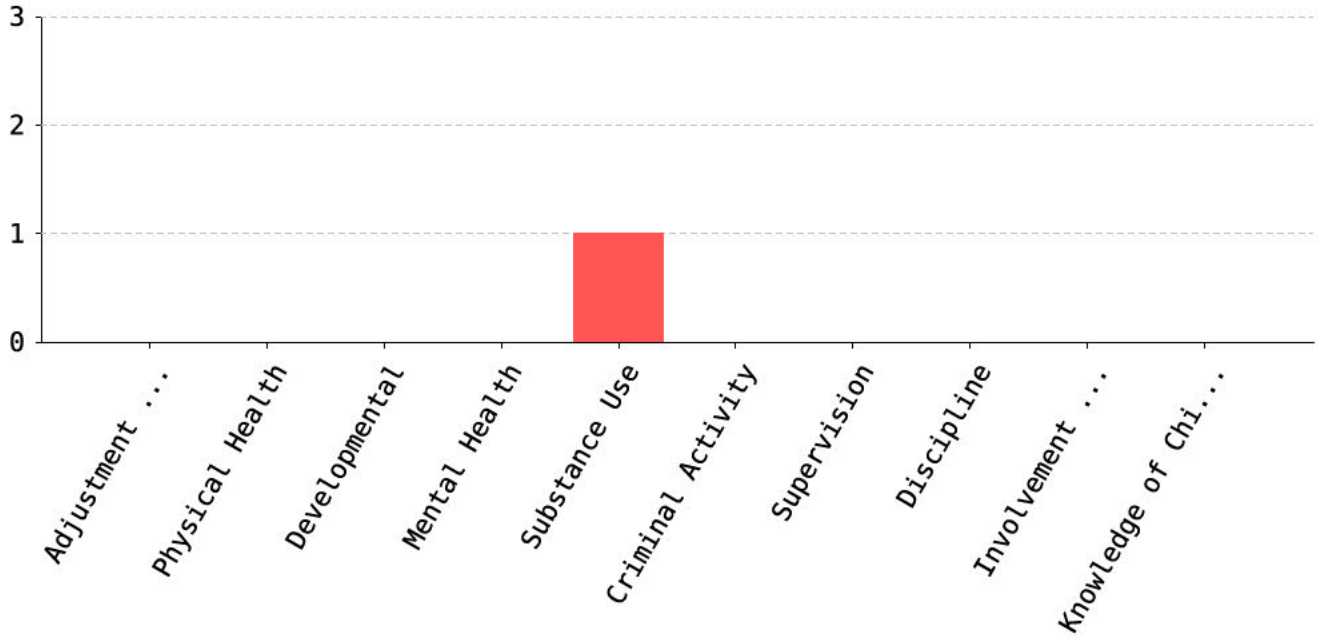


Item	Score	Justification/Narrative
Adjustment to Traumatic Experiences	0	
Physical Health	0	
Developmental	0	
Mental Health	0	
Substance Use	1	History of substance use.
Criminal Activity	0	
Supervision	0	
Discipline	0	
Involvement in Caregiving Functions	0	
Knowledge of Child and Family Needs	0	

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

Event Type: CPS Case	**Assessment Date:** 04/06/2023
Assessment Type: FAST	**CPS Case ID:** [redacted]

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

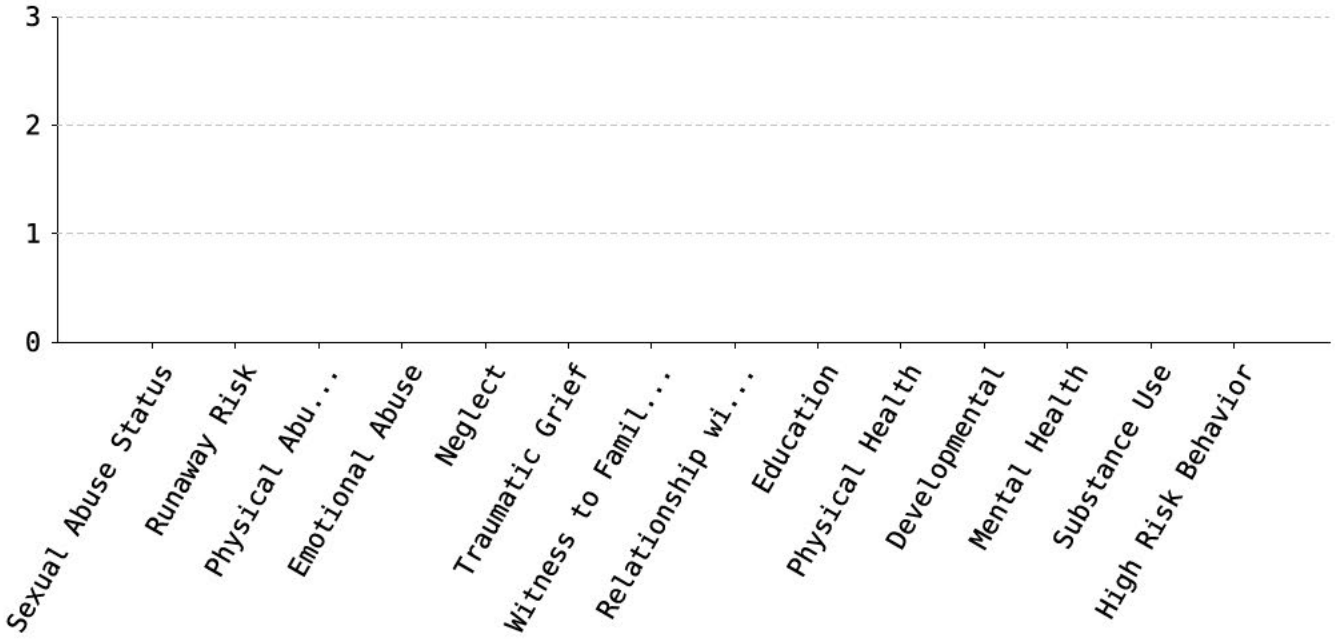


Item	Score	Justification/Narrative
Adjustment to Traumatic Experiences	0	
Physical Health	0	
Developmental	0	
Mental Health	0	
Substance Use	1	History of substance use.
Criminal Activity	0	
Supervision	0	
Discipline	0	
Involvement in Caregiving Functions	0	
Knowledge of Child and Family Needs	0	

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

Event Type: CPS Case	**Assessment Date:** 04/06/2023
Assessment Type: FAST	**CPS Case ID:** [redacted]

YOUTH		
This section is used to describe the strengths and needs of all children and youth whose age, at the time of the assessment, is 0 to 18 years.		
Participant: [redacted]	Person ID: [redacted]	Age:4 Yrs



Item	Score	Justification/Narrative
Sexual Abuse Status	0	
Runaway Risk	0	
Physical Abuse Status	0	
Emotional Abuse	0	
Neglect	0	
Traumatic Grief	0	
Witness to Family, School or Community Violence	0	
Relationship with Primary Caregiver	0	
Education	NA	
Physical Health	0	
Developmental	0	

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

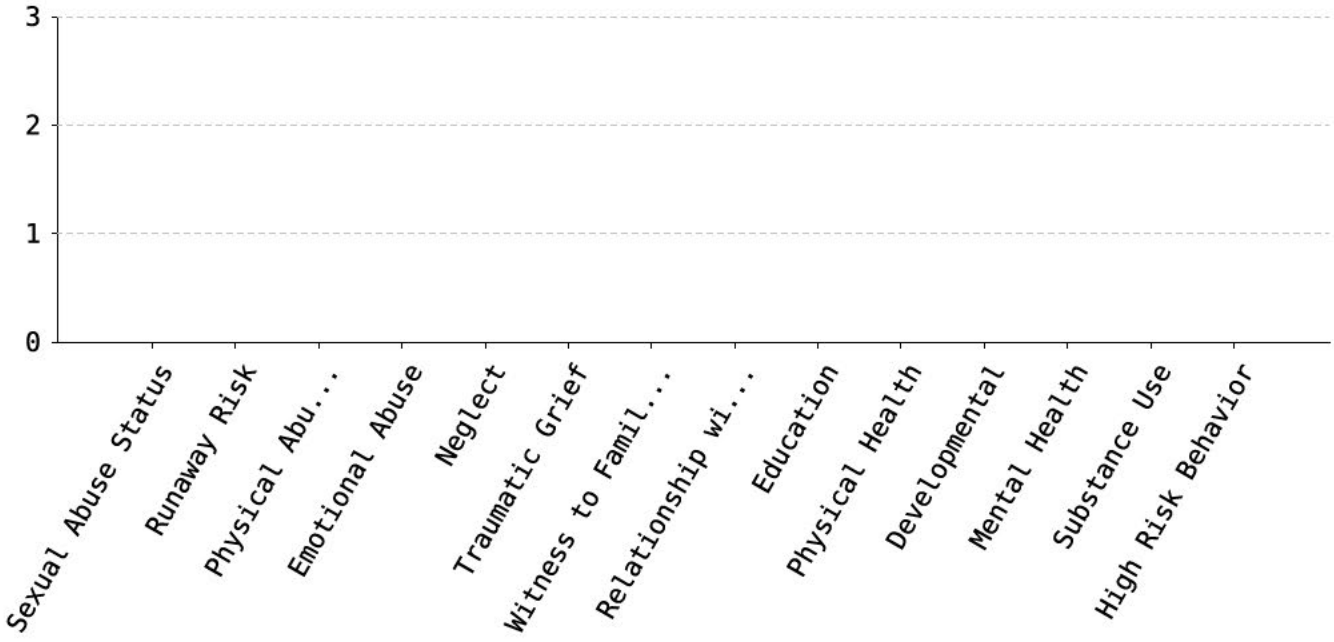
Event Type: CPS Case	**Assessment Date:** 04/06/2023
Assessment Type: FAST	**CPS Case ID:** [redacted]

Mental Health	0	
Substance Use	0	
High Risk Behavior	0	

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

Event Type: CPS Case	**Assessment Date:** 04/06/2023
Assessment Type: FAST	**CPS Case ID:** [redacted]

YOUTH		
This section is used to describe the strengths and needs of all children and youth whose age, at the time of the assessment, is 0 to 18 years.		
Participant: [redacted]	Person ID: [redacted]	Age:2 Yrs 2 Mos



Item	Score	Justification/Narrative
Sexual Abuse Status	0	
Runaway Risk	0	
Physical Abuse Status	0	
Emotional Abuse	0	
Neglect	0	
Traumatic Grief	0	
Witness to Family, School or Community Violence	0	
Relationship with Primary Caregiver	0	
Education	NA	
Physical Health	0	
Developmental	0	

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

Event Type: CPS Case	**Assessment Date:** 04/06/2023
Assessment Type: FAST	**CPS Case ID:** [redacted]

Mental Health	0	
Substance Use	0	
High Risk Behavior	0	