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

Intake

Intake ID: [redacted]

Intake Taken By: [redacted]

Intake Date/Time: 06/11/2023 09:49 PM [redacted]

Track Assigned: Investigation

Priority Assigned: 1

Screened By: [redacted]

Date Screened: 06/11/2023

Investigation

Investigation ID: [redacted]

First County/Region Assigned: [redacted]

Date/Time Assigned : 06/12/2023 09:05 AM

First Team Leader Assigned: [redacted]

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

First Case Manager Assigned: [redacted]

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

Allegations

Alleged Victim	Age	Allegation	Severe ? / CSEM ?	Alleged Perpetrator	Relationship to Alleged Victim
[redacted]	3 Yrs (Est)	Drug Exposed Child	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: Family Case IDs: [redacted]
TFACTS NOTES: None
Open Court Custody/Services: None
Open: None

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

Reporter's Name/Relationship: [redacted]

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Tennessee Child Abuse Hotline Summary

-Child/Family Identification and Relationship Introduction Paragraph:

[redacted] [redacted] (est. 14 months) resides with her birth mother (information unknown), at an unknown residence. There is no known information about [redacted] birth father. However, [redacted] [redacted] (age unknown) is listed as the next of kin, and he resides in [redacted] County.

-Does the child have any special needs or disabilities?
Unknown

-Please describe in detail what has prompted your call today.

Today, [redacted] was brought to [redacted] Medical Center. It was reported that [redacted] was with her father while her mother was out of town for the weekend. The father reported that [redacted] was congested and "not herself". [redacted] was brough to the hospital. It is unknown if she was brought by ambulance or if the father just brought her in. [redacted] was unresponsive when she got to the hospital. [redacted] was given Narcan and began to wake up. It is believed that the child was given a drug screen, but it's unknown for certain. It's suspected that she may be positive for some type of opioid or fentanyl. This is all the information that is currently known.

[redacted] has been admitted; it is unknown how long she will be at the hospital. She is in PICU room [redacted]

Both parents are currently at the hospital, but they have not finished admissions check-in. Security has been called due to the parents being in a verbal altercation. Immediate assistance is requested to [redacted] Medical Center to decide which parent is going to have to leave the hospital.

-Does the child have any injuries from the abuse or neglect?
The child was unresponsive.

-When did the abuse or neglect occur?
Today

-Where did the abuse or neglect occur?
At the home

-Has the child made a disclosure of the abuse or neglect?
(If yes, what did the child disclose and who did the child disclose the abuse to)

-What do the child's parents/caregivers say about the abuse/neglect?:

-Are there any concerns for Domestic Violence in the home that pose a danger to the child's safety?
Unknown

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

-Where is the child currently located?:
PICU room [redacted]

-When will the alleged perpetrator have access to the child again? Is the child currently safe for the next 24 hours

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

to 3 business days?:
Unknown

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

CM Notation: The PICU nurse (charge nurse number: [redacted])

Extended Intake Narrative:
Mother's name is [redacted] ([redacted]), [redacted] ([redacted]) is the birth father. A urine drug screen was performed for [redacted] and it was positive for fentanyl. [redacted] is not aware of the positive drug screen and [redacted] asked that [redacted] step out. [redacted] was out of town and [redacted] was spending the weekend with [redacted] while [redacted] was in Florida. [redacted] has full custody and [redacted] is not on the birth certificate.

CM who took the Ext. Intake, Date AND Time: [redacted] 06.11.2023/10:47pm

Per SDM: INV P1 [redacted] CM2 06.11.2023 @10:25 p.m.
[redacted] CM 3 @ 10:43pm on 6-11-23

Recipients	Time Issued	Response Received	Devices	Responses
[redacted]	06-11-23 11:02:09 PM	[redacted] -	Machine Answered	
	06-11-23 11:02:09 PM [redacted]	06-11-23 11:03:09 PM [redacted]	PRIVATE	Received

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

Participant(s)

Name: [redacted] [redacted]

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

SSN: | Race: | Age:

Address: [redacted] Tennessee [redacted]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact: [redacted]

Contact Type: CELL

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

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

Name: [redacted] [redacted]

Gender: Female
Date of Birth:
Partipant ID: [redacted]
SSN:
Race:
Age: 3 Yrs (Est)
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:	2025-05-27 09:00:00	Contact Method:	
Contact Time:	09:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	06/17/2025
Completed date:	06/17/2025	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 06/17/2025 04:34 PM Entered By: [redacted]

Case approved for closure by CPS AC. All tasks have been completed.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-05-27 08:56:00	Contact Method:	
Contact Time:	08:56 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	05/27/2025
Completed date:	05/27/2025	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Case Summary		
Contact Sub Type:	Closing		

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 05/27/2025 08:57 AM Entered By: [redacted]

On June 11, 2023, the Department of Childrens Services (DCS) received a referral for allegation of Abuse Death regarding Alleged Child Victim (ACV) [redacted] (age 14 months). The alleged perpetrator (AP) was listed as unknown. This investigation was worked by Child Protective Services Case Manager, [redacted] and assigned to Child Protective Services Case Manager [redacted] This case was worked in conjunction with [redacted] Police Department ([redacted] PD) Youth Services Detective [redacted]

[redacted] lived at the family home with birth mother ([redacted] and half sibling ([redacted] Birth Father ([redacted] resides in [redacted] County.

At 09:41 PM on June 11, 2024, [redacted] was brought to [redacted] Medical Center. [redacted] was unresponsive upon arrival. [redacted] Medical Staff gave [redacted] Narcan, and she started to wake up. A urine drug screen was performed for [redacted] and she tested positive for fentanyl. Ms. [redacted] and [redacted] (sibling) were out of town in Florida. [redacted] was spending the weekend with her birth father while the mother was in Florida.

On 12:14 AM on June 12, 2023, Child Protective Services Investigator (CPSI) [redacted] interviewed [redacted] Ms. [redacted] stated [redacted] was staying at Mr. [redacted] home for the weekend while she was in Florida. Ms. [redacted] stated she had dropped [redacted] off on Friday, June 9, 2023. Ms. [redacted] stated she was supposed to pick [redacted] up Sunday night. Ms. [redacted] stated before she was scheduled to pick [redacted] up, Mr. [redacted] had called her and stated [redacted] was not waking up from her nap. Ms. [redacted] stated she instructed Mr. [redacted] to take [redacted] to the hospital and she would meet him there. Ms. [redacted] stated Mr. [redacted] used to smoke marijuana, use Xanax, and Percocet pills. Ms. [redacted] stated she thought he had stopped using illegal drugs because he was on probation. Ms. [redacted] stated she had no clue Mr. [redacted] was using drugs or selling them. Ms. [redacted] stated she and Mr. [redacted] were no longer together, and Mr. [redacted] did not live in the home. Ms. [redacted] stated she had another daughter that lived in the home and her name is [redacted] DOB [redacted] Ms. [redacted] stated she had an older son who is in the custody of his father. Ms. [redacted] stated [redacted] and [redacted] have different fathers. Ms. [redacted] stated Mr. [redacted] usually does not keep [redacted] by himself. Typically, Mr. [redacted] cousin is there and helps him take care of [redacted] while she visits. Ms. [redacted] stated Mr. [redacted] address is [redacted] TN [redacted] Ms. [redacted] stated she did not know what apartment number he lives

Tennessee Department of Children's Services

Case Recording Summary

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

Case Status: Close Organization: [redacted] Region

in. CM [redacted] asked Ms. [redacted] if she would consent to a drug screen. Ms. [redacted] agreed but she stated that she would be positive for THC. Ms. [redacted] completed the drug screen and tested only positive for THC. CM [redacted] and Ms. [redacted] completed an NCPP together.

On June 13, 2023, Detective [redacted] interviewed Ms. [redacted] Ms. [redacted] dropped [redacted] off with Mr. [redacted] that Friday afternoon. She cares for [redacted] during the week and Mr. [redacted] keeps her over the weekend. [redacted] was fine when she dropped her off with Mr. [redacted] Mr. [redacted] called her Sunday night telling her [redacted] wouldnt wake up. Ms. [redacted] stated she was unaware of drugs and drug usage by Mr. [redacted] She was told the apartment owners ([redacted] [redacted] brother, [redacted] [redacted] was present in the home.

On June 15, 2023, Detective [redacted] interviewed Mr. [redacted] Mr. [redacted] stated while [redacted] was in his care he went to visit a friend ([redacted] [redacted] [redacted] [redacted] brother, [redacted] [redacted] had been in her home. Mr. [redacted] stated [redacted] was running around Ms. [redacted] apartment and noticed she knocked something off the drawer. He was unsure on what it was. Mr. [redacted] noticed [redacted] was sleepy and laid her down to rest. When he went to check on her, he found her unresponsive. Mr. [redacted] reported Mr. [redacted] was already in the home when he and [redacted] arrived. Mr. [redacted] denied any drug usage in his family, but stated he was aware of Mr. [redacted] drug addiction.

On June 15, 2023, Detective [redacted] interviewed [redacted] [redacted] Ms. [redacted] cleaned her apartment prior to Detective [redacted] arriving to her home. Miss [redacted] stated her brother, [redacted] [redacted] is homeless and only came to the home to rest. It was confirmed Mr. [redacted] is a drug addict. Mr. [redacted] brought [redacted] to visit. They all laid down to take a nap. Ms. [redacted] was unaware of if Mr. [redacted] brought drugs to her apartment. When they discovered [redacted] Mr. [redacted] left the home. Ms. [redacted] discovered three bags under her daughters bed containing residue. That location is where Mr. [redacted] was sleeping. She threw those bags away when she found them.

On June 15, 2023, Detective [redacted] attempted to interview [redacted] [redacted] but he refused to be interview. Mr. [redacted] was incarcerated two days after incident.

Detective [redacted] attempted collect evidence at [redacted] [redacted] apartment on June 15, 2023, for possible testing (white/gray fabric material & blue blanket) but neither item tested positive for drug residue. When detectives met with Ms. [redacted] she had already cleaned her apartment thoroughly and mentioned finding a clear plastic bag possibly containing drug residue she discarded in the trash that was located under her daughters bed near where [redacted] [redacted] was sleeping.

On June 13, 2023, an autopsy was completed on [redacted] [redacted] by Dr. [redacted], Forensic Pathologist. The autopsy reported the cause of death was due to the toxic effect of fentanyl. The manner of death is ruled as an accident.

This referral was received on June 11, 2023, with an allegation of Drug Exposed child with an unknown perpetrator. The alleged perpetrator was later identified as the birth father, [redacted] [redacted] The ACV presented to [redacted] ER unresponsive. Drug screen results revealed the ACV was positive for fentanyl and given Narcan by medical staff. The child passed away on June 14, 2023.

On December 12, 2023, CM [redacted] presented this case to [redacted] County Child Protective Investigation Team (CPIT). The team agreed there was preponderance of evidence that supported the substantiation of the Abuse Death.

Per DCS Policy Work Aid 1 Section E:
Child Death is defined as:
a) Any child death caused by abuse or neglect.
b) Any unexplained death of a child when the cause of death is unknown or pending an autopsy report.

Tennessee Department of Children's Services

Case Recording Summary

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

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

There is a preponderance of evidence to support the allegations of Abuse Death and Drug Exposed Child. This case will be classified and closed as Allegation Substantiated/Perpetrator Substantiated for the allegation of Abuse Death and Drug Exposed Child of [redacted] by [redacted]

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-05-19 13:52:00	Contact Method:	
Contact Time:	01:52 PM	Contact Duration:	
Entered By:	[redacted] [redacted]	Recorded For:	
Location:		Created Date:	05/27/2025
Completed date:	05/27/2025	Completed By:	[redacted] [redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 05/27/2025 09:00 AM Entered By: [redacted] [redacted]

TC received permission from Assistant Commissioner to close the case once interviews the police have been documented and uploaded into the system.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-04-28 11:00:00	Contact Method:	Attempted Face To Face
Contact Time:	11:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	05/01/2025
Completed date:	05/01/2025	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: 05/01/2025 11:10 AM Entered By: [redacted]

CM traveled to [redacted] Tn, to complete an interview with [redacted] CM knocked on the door and a young man answered. CM asked for Ms. [redacted] and the young man stated I had the wrong address.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-04-25 16:00:00	Contact Method:	Records Search
Contact Time:	04:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	05/01/2025
Completed date:	05/01/2025	Completed By:	[redacted]

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

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

Contact Sub Type: Mother

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 05/01/2025 11:14 AM Entered By: [redacted]

CM completed a clear search on Ms. [redacted] and located a possible address. [redacted]. CM will follow up at that location. Clear search uploaded in Tfacts

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-04-25 09:30:00	Contact Method:	Attempted Face To Face
Contact Time:	09:30 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	04/25/2025
Completed date:	04/25/2025	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: 04/25/2025 03:10 PM Entered By: [redacted]

CM traveled to [redacted] to complete a F2F with [redacted] and get a RIO signed. CM knocked on the door and a young man answered it. CM asked for Ms. [redacted] CM was informed by the man that [redacted] did not live at that address. CM asked has [redacted] ever lived at that address and the young man stated, he and [redacted] were friends and she use to hangout with him at that address she never lived there. The young man stated he does not know [redacted] location. The young man did not want to give his name.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-04-11 15:01:00	Contact Method:	Attempted Face To Face
Contact Time:	03:01 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	Family Home	Created Date:	04/11/2025
Completed date:	04/11/2025	Completed By:	[redacted]
Purpose(s):	Service Planning		
Contact Type(s):	Good Faith Effort,Parent/Caretaker Interview		
Contact Sub Type:	Attempted Home Visit/Home Visit		

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 04/11/2025 06:57 PM Entered By: [redacted]

CM [redacted] traveled to the family home to make contact with birth mother, [redacted] CM [redacted] had a scheduled appointment with Ms. [redacted] at 3PM. CM [redacted] knocked on the door and spoke with a family friend.

Family friend did not want to give out names to CM [redacted] CM [redacted] introduced himself as an investigate with DCS. CM [redacted] explained that he was here for a scheduled home visit to get a ROI signed for ACV, [redacted] The family friend stated that Ms. [redacted] is currently not home, and they do not know when she will be returning. CM [redacted] asked if there was another current residence for Ms. [redacted] The family friend stated that this is the place where Ms. [redacted] lays her head down, but this is not her permanent address.

CM [redacted] thanked them for their time and concluded the interview.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-04-10 21:12:00	Contact Method:	
Contact Time:	09:12 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	04/10/2025
Completed date:	04/10/2025	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 04/10/2025 09:17 PM Entered By: [redacted]

*SRT is assisting with tasks.

Case reviewed by TL [redacted] Medical records needed. TL requested assistance in obtaining medical records from TC [redacted] Directions were given via email on this date. CM needs to submit an ROI for each child as well as an attestation form. If the ROI cannot be signed a HIPAA override letter can be submitted. All forms need to be faxed to [redacted] by 4/14. Death summary and checklist need to be submitted by 4/25.

Narrative Type: Addendum 1 Entry Date/Time: 04/13/2025 10:48 AM Entered By: [redacted]

*SRT is assisting with tasks.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-04-04 14:00:00	Contact Method:	Attempted Face To Face
Contact Time:	02:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	04/07/2025
Completed date:	04/07/2025	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Alleged Perpetrator Interview,Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 04/07/2025 04:16 PM Entered By: [redacted]

CM [redacted] went to [redacted] at [redacted], TN [redacted] for the scheduled home visit at 02:00 PM. CM [redacted] arrived to the home security gate and needed a code. CM [redacted] contacted the birth mother via phone call and no responds was given. The mother texted that she is not home and asked to rescheduled to on 04/11/25 at 03:00 PM. CM [redacted] thanked her for time and concluded the interview.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-03-31 19:00:00	Contact Method:	Phone Call
Contact Time:	07:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	03/31/2025
Completed date:	03/31/2025	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/31/2025 07:20 PM Entered By: [redacted]

CM [redacted] contact [redacted] ([redacted]) via phone. CM [redacted] introduced himself as an investigator from DCS. CM [redacted] expressed his condolences for her lost of her child. CM [redacted] requested to the meet the mother to sign up a paperwork(ROI). She agreed and asked for CM [redacted] to meet her at [redacted], [redacted] Tennessee [redacted]. Both parities agreed to meet on 04/04/25 at 02:00 PM. CM [redacted] thanked them for their time and concluded the interview.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-03-28 11:59:00	Contact Method:	Records Search
Contact Time:	11:59 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	03/28/2025
Completed date:	03/28/2025	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Diligent Search		
Contact Sub Type:	Mother		

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/28/2025 12:20 PM Entered By: [redacted]

CM [redacted] recieved this email from the NES search.

Hi. We have a [redacted] in our system but the DOB we have is [redacted]. This person did have service at [redacted] but ended service date was 10/09/2023 and they did not leave a forwarding address. Phone number we have for this person is [redacted].

CM [redacted] performed a NES search and clear search for the family.

Narrative Type: Addendum 1 Entry Date/Time: 03/31/2025 07:14 PM Entered By: [redacted]

CM [redacted] recieved this email from the NES search.

Hi. We have a [redacted] A [redacted] in our system but the DOB we have is [redacted]. This person did have service at [redacted] but ended service date was 10/09/2023 and they did not leave a forwarding address. Phone number we have for this person is [redacted].

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-03-25 22:09:00	Contact Method:	
Contact Time:	10:09 PM	Contact Duration:	
Entered By:	[redacted] [redacted]	Recorded For:	
Location:		Created Date:	03/25/2025
Completed date:	03/25/2025	Completed By:	[redacted] [redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/25/2025 07:22 PM Entered By: [redacted] [redacted]

Case reviewed by TL [redacted] Investigative tasks have been completed. Death Summary and checklist completed by CM [redacted] and submitted up to TC for review. Once approved, closing summary will be entered and case submitted for closure.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-03-18 16:00:00	Contact Method:	
Contact Time:	04:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	05/23/2025
Completed date:	05/23/2025	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 05/23/2025 06:12 PM Entered By: [redacted]

LE interviewed the birth mother([redacted] birth father([redacted] and [redacted].

The note has been uploaded into TFACTS.

CM [redacted] reached out to [redacted] Police Department Detective [redacted] for the case recordings/notes of [redacted] investigation of [redacted].

Narrative Type: Addendum 2 Entry Date/Time: 05/23/2025 07:07 PM Entered By: [redacted]

LE interviewed the birth mother([redacted] birth father([redacted] and [redacted]

Narrative Type: Addendum 1 Entry Date/Time: 05/23/2025 06:25 PM Entered By: [redacted]

The note has been uploaded into TFACTS.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-02-28 11:40:00	Contact Method:	
Contact Time:	11:40 AM	Contact Duration:	
Entered By:	[redacted] [redacted]	Recorded For:	
Location:		Created Date:	03/02/2025
Completed date:	03/02/2025	Completed By:	[redacted] [redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/02/2025 11:41 AM Entered By: [redacted] [redacted]

CM completed death summary; however, revisions need to be made. CM and TL will discuss revisions and they will be resubmitted by 3/7/25.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-01-29 09:07:00	Contact Method:	
Contact Time:	09:07 AM	Contact Duration:	
Entered By:	[redacted] [redacted]	Recorded For:	
Location:		Created Date:	01/29/2025
Completed date:	01/29/2025	Completed By:	[redacted] [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: 01/29/2025 09:08 AM Entered By: [redacted] [redacted]

Case reviewed by TL [redacted] Allegations of abuse death. CM needs to complete follow-up, prepare death summary, checklist, and submit to TL by 1/31.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2024-12-24 09:10:00	Contact Method:	
Contact Time:	09:10 AM	Contact Duration:	
Entered By:	[redacted] [redacted]	Recorded For:	
Location:		Created Date:	01/29/2025
Completed date:	01/29/2025	Completed By:	[redacted] [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: 01/29/2025 09:10 AM Entered By: [redacted] [redacted]

Case reviewed by TL [redacted] Allegations of abuse death. CM needs to complete follow-up, prepare death summary, checklist, and submit to TL.

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:	2024-05-30 20:06:00	Contact Method:	
Contact Time:	08:06 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	05/30/2024
Completed date:	05/30/2024	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: 05/30/2024 08:07 PM Entered By: [redacted]

Case remains open pending completion of investigative tasks.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2024-02-01 14:38:00	Contact Method:	
Contact Time:	02:38 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	Nealy, Chanitta S.
Location:		Created Date:	02/01/2024
Completed date:	02/01/2024	Completed By:	[redacted]
Purpose(s):	Service Planning		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 02/01/2024 02:43 PM Entered By: [redacted]

The autopsy for [redacted] [redacted] was received, reviewed, and uploaded on February 1, 2024. Autopsy results showed the following:

COD: Toxic effect of fentanyl
MOD: Accident

This referral was received on 6/11/23 with an allegation of drug-exposed child with an unknown perpetrator. The AP was later identified as the birth father, [redacted] [redacted] The ACV presented to [redacted] ER unresponsive. Drug screen results revealed the ACV was positive for fentanyl and given Narcan by medical staff. The child passed away on 6/14/23.

Tennessee Department of Children's Services
Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2023-12-12 10:00:00	Contact Method:	Face To Face
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	03/21/2025
Completed date:	03/21/2025	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	CPIT (Child Protective Investigative Team)		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/21/2025 01:04 AM Entered By: [redacted]

CPIT convened. CPIT agreed with classification of ASPK.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	System Completed
Contact Date:	2023-06-13 11:01:00	Contact Method:	
Contact Time:	11:01 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	06/13/2023
Completed date:	07/14/2023	Completed By:	System Completed
Purpose(s):	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: 06/13/2023 11:04 AM Entered By: [redacted]

CM [redacted] contacted SW [redacted]

Mother dropped the child off at father's home on Friday.

AVC tested postivie for Fenteyal
pupil is pinpoint.
No brain actovity
EKG and full work up
the baby is believed to be brain dead
TN donor services has been connected for the parents

unknown if another child.

Tennessee Department of Children's Services
Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2023-06-13 08:15:00	Contact Method:	Face To Face
Contact Time:	08:15 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	06/13/2023
Completed date:	06/13/2023	Completed By:	[redacted]
Purpose(s):	Service Planning		
Contact Type(s):	CPIT (Child Protective Investigative Team)		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 06/13/2023 11:19 AM Entered By: [redacted]

CPIT Convened

DCS Follow-Up

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2023-06-12 00:14:00	Contact Method:	Face To Face
Contact Time:	12:14 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Hospital	Created Date:	06/14/2023
Completed date:	06/14/2023	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Initial ACV Face To Face,Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 06/14/2023 02:40 PM Entered By: [redacted]

CM [redacted] traveled to [redacted] Hospital on 6/12/2023 at approximately 12:14am to speak with [redacted] CM observed [redacted] in the hospital crib hooked up to oxygen and doctors surrounding her. [redacted] had no marks or bruises and was observed in a t-shirt and diaper. Nursing staff confirmed that [redacted] had tested positive for Fentanyl and was being put on a Narcan drip.
Due to [redacted] age and medical state CM was unable to conduct an interview with her.
CM spoke with [redacted] birth mother, [redacted] in a private setting. Ms. [redacted] stated that she had dropped [redacted] off on Friday 6/9/2023 to spend time with her father, [redacted] for the weekend. Ms. [redacted] stated she was supposed to pick [redacted] up Sunday night. Ms. [redacted] stated before she was scheduled to pick [redacted] up, Mr. [redacted] had called her and stated that [redacted] was not waking up from her nap. Ms. [redacted] stated she instructed Mr. [redacted] to take [redacted] to the hospital and she would meet him there. Ms. [redacted] stated that Mr. [redacted] used to smoke marijuana, use Xanax and Percocet pills. Ms. [redacted] stated she thought he had stopped using illegal drugs because he was on probation. Ms. [redacted] stated she had no clue that Mr. [redacted] was using drugs or selling them. Ms. [redacted] stated that she and Mr. [redacted] were no longer together, and Mr. [redacted] did not live in the home. Ms. [redacted] stated that she had another daughter that lived in the home and her name is [redacted] DOB [redacted]. Ms. [redacted] stated she had an older son whom she does not have custody of, he is in the custody of his father. Ms. [redacted] stated [redacted] and [redacted] have different fathers. Ms. [redacted] stated that Mr. [redacted] usually does not keep [redacted] by himself usually his cousin is there and helps him take care of [redacted] while she visits. Ms. [redacted] stated that Mr. [redacted] address is [redacted] TN [redacted] Ms. [redacted] stated she did not know what apartment number he lives in. Ms. [redacted] stated that Mr. [redacted] phone number is [redacted], but his phone is currently turned off. CM asked Ms. [redacted] if she would consent to a drug screen, and Ms. [redacted] agreed but she stated that she would be positive for THC. Ms. [redacted] completed the drug screen and tested only positive for THC. CM will upload into TFACTS. Together CM [redacted] and Ms. [redacted] completed an NCPP together.

Tennessee Department of Children's Services

Case Recording Summary

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

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: 06/11/2023

Assignment Date: 06/12/2023

Street Adress:

City/State/Zip:

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	Yes	[redacted] 03/04/2025
2	[redacted]	[redacted]	Abuse Death	[redacted]	[redacted] 12:00 AM	Allegation Substantiated / Perpetrator Substantiated	Yes	[redacted] 03/04/2025

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: This case will be classified as ASPS

D. Case Workers

Case Worker: [redacted]

Date: 03/04/2025

Team Leader: [redacted]

Date: 03/04/2025

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:

CM [redacted] traveled to [redacted] Hospital on 6/12/2023 at approximately 12:14am to speak with [redacted] CM observed [redacted] in the hospital crib hooked up to oxygen and doctors surrounding her. [redacted] had no marks or bruises and was observed in a t-shirt and diaper. Nursing staff confirmed that [redacted] had tested positive for Fentanyl and was being put on a Narcan drip.
Due to [redacted] age and medical state CM was unable to conduct an interview with her.
CM spoke with [redacted] birth mother, [redacted] in a private setting. Ms. [redacted] stated that she had dropped [redacted] off on Friday 6/9/2023 to spend time with her father, [redacted] for the weekend. Ms. [redacted] stated she was supposed to pick [redacted] up Sunday night. Ms. [redacted] stated before she was scheduled to pick [redacted] up, Mr. [redacted] had called her and stated that [redacted] was not waking up from her nap. Ms. [redacted] stated she instructed Mr. [redacted] to take [redacted] to the hospital and she would meet him there. Ms. [redacted] stated that Mr. [redacted] used to smoke marijuana, use Xanax and Percocet pills. Ms. [redacted] stated she thought he had stopped using illegal drugs because he was on probation. Ms. [redacted] stated she had no clue that Mr. [redacted] was using drugs or selling them. Ms. [redacted] stated that she and Mr. [redacted] were no longer together, and Mr. [redacted] did not live in the home. Ms. [redacted] stated that

Department of Children's Services

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

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

she had another daughter that lived in the home and her name is [redacted] DOB [redacted]. Ms. [redacted] stated she had an older son whom she does not have custody of, he is in the custody of his father. Ms. [redacted] stated [redacted] and [redacted] have different fathers. Ms. [redacted] stated that Mr. [redacted] usually does not keep [redacted] by himself usually his cousin is there and helps him take care of [redacted] while she visits. Ms. [redacted] stated that Mr. [redacted] address is [redacted] TN [redacted] Ms. [redacted] stated she did not know what apartment number he lives in. Ms. [redacted] stated that Mr. [redacted] phone number is [redacted], but his phone is currently turned off. CM asked Ms. [redacted] if she would consent to a drug screen, and Ms. [redacted] agreed but she stated that she would be positive for THC. Ms. [redacted] completed the drug screen and tested only positive for THC. CM will upload into TFACTS. Together CM [redacted] and Ms. [redacted] completed an NCPP together.

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

Dr. [redacted] performed the autopsy on [redacted] on June 15, 2023 at 10:30 AM. She reported that cause of death is " toxic effect of fentanyl". The manner of death is " accident".

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

On 06-11-23, [redacted] 14month-old female, was visiting with her father, [redacted] over the weekend. [redacted] reported finding [redacted] unresponsive after placing her down for a nap. She was transported to [redacted] Children's Hospital where she remained in the Pediatric Intensive Care Unit (PICU) until her death on 06-14-23. It was later determined, [redacted] was positive for fentanyl which according to the final autopsy report, is the cause of death. There were no other reported concerns for abuse. [redacted]PD was not notified of the incident until 06-13-23.

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

Detective [redacted] spoke with multiple collateral contacts.

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

All docs have been uploaded into Tfacts.

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