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

Intake

Intake ID: [redacted]

Intake Taken By: [redacted]

Intake Date/Time: 08/01/2023 06:34 PM [redacted]

Track Assigned: Investigation

Priority Assigned: 1

Screened By: [redacted]

Date Screened: 08/02/2023

Investigation

Investigation ID: [redacted]

First County/Region Assigned: [redacted]

Date/Time Assigned : 08/02/2023 09:28 AM

First Team Leader Assigned: [redacted]

Date/Time Assigned : 08/02/2023 12:00 AM

First Case Manager Assigned: [redacted]

Date/Time Assigned : 08/02/2023 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ? / CSEM ?	Alleged Perpetrator	Relationship to Alleged Victim
[redacted]	1 Yr 8 Mos	Lack of Supervision	Yes	[redacted]	

Preliminary Near Death: [redacted]

Referent(s)

Referent Name: [redacted]

Role to Alleged Victim(s): [redacted]

Referent Address:

Referent Phone Number: [redacted]

Type of Contact: I-3 Phone

Notification: E-mail

Narrative: NON-CUSTODIAL PRELIMINARY NEAR DEATH

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

Family Case ID Detailed History:
Open Court Custody: None

Private Provider Worker / [redacted] / [redacted] / CM: [redacted] / Sup: [redacted] / 12-28-18

Closed Court Custody:
[redacted] / 5-4-18 to 12-28-18
[redacted] / 4-19-12 to 4-8-13

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

[redacted] / 10-2-13 to 6-1-15

Pending: [redacted] / No allegation / 8-1-23
Awaiting Screening: None
Submitted: None

Open CPS:
ASMT / [redacted] / DEC / no classification / CM: [redacted] / Sup: [redacted] / ACV: [redacted]

Substantiated: INV / [redacted] / AS PS 5-2-11 / 5-2-11

Death: None

Screen Outs: [redacted]

History (not listed above): No or if yes, (unsubstantiated or ASMT & RL)
Track (INV or ASMT) / Case #/ Allegation/ Classification/ End Date
ASMT / [redacted] / PHA / LOS / no services needed 2-23-18 / 3-13-18
ASMT / [redacted] / LOS / DEC / PHA / no services needed 9-9-21 / 9-10-21
SIU / [redacted] / LOS / AUPU 10-19-18 / 11-1-18
INV / [redacted] / SEE / AUPU 7-9-18 / 7-25-18
SIU / [redacted] / MDM / AUPU 7-5-18 / 7-11-18
ASMT / [redacted] / LOS / Services needed court ordered 5-18-18 / 5-22-18
ASMT / [redacted] / LOS / Services recommended and accepted 2-22-17 / 4-7-17
ASMT / [redacted] / LOS / Services recommended and accepted 3-31-15 / 5-29-15
ASMT / [redacted] / LOS / no services needed 12-1-14 / 1-16-15
INV / [redacted] / LOS / DEC / AUPU 5-5-14 / 6-19-14
INV / [redacted] / SEE / AUPU 5-2-11 / 5-2-11
INV / [redacted] / ENN / LOS / AUPU no date / 8-1-08
INV / [redacted] / PHA / AUPU no date / 4-23-01
INV / [redacted] / PHA / AUPU no date / 9-13-05

County of Jurisdiction: [redacted]
School/ Daycare: None
Active Military: No

Reporter's Name/Relationship: [redacted]

-Child/Family Identification and Relationship Introduction Paragraph:
[redacted] (8 months) resides with her mother, [redacted] (20), father, [redacted] (22) and paternal great grandmother, [redacted] (69) in [redacted] County, Tn.

-Are you requesting immediate assistance from DCS to your location, or only an immediate phone call?
To location: [redacted] Hospital ER [redacted] TN [redacted]
Please call with estimated ETA: Detective [redacted].

-Please provide a brief summary of the concerns and why DCS is needed to respond immediately.
Police were contacted today at 2:37pm regarding [redacted] being unresponsive. [redacted] was unconscious, would not wake up and was having trouble breathing. When police arrived, [redacted] was taken to [redacted] Hospital by EMS. [redacted] was intubated at [redacted] Hospital and transported to [redacted] Hospital.

[redacted] stated she laid down with [redacted] around 1pm. [redacted] reported prior to the 911 call, [redacted] came in to wake her up. [redacted] tried to wake up [redacted] and couldn't wake her up. [redacted] called 911 and started CPR. [redacted] could not breathe on her own on the way to the hospital. There are concerns [redacted] may have rolled over onto [redacted]

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

while sleeping, but hospital staff are not certain of this. [redacted] left the home last night and was supposed to be on his way to a sober living home in New Jersey. When he was contacted today to be informed about [redacted] condition he was in [redacted] Tn.

This is considered Preliminary Near Death. [redacted] had some red marks on her legs, but these were not observed by law enforcement. EMS stated they could have been a rash, but the marks were odd. It is unknown if there is any physical abuse associated with the situation.

The home has a history of drug overdoses. [redacted] overdosed on 6-27-21 and that is the last known history. [redacted] had Narcan administered, and he came around, and [redacted] thought he may have taken a "bunch of Xanax." [redacted] brother suspects [redacted] may currently be using fentanyl. [redacted] has no known history of substance abuse. [redacted] has been arrested multiple times for theft, drugs, and assault. The inside of the home was not observed by law enforcement yet today. [redacted] [redacted] and [redacted] stay behind the main home in a shed type of studio apartment with air conditioning and electricity.

Detective [redacted] will be the point of contact and can be reached at: [redacted]. It is pending investigation and no arrest has been made yet. [redacted] and [redacted] are currently at the home while a search warrant is being executed. They will be going to [redacted] after this is complete.

-Are there any concerns for the safety of a Department of Children's Services Case Manager responding to the child's home?
None known.

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

CM Notation: None
Screener Notation: None

Emailed/Paged CPSI On Call:

Recipients	Time Issued	Response Received	Devices	Responses
[redacted]	08-01-23 07:38:20 PM	[redacted]	---	[redacted]

Email Sent
08-01-23 07:38:20 PM [redacted] 08-01-23 07:38:46 PM [redacted] + Received

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

Intake Decision and Screener Signature. Per SDM : Investigation P1. [redacted] CM 3 @ 8:20pm on 8-1-23.
Approved by Director, [redacted]

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

Participant(s)

Name: [redacted]

Gender: Female
Date of Birth: [redacted]
Partipant ID: [redacted]
SSN:
Race:
Age: 70 Yrs
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: [redacted]

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

SSN: | Race: | Age: 21 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

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

Name: [redacted]

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

SSN: | Race: White | Age: 1 Yr 8 Mos

Address: [redacted] Tennessee [redacted]

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact: [redacted]

Contact Type: CELL

Contact Comments: mother's

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

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

Name: [redacted]

Gender: Male
Date of Birth: [redacted]
Partipant ID: [redacted]
SSN:
Race:
Age: 23 Yrs
Address:
Deceased Date:
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

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:	2024-04-30 11:06:00	Contact Method:	Attempted Phone Call
Contact Time:	11:06 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	DCS Office	Created Date:	04/30/2024
Completed date:	04/30/2024	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Notation,Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 04/30/2024 11:29 AM Entered By: [redacted]

CM [redacted] received information from Detective [redacted] with the [redacted] County Sheriff's Office on this date and time. Mr. [redacted] informed that Mr. [redacted] has been in jail since 3/28/24. Ms. [redacted] has been calling him and Detective [redacted] has been monitoring the phone calls. The family's address is believed to be [redacted], [redacted] TN. Ms. [redacted] phone number should be [redacted]. CM [redacted] attempted to call Ms. [redacted] at that number and it went straight to voicemail. CM [redacted] texted Ms. [redacted] at the number requesting a call back so CM [redacted] could update her on the case and check in on Ms. [redacted] to see how she is doing. No response was received back.

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:	2024-04-30 09:28:00	Contact Method:	Correspondence
Contact Time:	09:28 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	DCS Office	Created Date:	04/30/2024
Completed date:	04/30/2024	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 04/30/2024 09:35 AM Entered By: [redacted]

CM [redacted] sent a clear search in an attempt to locate Ms. [redacted] and Mr. [redacted]

Narrative Type: Addendum 1 Entry Date/Time: 04/30/2024 02:55 PM Entered By: [redacted]

The results showed [redacted] as the family's most recent 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:	2024-04-29 14:56:00	Contact Method:	
Contact Time:	02:56 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	04/29/2024
Completed date:	04/29/2024	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 04/29/2024 02:57 PM Entered By: [redacted]

TL [redacted] received and reviewed this case for closure. CM [redacted] has completed all investgative tasks. CM received case with allegations of LOS. ACV is listed as [redacted] and the AP is listed as [redacted] It was reported that Police were contacted today at 2:37pm regarding [redacted] being unresponsive. [redacted] was unconscious, would not wake up and was having trouble breathing. When police arrived, [redacted] was taken to [redacted] Hospital by EMS. [redacted] was intubated at [redacted] Hospital and transported to [redacted] Hospital. [redacted] stated she laid down with [redacted] around 1pm. [redacted] reported prior to the 911 call, [redacted] came in to wake her up. [redacted] tried to wake up [redacted] and couldnt wake her up. [redacted] called 911 and started CPR. [redacted] could not breathe on her own on the way to the hospital. There are concerns [redacted] may have rolled over onto [redacted] while sleeping, but hospital staff are not certain of this. [redacted] left the home last night and was supposed to be on his way to a sober living home in New Jersey. When he was contacted today to be informed about [redacted] condition he was in [redacted] Tn.

CM spoke with Det. [redacted] with [redacted] CSO on 8/1 in which he reported that the family is currently at the hospital, and they were currently doing a search on the home. Det. [redacted] reported that the bed was soaked in urine, and they observed a bong used to smoke THC. It was reported that the family lives in a shed in the backyard of the grandmothers home. The shed had electricity and running water. CM [redacted] arrived to [redacted] Childrens Hospital on 8/1 at 930pm and observed the baby in which she is currently on a ventilator. CM took photos of the baby.

CM spoke with paternal grandmother, [redacted] in which she reported that the parents used to reside with her however they moved out and moved in with the paternal great grandmother.

CM then spoke with paternal great grandmother in which she reported that she sent mom and grandmothers roommate to the store to get some items. Mom then returned to the home with the baby. Grandmother reported that it was about 2:25pm when mom came running out yelling stating that the baby was not breathing. Grandmother reported that the babys eyes were dilated. Grandmother reported that she couldnt tell if the baby was breathing or not, so she began to do CPR. Grandmother reported that she was certified in CPR. Grandmother reported that mother was frantic, so she asked for the mother to move out of the way. Grandmother stated that the baby was breathing out of her nose and not her mouth. Grandmother then contacted 911 at 2:37pm. EMS arrived to the home and transferred the child to the hospital.

Tennessee Department of Children's Services

Case Recording Summary

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

Grandmother reported that her other daughter [redacted] was at the home during this time as well. Grandmother admitted that she gave mom a Xanax at the hospital. CM asked Grandmother about drug concern in which she reported that dad has a history however mom does not. CM spoke with dad in which he reported that he has been at [redacted] in [redacted] TN for the past three days. CM was able to verify with [redacted] that he was there. Dad reported that he was prescribed suboxone. Dad stated that he took Roxies about two months ago. He reported that he has not used fentanyl since he was 18 years old. CM reported that dad observed to be delayed and was passing gas, burping, and laughing throughout the duration of the interview.

CM then spoke with mom in which she reported that she does co sleep with the baby sometimes and she does have a pack and play. Mom stated that today she was co sleeping with the baby and she gave her a bottle and fell asleep. Mom reported that they slept for about 7 hours. Mom stated that she woke up due to the daughter pinching her. Mom fell asleep again around 1pm. Child fell asleep with a bottle in her hand. Mom had an alarm set for 215pm so she could go to work. Mom went to wake the baby up and the baby was on her back. Mom tried to wake her up however she was not responding. Mom then grabbed the child and ran to the grandmother for help. Mom stated that the baby was taking small gasps of air. Grandmother called 911 and it took about 10 min before anyone showed up. EMS then transferred the baby to the hospital. Mom has Alport syndrome and it's genetic.

CM spoke with medical staff in which they reported that they believed the baby had a seizure however they are unsure. Medical staff are still running tests and unsure if the baby will make it. Medical staff reported that the child will be in the hospital for at least two weeks.

Parents consented to a drug screen in which mom was positive for THC and Benzodiazepine. Dad was positive for THC and Amphetamines. TL then staffed with TC [redacted] and Legal in which it was determined to complete an IPA with the family. The parents have no other children.

CM has obtained the medical records and have uploaded them into TFACTS. It was reported that the child passed away on 9/29. The parents agreed for the baby to obtain an autopsy. CM has attempted to follow up with the family however has been unsuccessful. CM reported that the mothers phone is turned off and they are no longer residing in the home. The autopsy for [redacted] was received on 04/10/2024 at 12:02. The cause of death was Undetermined while sleeping in an unsafe environment and the manner of death could not be determined.

CM [redacted] presented case to CPIT April 25, 2024. Case reviewed and classified case as AUPU for Abuse Death, ASPS for Drug Exposed Child by both parents, [redacted] and [redacted] and Lack of Supervision by AP, [redacted] Team members agreed with classification. CPIT form was signed by ADA [redacted], CAC representatives [redacted] and Mental Health representative [redacted]. CPIT form uploaded to 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:	2024-04-26 08:38:00	Contact Method:	
Contact Time:	08:38 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	04/26/2024
Completed date:	04/26/2024	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: 04/26/2024 08:39 AM Entered By: [redacted]

On August 2nd, 2023, the Department of Childrens Services (DCS) received a referral for an allegation of Abuse Death regarding Alleged Child Victim (ACV), [redacted] (8 months). The Alleged Perpetrator (AP) is listed as unknown. Allegations of Drug Exposed Child received regarding ACV, [redacted] by APs, [redacted] and [redacted] Allegations of Lack of Supervision received for ACV, [redacted] received by AP, [redacted]

This investigation was assigned to Child Protective Services Case Manager (CM) [redacted] by Lead Investigator (TL) [redacted] This case was worked in conjunction with the [redacted] County Sheriffs Office ([redacted]CSO) Detective, [redacted] (8 months) lived at home in [redacted] County with her birth mother, [redacted] her birth father, [redacted] and her paternal grandmother, [redacted] and Ms. [redacted] roommate, [redacted] On August 2, 2023, the [redacted] County Sheriffs Office was called to Ms. [redacted] residence after Ms. [redacted] called 911 at 2:37 p.m. to report that [redacted] was unresponsive. [redacted] was unconscious, would not wake up and was having trouble breathing. When police arrived, [redacted] was taken to [redacted] Hospital by EMS. [redacted] was intubated at [redacted] Hospital and transported to [redacted] Hospital.

[redacted] stated she laid down with [redacted] around 1pm. [redacted] reported prior to the 911 call, [redacted] came in to wake her up. [redacted] tried to wake up [redacted] and couldnt wake her up. [redacted] called 911 and started CPR. [redacted] could not breathe on her own on the way to the hospital. There are concerns [redacted] may have rolled over onto [redacted] while sleeping, but hospital staff are not certain of this. [redacted] left the home last night and was supposed to be on his way to a sober living home in New Jersey. When he was contacted today to be informed about [redacted] condition he was in [redacted] TN.

[redacted] condition is being considered a Preliminary Near Death. [redacted] had some red marks on her legs, but these were not observed by law enforcement. EMS stated they could have been a rash, but the marks were odd. It is unknown if there is any physical abuse associated with the situation.

The home has a history of drug overdoses. [redacted] overdosed on June 27th, 2021, and had Narcan Administered. Ms. [redacted] believed he had taken a bunch of Xanax, but his brother suspected that [redacted] may be using fentanyl. [redacted]

Tennessee Department of Children's Services

Case Recording Summary

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

Case Status: Close Organization: [redacted] Region

has been arrested multiple times for theft, drugs, and assault. [redacted] has no known history of substance abuse. [redacted] and [redacted] stayed behind the main home in a shed type of studio apartment with air conditioning and electricity. CM [redacted] interviewed Ms. [redacted] at [redacted] Children's Hospital in [redacted] TN on August 1st, 2023 at 11:21 p.m. CM [redacted] and Mr. [redacted] talked privately inside an empty room of the hospital.
Ms. [redacted] reported that on July 31, 2023, she took [redacted] with her to the store to pick up formula. [redacted] uses Enfamil and has been formula fed since birth. While at the store there were no concerns or issues with [redacted] had fallen asleep on the ride home. Due to this [redacted] did not fall asleep at night until around 12am on August 1, 2023. [redacted] fell asleep on Ms. [redacted] queen-sized bed. Ms. [redacted] was lying to the left of the bed and [redacted] was to the right of the bed. Ms. [redacted] explained she has a pillow at the edge of the bed to keep [redacted] from falling off the bed, but [redacted] was not placed against it. [redacted] fell asleep with a bottle of formula.

Around 7am, Ms. [redacted] woke up to [redacted] pinching her. Ms. [redacted] reported that [redacted] nails are a bit long since they haven't gotten around to cutting them. Ms. [redacted] gave [redacted] some toys to play with and put on Coco melon. [redacted] fell back asleep on the bed around 1p.m and she was lying on her back holding a bottle with both hands. Ms. [redacted] fell asleep too and did not wake up until her alarm went off at 2:15pm. Ms. [redacted] had work at Domino's later in the evening and had preset her alarm. When she got up, she observed [redacted] on the side of her. Ms. [redacted] demonstrated how [redacted] was and pressed both her palms together, tilted her head and put her hands under her head. [redacted] legs were scrunched up towards her belly. [redacted] was difficult to wake. Around that time, Ms. [redacted] heard Ms. [redacted] coming out the back door. Ms. [redacted] grabbed [redacted] and ran to Ms. [redacted] because she did not know what to do. Ms. [redacted] does not know CPR and she also did not want to hurt [redacted]

Ms. [redacted] started CPR on [redacted] and [redacted] was breathing funny and taking little gasps of air. Ms. [redacted] is the one who called 911 and it she believes it took 10 minutes for the ambulance to show up and a fire truck showed up right after. Ms. [redacted] rode in the front seat of the ambulance. Prior to that she believes first responders worked on [redacted] for about 15 minutes before they headed to the hospital. Ms. [redacted] believes they arrived to [redacted] around 4pm. She was informed that [redacted] would be transferred to [redacted] Children's Hospital as they are better equipped for the level of care [redacted] required.

Ms. [redacted] was asked about substance abuse from her and others in the home. Ms. [redacted] admitted she does smoke marijuana on occasion. She admitted that Ms. [redacted] had provided her with half a Xanax at the hospital a few hours prior. She denied any prior use of Xanax or any other medications. Ms. [redacted] mentioned that she has an anti-depressant but denied she has taken it yet. Ms. [redacted] consented to a drug screen and was positive for Benzodiazepine, MDMA and THC.

Cm [redacted] met with Mr. [redacted] in the patient waiting room of [redacted] Hospital at [redacted] Ms. [redacted] was present during the interview. Mr. [redacted] reported that he was not present when [redacted] was found unresponsive. He was at [redacted] Center in [redacted] TN. Mr. [redacted] signed a release for CM [redacted] to obtain record of this. Mr. [redacted] responded out to the hospital after Ms. [redacted] contacted him. Mr. [redacted] denied having any concerns against Ms. [redacted] He reports that he and Ms. [redacted] both meet her basic needs such as making sure she is fed, bathed and changed.

Mr. [redacted] reported that he has a history of substance abuse. A recent referral was received with concerns that Mr. [redacted] failed his probation drug screen and admitted to using Fentanyl on July 19th. Mr. [redacted] denied any recent use and denied that has tested for Fentanyl during a probation drug screen. Mr. [redacted] reported he did however start to use Fentanyl at age 15 after he started stealing the patches from Ms. [redacted] He reports he is on probation from a charge he had years ago when he a teen.

CM [redacted] asked Mr. [redacted] if anything would show up if a drug screen was completed. Mr. [redacted] reported he would consent to one and joked that every drug would show up on the screen. Mr. [redacted] then followed up that he

Tennessee Department of Children's Services

Case Recording Summary

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

would only test for Suboxone and maybe THC because he uses Delta 8 in a vape. Mr. [redacted] tested for THC, Buprenorphine and Amphetamine. CM [redacted] asked if he could confirm any prescriptions he has and he said he would, but he did not have them on him at the moment since they were at the hospital. CM [redacted] asked Ms. [redacted] if she would test for anything and Mr. [redacted] started to laugh and said, "awwww Granny gave you a Xanax today and now you are going to test for it." Mr. [redacted] grandmother, [redacted] had walked back in and heard this, and she told Mr. [redacted] to "shut up."

It was observed that Mr. [redacted] has some delays or possibly under the influence. Mr. [redacted] and his family continuously made excuses that it is just because he has severe ADHD. Mr. [redacted] continued to make jokes of the whole situation such as the drug screens. When things like an immediate protection agreement was discussed, Mr. [redacted] would not stay still and continued to burp loudly and pass gas. Mr. [redacted] struggled staying focus and required a lot of attention. In order to build rapport but also gauge his bond with [redacted] CM [redacted] asked both parents to show her their favorite pictures and videos of [redacted] Mr. [redacted] showed a few but most of them were blurry or off focus. Some of the videos were just a few seconds long. It was unclear if he was possibly under the influence while taking them.

CM [redacted] spoke with [redacted] Children's Hospital Social Worker, [redacted] on August 2, 2023, at 3:50 p.m. Ms. [redacted] reported that she had just met with both parents and there are concerns with Mr. [redacted] This is due to a few factors including some of the comments he made to the team about Fentanyl such as wondering if the cardiac arrest was due to that and her being given some at the hospital rather than their home.
CM [redacted] received a message from [redacted] on August 8th, 2023, regarding [redacted] toxicology. The expanded urine drug screen came back, and she was positive for fentanyl, but they are reviewing the outside medical records to determine when she might have been exposed. LCSW [redacted] informed that [redacted] was getting a small amount of fentanyl at [redacted] Children's Hospital. LCSW [redacted] informed that they confirmed [redacted] did receive Fentanyl at [redacted] Hospital. At this time, they are unable to determine if her Fentanyl exposure was prior to hospitalization.
On September 30th, 2023 an autopsy was completed by [redacted], M.D. at the Office of the Medical Examiner located in [redacted] TN. The pathological diagnoses included the following:

1. Infant female without significant external traumatic injuries
2. Status post medical intervention
3. Congested and edematous lungs
4. Status post-remote cranial surgery.

Cause of Death: Undetermined while sleeping in an unsafe environment
Other Conditions: Co-sleeping on bed with parent
Manner of Death: Could Not Be Determined
Circumstances of Death: Unknown if external causes of drug(s) were involved.
On April, 25th, 2024, CM [redacted] presented this case to the [redacted] County Child Protective Investigative Team (CPIT). Those in attendance were; TL [redacted] TL [redacted] Detective [redacted] ADA [redacted] and [redacted] County CAC staff. The team was in agreement that there is not enough evidence that supports 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.
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.

There are concerns with the conditions of the home and the parents substance abuse issues prior to [redacted] death.

Tennessee Department of Children's Services

Case Recording Summary

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

There are concerns of unsafe sleep for [redacted] by Ms. [redacted]
There is limited evidence to support the allegation of Abuse Death. This case will be closed and classified as Allegation Unsubstantiated, Perpetrator Unsubstantiated for the Abuse Death of [redacted] Allegations of Drug Exposed Child and Lack of Supervision will be classified as Allegation Substantiated, Perpetrator Substantiated.

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:	2024-04-25 13:00:00	Contact Method:	Face To Face
Contact Time:	01:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	Other Community Site	Created Date:	04/25/2024
Completed date:	04/25/2024	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	CPIT (Child Protective Investigative Team)		
Contact Sub Type:			

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 04/25/2024 11:15 PM Entered By: [redacted]

CM [redacted] presented case to CPIT April 25, 2024. Case reviewed and classified case as AUPU for Abuse Death, ASPS for Drug Exposed Child by both parents, [redacted] and [redacted] and Lack of Supervision by AP, [redacted] Team members agreed with classification. CPIT form was signed by ADA [redacted], CAC representatives [redacted] and Mental Health representative [redacted]. CPIT form uploaded to 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:	2024-04-25 09:19:00	Contact Method:	
Contact Time:	09:19 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	04/25/2024
Completed date:	04/25/2024	Completed By:	[redacted]
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 04/25/2024 09:20 AM Entered By: [redacted]

TC received approval to close the case once it has been presented to CPIT by Executive Director.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2024-04-10 12:02:00	Contact Method:	
Contact Time:	12:02 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	04/15/2024
Completed date:	04/15/2024	Completed By:	[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: 04/15/2024 01:01 PM Entered By: [redacted]

The autopsy for [redacted] was received on 04/10/2024 at 12:02. The cause of death was Undetermined while sleeping in an unsafe environment and the manner of death could not be dertermined.

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:	2024-04-02 09:20:00	Contact Method:	Attempted Phone Call
Contact Time:	09:20 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	DCS Office	Created Date:	04/30/2024
Completed date:	04/30/2024	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 04/30/2024 09:32 AM Entered By: [redacted]

CM [redacted] sent Ms. [redacted] a text informing she needs to talk with Ms. [redacted] in an attempt to obtain [redacted] birth records. The message bubble was green so CM [redacted] attempted to reach Ms. [redacted] on this date but her phone is still out of service.

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:	2024-03-25 09:00:00	Contact Method:	
Contact Time:	09:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	03/26/2024
Completed date:	03/26/2024	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/26/2024 01:23 PM Entered By: [redacted]

TL [redacted] staffed this case with CM [redacted] on this date. CM has attempted to follow up with the family however has been unsuccessful. Autopsy is still pending.

Next Steps
Obtain autopsy
Present 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:	2024-03-06 14:20:00	Contact Method:	Attempted Phone Call
Contact Time:	02:20 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	DCS Office	Created Date:	04/30/2024
Completed date:	04/30/2024	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 04/30/2024 09:30 AM Entered By: [redacted]

CM [redacted] attempted to reach Ms. [redacted] via phone but an automated message informed that the Version Wireless phone was out of service.

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:	2024-02-27 09:00:00	Contact Method:	
Contact Time:	09:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	03/26/2024
Completed date:	03/26/2024	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/26/2024 01:23 PM Entered By: [redacted]

TL [redacted] staffed this case with CM [redacted] on this date. CM has attempted to follow up with the family however has been unsuccessful. CM reported that the mothers phone is turned off and they are no longer residing in the home. CM has attempted to obtain the birth records however has been unsuccessful. Autopsy is still pending.

Next Steps
Clear search on parents
Obtain birth records
Obtain autopsy
Present 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:	2024-02-13 11:50:00	Contact Method:	Attempted Phone Call
Contact Time:	11:50 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	DCS Office	Created Date:	02/26/2024
Completed date:	02/26/2024	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Alleged Perpetrator Interview,Notation,Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 02/26/2024 10:39 AM Entered By: [redacted]

CM [redacted] attempted to reach the parents on this date via the phone. There was no answer so CM [redacted] left a text message. The text bubble was blue so it is believed that Ms. [redacted] phone is in service but there was no response.

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:	2024-01-24 09:11:00	Contact Method:	Correspondence
Contact Time:	09:11 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	DCS Office	Created Date:	02/26/2024
Completed date:	02/26/2024	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Alleged Perpetrator Interview,Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 02/26/2024 10:43 AM Entered By: [redacted]

CM [redacted] attempted to reach out to Ms. [redacted] but there was no answer via the phone. CM [redacted] sent a text informing she was attempting to check in but there was no answer. There was a "delivered" receipt under the message but no response.

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:	2024-01-24 09:00:00	Contact Method:	
Contact Time:	09:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	02/22/2024
Completed date:	02/22/2024	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 02/22/2024 02:41 PM Entered By: [redacted]

TL [redacted] staffed this case with CM [redacted] on this date. CM has attempted to follow up with the family however has been unsucessful.

Next Steps
Attempt to follow up with family
Obtain birth records
Obtain autopsy

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:	2024-01-02 09:45:00	Contact Method:	Attempted Phone Call
Contact Time:	09:45 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	DCS Office	Created Date:	01/02/2024
Completed date:	01/02/2024	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 01/02/2024 09:47 AM Entered By: [redacted]

CM [redacted] attempted to reach the parents via the phone on this date. CM [redacted] was unable to reach either parents. The phone rang and an automated message mentioned that the call is being forwarded to voicemail.

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:	2023-12-26 13:18:00	Contact Method:	
Contact Time:	01:18 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	01/02/2024
Completed date:	01/02/2024	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 01/02/2024 10:17 AM Entered By: [redacted]

TL [redacted] staffed this case with CM [redacted] on this date. CM has not been able to follow up with the family due to the family ignoring her messages. CM has refaxed an ROI to obtain the birth records however has been unsuccessful. CM has not received an autopsy.

Next Steps
Attempt to follow up with family
Obtain birth records
Obtain autopsy

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:	2023-12-06 10:26:00	Contact Method:	Correspondence
Contact Time:	10:26 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	DCS Office	Created Date:	12/06/2023
Completed date:	12/07/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 12/07/2023 09:57 AM Entered By: [redacted]

CM [redacted] attempted to reach out to Mr. [redacted] and Ms. [redacted] on this date to get an update on how they are doing and how their grief counseling is going. CM [redacted] planned to inquire on if Mr. [redacted] went back to treatment. CM [redacted] did not receive a response back.

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 09:10:00	Contact Method:	
Contact Time:	09:10 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	11/28/2023
Completed date:	11/28/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 11/28/2023 08:49 AM Entered By: [redacted]

TL [redacted] staffed this case with CM [redacted] this date. CM has faxed a ROI in order to obtain the child's birth records however she has not received them yet.

Next Steps
Follow up with family
Obtain Birth Records

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:	2023-11-09 16:54:00	Contact Method:	
Contact Time:	04:54 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	11/09/2023
Completed date:	11/09/2023	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: 11/09/2023 04:57 AM Entered By: [redacted]

TC conducted a 90 day review with TL [redacted] TL reports that the youth passed away on 9/29/2023. The assigned worker offered the family grief counseling. TL reports that they are still waiting on the birth records.

Next Steps: follow-up with medical records; await autopsy; present 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:	System Completed
Contact Date:	2023-11-01 09:00:00	Contact Method:	
Contact Time:	09:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	11/06/2023
Completed date:	12/02/2023	Completed By:	System Completed

Purpose(s):

Contact Type(s):

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type:	Original	Entry Date/Time:	Entered By:

null

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2023-10-24 09:00:00	Contact Method:	
Contact Time:	09:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	11/09/2023
Completed date:	11/09/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 11/09/2023 04:53 AM Entered By: [redacted]

TL [redacted] staffed this case with CM [redacted] on this date. It was reported that the child passed away on 9/29. The parents agreed for the baby to obtain an autopsy. CM reports that she has requested the PCP records however has not received them yet.

Next Steps
Obtain birth records

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:	2023-10-17 16:02:00	Contact Method:	Correspondence
Contact Time:	04:02 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	DCS Office	Created Date:	12/06/2023
Completed date:	12/06/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 12/06/2023 05:21 PM Entered By: [redacted]

CM [redacted] reached out to Ms. [redacted] on this date to check on her and Mr. [redacted] CM [redacted] asked how the parents are doing and if they were able to get their grief counseling set up. Ms. [redacted] reported that they had been put on a waitlist. The parents have been visiting the cemetery and talking to her which helps a lot but Ms. [redacted] and [redacted] birthday is coming up and it will feel empty without her. Ms. [redacted] is considering reaching out to a different counseling agency.

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:	2023-10-08 00:07:00	Contact Method:	
Contact Time:	12:07 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	DCS Office	Created Date:	10/10/2023
Completed date:	10/10/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/10/2023 04:33 PM Entered By: [redacted]

CM [redacted] received the following email from [redacted]. Email copied and pasted verbatim:

Name: [redacted]
Person ID: #[redacted]
Date of birth: [redacted]
Date of death: 9/29/23
County death occurred: [redacted]
CPS/SIU Case manager: [redacted]
Team Leader/IL: [redacted]

This email is to inform you [redacted], Director of Nursing, will be requesting the autopsy from the Medical Examiner. As soon as she receives it the report will be sent to you via OCS staff, typically [redacted].
Please note it may take as long as 6-9 months for a final autopsy to be completed by the Medical Examiner, due to them awaiting outside lab results such as toxicology.
Please REPLY ALL to this email if you are aware an autopsy was NOT completed.

Also, if you have any questions regarding the medical components, please dont hesitate to reach out to the safety nurse for assistance.
When you have an opportunity, will you please request the birth and pediatrician records and send them to the safety nurse for review?
Thank you!

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:	2023-09-30 10:00:00	Contact Method:	Face To Face
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	School	Created Date:	04/12/2024
Completed date:	04/12/2024	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Medical Exam		
Contact Sub Type:			

Children Concerning

[redacted]

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 04/12/2024 03:30 PM Entered By: [redacted]

On September 30th, 2023 an autopsy was completed by [redacted], M.D. at the Office of the Medical Examiner located in [redacted] TN. The pathological diagnoses included the following:

1. Infant female without significant external traumatic injuries
2. Status post medical intervention
3. Congested and edematous lungs
4. Status post-remote cranial surgery.

Cause of Death: Undetermined while sleeping in an unsafe environment
Other Conditions: Co-sleeping on bed with parent
Manner of Death: Could Not Be Determined
Circumstances of Death: Unknown if external causes of drug(s) were involved.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2023-09-29 13:25:00	Contact Method:	
Contact Time:	01:25 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	DCS Office	Created Date:	10/13/2023
Completed date:	10/13/2023	Completed By:	[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: 10/13/2023 04:16 PM Entered By: [redacted]

CM received notification of screened out referral # [redacted] on this date. CM will address concerns in open investigation. Screened out referral states:

On August 1, 2023, [redacted] was near death. [redacted] found [redacted] unresponsive and 911 was called. [redacted] stated that she was laying down with [redacted] in the bed around 1pm, when [redacted] got up, she couldnt wake [redacted] took [redacted] to [redacted] and [redacted] was transported to [redacted] by ambulance. [redacted] had bruising on her chest, but there was CPR done on her. [redacted] had a dot on her right leg, but it was very small. [redacted] also had a scab on her left eyelid. [redacted] had a lot of dirt under her toenails. There were pictures taken of [redacted] At [redacted] was put on a ventilator, and she had to undergo surgery in August 2023. The exact date of the surgery is unknown, but it was before August 20, 2023. A part of [redacted] skull was removed because there was swelling to her brain, and [redacted] had blood in her lung. The medical staff at [redacted] had concerns that [redacted] would be deaf and blind due to the swelling to her brain. The swelling did go down on [redacted] brain, and the surgery was successful. A feeding tube was placed in [redacted] but [redacted] started to pull the tube out. At that point, [redacted] and the family had to make a decision on keeping the feeding tube in [redacted] or send her to hospice. Prior to hospice, [redacted] was doing better, and she was taken off the ventilator at that time. [redacted] was at [redacted] up until September 18, 2023, and she was transported to [redacted] in [redacted] TN on September 18, 2023. [redacted] appeared protective and concerned about [redacted] wellbeing. [redacted] and [redacted] did stay at the hospital throughout [redacted] whole stay, but the hospital staff had concerns at the end that [redacted] and [redacted] werent that attached.

There are concerns for drugs as well. There were concerns because [redacted] and [redacted] had a history of drugs use. [redacted] was in treatment due to his history of drug use. [redacted] was going to [redacted] Center in [redacted] TN. [redacted] stated that she took a Xanax on August 1, 2023, which its prescribed to [redacted] grandmother. [redacted] grandmother admitted to giving [redacted] the Xanax. On August 1, 2023, [redacted] was mouth swabbed, and it was sent to [redacted]. [redacted] labs came back negative, but it was found out that the mouth swab didnt test for fentanyl. [redacted] stated that he had a history of different type of drugs, and his drug choice is fentanyl. [redacted] stated that he started using fentanyl when he was 15. [redacted] denied recently taken fentanyl and the only thing he will test positive for is marijuana. [redacted] stated that he was using Delta-8 in a vape, recreational on and off. In July 2023, [redacted] tested positive for

Tennessee Department of Children's Services

Case Recording Summary

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

fentanyl, and he last used a day prior to July 19, 2023. [redacted] stated that [redacted] also uses fentanyl. [redacted] stated that in July 2023, he used fentanyl daily. During that time, [redacted] and [redacted] were living with [redacted] grandmother in a barn shed at [redacted] grandmothers home. On September 15, 2023, the DCS personnel visited [redacted] and [redacted] new home. [redacted] and [redacted] consented for a urines drug screen, and [redacted] tested positive for multiple substances. [redacted] tested positive for amphetamine, ecstasy, morphine, and fentanyl. [redacted] became tearful when she was asked to do a drug screen. [redacted] stated that she wouldnt test positive for anything, but her drug screen came back positive for fentanyl. [redacted] and [redacted] were asked about the use of fentanyl, and they denied the use of it. [redacted] stated that he takes prescribed medication, and something that he took is given a false drug screen. [redacted] stated that shes taking [redacted] prescribed medication, so thats most likely why she tested positive for fentanyl. [redacted] medication is Quetiapine Fumarate which is Seroquel. [redacted] stated that she wants to go to the same treatment facility as [redacted] for mental health. [redacted] did have fentanyl in her toxicology. The issue is, [redacted] called [redacted] and [redacted] stated that they gave [redacted] fentanyl when she came in. So, it couldnt be determined if [redacted] was exposed to fentanyl prior to going to [redacted] The hospital and DCS is still looking into the fentanyl being in [redacted] system.

On Wednesday (09.27.2023) at 6:26pm, there were concerns regarding [redacted] mother coming to visit [redacted] at hospice, and [redacted] mother had an overdose. [redacted] mother was given a Narcan, she responded, and she didnt want to go the hospital. [redacted] and [redacted] were present at hospice too, but the hospice staff didnt feel like [redacted] or [redacted] was under the influence. [redacted] mother, and [redacted] were coming and going at hospice with [redacted] on September 27, 2023. The hospice staff stated that [redacted] mother wasnt allowed to visit [redacted] anymore, but [redacted] and [redacted] were able to.

On Thursday, 9/28/2023, [redacted] was cold to the touch, was losing her color, and had difficulty breathing. Hospice Staff did not expect [redacted] to live past the weekend. On Friday, 9/29/2023, at 6:33 AM, [redacted] passed away at hospice. [redacted] cause of death is still pending and there is an open investigation. The Medical Examiner will complete an examine on [redacted] but it is unknown when it will be completed; the referent number is [redacted]. The hospice reported that [redacted] body will be taken to [redacted] but it is unknown why. An autopsy will be completed. The detective thats working on the case is Detective [redacted] and his contact number is [redacted]. Detective [redacted] is with the [redacted] County Sheriff Office.

[redacted] also mentioned that [redacted] passed something in her stool when she came in but it is unknown what it was. [redacted] took a picture of the object, but they did not have the picture for the DCS personnel or law enforcement. It is unknown if it is related to [redacted] death. There are no reports of the family having any other children with fatalities in their home. There are no reports of domestic violence in the home. The familys new home did not appear unfit 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:	2023-09-29 08:30:00	Contact Method:	
Contact Time:	08:30 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	DCS Office	Created Date:	10/04/2023
Completed date:	10/04/2023	Completed By:	[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: 10/04/2023 01:24 PM Entered By: [redacted]

CM [redacted] was informed by [redacted] in [redacted] that [redacted] had passed away on this date (9/29) at 6:33a.m. The medical examiner office in [redacted] was taking the body to [redacted] It is unknown why but it may be due to her receiving care at [redacted] The reference number is [redacted]. It is believed an autopsy will be performed. [redacted] (unknown phone) is the contact person.

CM [redacted] completed a call to the Child Abuse Hotline to report the child death. The intake number is

Narrative Type: Addendum 1 Entry Date/Time: 10/04/2023 01:25 PM Entered By: [redacted]

The intake number is [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:	2023-09-28 16:02:00	Contact Method:	Face To Face
Contact Time:	04:02 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	Other Community Site	Created Date:	10/04/2023
Completed date:	10/04/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	ACV Interview/Observation		
Contact Sub Type:			

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/04/2023 01:50 PM Entered By: [redacted]

CM [redacted] completed a face-to-face visit with [redacted] on this date. CM [redacted] observed [redacted] hospice room to have a crib that had a video camera on the edge. Mr. [redacted] and Ms. [redacted] were present in the room sitting on an extra bed. Mr. [redacted] maternal grandmother was also present and observed holding [redacted] in a chair.

[redacted] was wrapped in multiple blankets to help her stay warm. [redacted] was observed with a pink bow on top of her head. She had a feeding tube in her nose. CM [redacted] was informed they were not giving her nutrition through the tube and instead it was to provide medications such as pain medication. [redacted] appeared to be asleep and was not seen moving or opening her eyes. [redacted] did not appear to be responding to any outside stimuli. It was evidence that [redacted] had lost her color and now looked to be paler and grey. [redacted] breathing seemed labored and had a rattle to it. A picture was taken of [redacted] and will be uploaded to TFACTS.

CM [redacted] was able to speak with the hospice social worker. Hospice staff informed CM [redacted] that [redacted] is now in what they call "hours and days" but they believe it will be just hours before she passes. CM [redacted] requested that she or her supervisor are notified when [redacted] does pass. CM [redacted] provided both numbers so that it could be placed on file. Both the parents have discussed starting grief counesling and that is being set up through hopsice.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2023-09-26 11:19:00	Contact Method:	
Contact Time:	11:19 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	09/26/2023
Completed date:	09/26/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 09/26/2023 04:10 PM Entered By: [redacted]

TL [redacted] staffed this case with CM [redacted] on this date. CM reported that she recently drug screened the parents in which they were positive for fentanyl and MDMA. Child has been moved to hospice.

Next Steps
Staff with legal
Monthly F2F
Update notes

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:	2023-09-18 11:00:00	Contact Method:	
Contact Time:	11:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	Other Community Site	Created Date:	09/25/2023
Completed date:	10/19/2023	Completed By:	System Completed
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

[redacted]

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 09/25/2023 10:05 AM Entered By: [redacted]

CM [redacted] was informed by [redacted] in [redacted] that [redacted] was transfered into their care. Hospice is aware

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:	2023-09-15 13:00:00	Contact Method:	Face To Face
Contact Time:	01:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	Hospital	Created Date:	09/25/2023
Completed date:	09/25/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Medical Exam		
Contact Sub Type:			

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/25/2023 09:48 AM Entered By: [redacted]

CM [redacted] received Dr. [redacted] medical note on this date. CM [redacted] uploaded the report to 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:	2023-09-15 12:22:00	Contact Method:	Face To Face
Contact Time:	12:22 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	Family Home	Created Date:	10/04/2023
Completed date:	10/04/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
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: 10/04/2023 01:04 PM Entered By: [redacted]

CM [redacted] completed a home visit of Mr. [redacted] and Ms. [redacted] new apartment located at [redacted] TN. CM [redacted] was greeted and invited in by Ms. [redacted] CM [redacted] completed a home walkthrough of the apartment. The home had furniture, power, water and food. It is a one-bedroom apartment. Mr. [redacted] was observed sitting on the couch of the living room. Mr. [redacted] asked CM [redacted] if she had an update on why [redacted] ended up in the condition she is. Mr. [redacted] informed he was asking because he was thinking about it and he thinks maybe it was due to a heart condition. He would like an autopsy completed to see.

CM [redacted] requested that both parents complete a drug screen. Mr. [redacted] consented and reported he would only test for the Seroquel that he is prescribed. Due to it being a urine screen, CM [redacted] checked the bathroom prior and had Mr. [redacted] empty out his pockets. Mr. [redacted] tested for amphetamine, MDMA (Ecstasy), Fentanyl and Morphine. Mr. [redacted] denied taking any of the substances besides his prescription. He pulled out his phone and informed that sometimes Seroquel can cause false positives on tests. He denied using ecstasy, morphine or fentanyl. CM [redacted] inquired on when he would be returning to rehab and he reported he plans to as soon as possible but right now he wants to be with [redacted] They dont know if she will improve or if she will pass so he will go back once they know. Mr. [redacted] completed a drug screen consent form and it will be uplaoded to TFACTS.

CM [redacted] asked Ms. [redacted] if she would consent to a drug screen. She said yes but reported she did not have to urinate yet. Ms. [redacted] sat on the couch and drank some water while Mr. [redacted] completed his screen. CM [redacted] looked over and observed that Ms. [redacted] had tears rolling down her face. When it was her turn, CM [redacted] handed her the drug screen cup and noticed that Ms. [redacted] hands were starting to shake. CM [redacted] asked if she thinks she will test for anything and Ms. [redacted] said no, she hasn't been using any substances. CM [redacted] stood in the doorway and observed Ms. [redacted] completing the screen. Ms. [redacted] tested positive for Fentanyl. Ms. [redacted] was very quiet but denied using this substance. Mr. [redacted] chimed in that hers is a false positive too and went back to explaining that Seroquel causes this sometimes. CM [redacted] asked for clarification on how this would be possible since Ms. [redacted] is not prescribed anything and denied use of anything. Ms. [redacted] explained that she has been taking some of Mr. [redacted] Seroquel. CM [redacted] told Ms. [redacted] that they had just recently discussed the importance of her

Tennessee Department of Children's Services

Case Recording Summary

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

not taking other people's medication and that she only uses what is prescribed to her as prescribed. Ms. [redacted] was quiet, and Mr. [redacted] informed that Ms. [redacted] is actually going to start services with [redacted] and that is who prescribes Mr. [redacted] prescription. CM [redacted] explained that if down the road a provider feels Ms. [redacted] needs to be on medications that is fine, as long as they are prescribed and taken properly. In the meantime, this means she is self-medicating with unprescribed medications which goes against the NCPP she signed in August.

CM [redacted] inquired about observing the shed they were living in at Mr. [redacted] grandmother's home, where [redacted] was found unresponsible. Mr. [redacted] and Ms. [redacted] reported that CM [redacted] was welcome to follow behind them. Mr. [redacted] called his grandmother to inform her and she was upset at first but it was explained it is just one of CM [redacted] investigative tasks. CM [redacted] was able to observe the shed and take pictures. The things in the shed have been removed since the parents moved out and the electricity had been disconnected. They allowed CM [redacted] to also observed the inside of the main home on the property. The home was cluttered and had a slight animal odor to it. The parents showed CM [redacted] the room they sometimes stayed in with [redacted] They explained they usually stayed in the shed just to have privacy and independence.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2023-09-12 16:58:00	Contact Method:	Face To Face
Contact Time:	04:58 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	Hospital	Created Date:	09/14/2023
Completed date:	09/14/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	ACV Interview/Observation		
Contact Sub Type:			

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/14/2023 02:38 PM Entered By: [redacted]

CM [redacted] completed a face-to-face visit with [redacted] on September 12, 2023 at 4:58 p.m. Due to [redacted] being deaf, blind and not responding to external stimulus, CM [redacted] was limited in being able to interact with [redacted] was observed moving her left arm and hand, moving her head minimally, opening and closing her mouth and opening and closing her eyes. CM [redacted] rubbed [redacted] foot over the blanket and hand but [redacted] did not respond or interact. [redacted] was observed with a feeding tube in her nose. [redacted] lower half was covered by a hospital blanket and she had no clothes on her upper half of her body.

[redacted] appeared to be bathed and free of any visible injuries. CM [redacted] was able to request to speak with the nurse in charge of [redacted] care that day. The nurse reported there being no change at this time. The nurse reported that the parents had not been to the hospital the last three days. When they visit it's usually later in the day and it is known they got an apartment and they are most likely there when they are not at the hospital. The nurse reported that there is a meeting being held tomorrow and she thinks it is as 1pm regarding the plans for [redacted] No other information is known 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:	2023-08-27 16:30:00	Contact Method:	Face To Face
Contact Time:	04:30 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	Hospital	Created Date:	09/25/2023
Completed date:	09/25/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Medical Exam		
Contact Sub Type:			

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/25/2023 08:44 AM Entered By: [redacted]

CM [redacted] received Dr. [redacted], [redacted] medical note regarding their visit with [redacted] CM [redacted] uploaded the report to 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:	2023-08-09 14:00:00	Contact Method:	
Contact Time:	02:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	DCS Office	Created Date:	09/14/2023
Completed date:	09/14/2023	Completed By:	[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: 09/14/2023 03:01 PM Entered By: [redacted]

CM [redacted] received an email from LCSW [redacted] at [redacted] Children's Hospital at [redacted] on 8/9/23. LCSW [redacted] informed that they confirmed [redacted] did recieve Fentanyl at [redacted] Hospital. At this time they are unable to determine if her Fentanyl exposure was prior to hospitalization. However, she has significantly declined and is now DNR. Parents are aware that her condition is irreversible, and she will either die soon or have significant problems with limited life expectancy.

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:	2023-08-08 12:50:00	Contact Method:	
Contact Time:	12:50 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	DCS Office	Created Date:	09/14/2023
Completed date:	09/14/2023	Completed By:	[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: 09/14/2023 02:51 PM Entered By: [redacted]

CM [redacted] received a message from [redacted] regarding [redacted] toxicology. The expanded urine drug screen came back and she was positive for fentanyl, but they are reviewing the outside medical records to determine when she might have been exposed. LCSW [redacted] informed that [redacted] was getting a small amount of fentanyl at [redacted] Children's Hospital. CM [redacted] was informed that her prognosis isn't great but [redacted] is "still with us."

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:	2023-08-07 13:00:00	Contact Method:	
Contact Time:	01:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	08/28/2023
Completed date:	08/29/2023	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 08/29/2023 01:02 PM Entered By: [redacted]

The Preliminary Near Death (PND) investigation regarding Alleged Child Victim (ACV) [redacted] was debriefed with the following staff: Team Leader (TL) [redacted] Team Coordinator (TC) [redacted] and Director of Critical Incident Support (DCIS) [redacted].

The CPS investigation was assigned on 8/2/23 concerning allegations of Lack of Supervision for ACV [redacted] (8mo). It was reported [redacted] resided with her birth mother [redacted] and birth father [redacted] in [redacted] County. The family resides in separate structure on the property of the paternal great grandmother [redacted] The parents have no other children.

On the afternoon of 8/1/23 [redacted] was found unresponsive by the mother in bed, where they had been co-sleeping. The mother alerted the great-grandmother who initiated CPR [she is certified] and called 911. [redacted] was transported to [redacted] then to [redacted] where she was placed on a vent. [redacted] condition has improved, vent levels have been decreased and there is no longer blood in the lungs. Brain swelling has reduced but residual long-term damage is suspected. Discharge date is unknown currently.

The mother reported she laid down to sleep with [redacted] around 1pm, setting her alarm for 2:15 for work. When she woke she noted [redacted] taking small gasps for air. The great-grandmother noter her eyes were dilated and she could not tell is she was breathing or not when CPR was started. The father had been out of the home for the best three days at [redacted] for A&D treatment at the time of the incident, and was not present [this was confirmed by [redacted] records]. Due to past drug concerns, both the mother and father were requested to drug screen and both consented. The mother was positive for THC and benzodiazepines and the father was positive for THC and amphetamine. The father is prescribed suboxone. The maternal grandmother reported giving the mother a Xanax at the hospital due to nerves over the incident with [redacted] The mother has been appropriate at the hospital. The father demonstrated immature behavior and possibly delayed functioning at the hospital. LE reported finding a bong at the parents residence. There was an open case for DEC at the time of the incident; however, contact has been unsuccessful with the family to that point.

Tennessee Department of Children's Services

Case Recording Summary

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

Next Steps:
-- CM will request ACVs birth, PCP, and current incident medical records. Records will be reviewed and uploaded to TFACTS.
-- CM will request all interviews and information/evidence collected by LE within their investigation and review, summarize, and upload what is shared to TFACTS.
-- CM will complete home visit.
-- CM will request parenting assessment for the parents.
-- CM will complete follow-up drugs screens with the parents.
-- CM will continue to monitor ACVs prognosis and progress, including future discharge, ongoing care, and follow-up/specialty appointments and compliance with the parents.
-- CM will staff case with legal.
-- CM will complete Closing FAST prior to case closure.
-- CM will present findings to the Child Protective Investigative Team (CPIT) for classification review.

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

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2023-08-04 09:00:00	Contact Method:	
Contact Time:	09:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	DCS Office	Created Date:	01/18/2024
Completed date:	01/18/2024	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 01/18/2024 11:12 AM Entered By: [redacted]

CM [redacted] received confirmation from [redacted] Center. They confirmed Mr. [redacted] entered into the [redacted] Center program on 7/31/23 and was discharged on 8/1/23.

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:	System Completed
Contact Date:	2023-08-03 09:00:00	Contact Method:	Face To Face
Contact Time:	09:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	Hospital	Created Date:	09/14/2023
Completed date:	09/15/2023	Completed By:	System Completed
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Medical Exam		
Contact Sub Type:			

Children Concerning

[redacted]

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 09/14/2023 03:07 PM Entered By: [redacted]

CM [redacted] received the medical and care team report for [redacted] on this date from LCSW [redacted] CM [redacted] uploaded the reports to 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:	2023-08-02 22:29:00	Contact Method:	
Contact Time:	10:29 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	DCS Office	Created Date:	08/29/2023
Completed date:	08/29/2023	Completed By:	[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: 08/29/2023 02:59 PM Entered By: [redacted]

CM received notification of screened out referral # [redacted] on this date. CM will address concerns in open investigation. Screened out referral states:

[redacted] is currently in the ICU in [redacted] Childrens Hospital with a severe brain injury due to being found unresponsive in the home. The child abuse assessment team is evaluating the events leading up to the childs condition. There is an event of co-sleeping leading up to the child being unresponsive. The child is possibly near death. The parents are present at the hospital and per the notes of the social worker that spoke to a DCS worker ([redacted] @ [redacted]) today, 08.02.2023, said that they are not supposed to be at the hospital at this time with the child. The hospital is wanting to talk to the on-call person for [redacted] County and find out if the parents need to be removed from the hospital. The contact person is [redacted] @ [redacted]. The hospital is requesting an immediate phone call.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2023-08-02 15:50:00	Contact Method:	
Contact Time:	03:50 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	DCS Office	Created Date:	08/29/2023
Completed date:	08/29/2023	Completed By:	[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: 08/29/2023 03:02 PM Entered By: [redacted]

CM [redacted] spoke with [redacted] Children's Hospital Social Worker, [redacted] on 8/2/23 at 3:50p.m. Ms. [redacted] reported that she had just met with both parents and there are concerns with Mr. [redacted] This is due to a few factors including some of the comments he made to the team about Fentanyl such as wondering if the cardiac arrest was due to that and her being given some at the hospital rather than their home. Both the parents are sweet but they are poor historians. Right now medical staff is still believing her condition is due to SIDS. there is no expected discarhge date for [redacted] 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:	2023-08-02 15:44:00	Contact Method:	Correspondence
Contact Time:	03:44 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	DCS Office	Created Date:	08/02/2023
Completed date:	08/02/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	CPIT (Child Protective Investigative Team)		
Contact Sub Type:			

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 08/02/2023 03:46 PM Entered By: [redacted]

Case Manager (CM) [redacted] sent the referral to the [redacted] County Sheriff's Office in order to convene the Child Protective Investigative Team (CPIT). Detective [redacted] and [redacted] were assigned to this investigation.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2023-08-02 09:00:00	Contact Method:	
Contact Time:	09:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	08/09/2023
Completed date:	08/09/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 08/09/2023 01:44 PM Entered By: [redacted]

TL [redacted] staffed this case with CM [redacted] on this date. CM received case with allegations of LOS. ACV is listed as [redacted] and the AP is listed as [redacted] It was reported that Police were contacted today at 2:37pm regarding [redacted] being unresponsive. [redacted] was unconscious, would not wake up and was having trouble breathing. When police arrived, [redacted] was taken to [redacted] Hospital by EMS. [redacted] was intubated at [redacted] Hospital and transported to [redacted] Hospital. [redacted] stated she laid down with [redacted] around 1pm. [redacted] reported prior to the 911 call, [redacted] came in to wake her up. [redacted] tried to wake up [redacted] and couldnt wake her up. [redacted] called 911 and started CPR. [redacted] could not breathe on her own on the way to the hospital. There are concerns [redacted] may have rolled over onto [redacted] while sleeping, but hospital staff are not certain of this. [redacted] left the home last night and was supposed to be on his way to a sober living home in New Jersey. When he was contacted today to be informed about [redacted] condition he was in [redacted] Tn.

CM spoke with Det. [redacted] with [redacted] CSO on 8/1 in which he reported that the family is currently at the hospital, and they were currently doing a search on the home. Det. [redacted] reported that the bed was soaked in urine, and they observed a bong used to smoke THC. It was reported that the family lives in a shed in the backyard of the grandmothers home. The shed had electricity and running water. CM [redacted] arrived to [redacted] Childrens Hospital on 8/1 at 930pm and observed the baby in which she is currently on a ventilator. CM took photos of the baby.

CM spoke with paternal grandmother, [redacted] in which she reported that the parents used to reside with her however they moved out and moved in with the paternal great grandmother.

CM then spoke with paternal great grandmother in which she reported that she sent mom and grandmothers roommate to the store to get some items. Mom then returned to the home with the baby. Grandmother reported that it was about 2:25pm when mom came running out yelling stating that the baby was not breathing. Grandmother reported that the babys eyes were dilated. Grandmother reported that she couldnt tell if the baby was breathing or not, so she began to do CPR. Grandmother reported that she was certified in CPR. Grandmother reported that mother was frantic, so she asked for the mother to move out of the way. Grandmother stated that the baby was breathing out of her nose and not her mouth. Grandmother then contacted 911 at 2:37pm. EMS arrived to the home and transferred the child to the hospital.

Tennessee Department of Children's Services

Case Recording Summary

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

Grandmother reported that her other daughter [redacted] was at the home during this time as well. Grandmother admitted that she gave mom a Xanax at the hospital. CM asked Grandmother about drug concern in which she reported that dad has a history however mom does not. CM spoke with dad in which he reported that he has been at [redacted] in [redacted] TN for the past three days. CM was able to verify with [redacted] that he was there. Dad reported that he was prescribed suboxone. Dad stated that he took Roxies about two months ago. He reported that he has not used fentanyl since he was 18 years old. CM reported that dad observed to be delayed and was passing gas, burping, and laughing throughout the duration of the interview.

CM then spoke with mom in which she reported that she does co sleep with the baby sometimes and she does have a pack and play. Mom stated that today she was co sleeping with the baby and she gave her a bottle and fell asleep. Mom reported that they slept for about 7 hours. Mom stated that she woke up due to the daughter pinching her. Mom fell asleep again around 1pm. Child fell asleep with a bottle in her hand. Mom had an alarm set for 215pm so she could go to work. Mom went to wake the baby up and the baby was on her back. Mom tried to wake her up however she was not responding. Mom then grabbed the child and ran to the grandmother for help. Mom stated that the baby was taking small gasps of air. Grandmother called 911 and it took about 10 min before anyone showed up. EMS then transferred the baby to the hospital. Mom has Alport syndrome and it's genetic.

CM spoke with medical staff in which they reported that they believed the baby had a seizure however they are unsure. Medical staff are still running tests and unsure if the baby will make it. Medical staff reported that the child will be in the hospital for at least two weeks.

Parents consented to a drug screen in which mom was positive for THC and Benzodiazepine. Dad was positive for THC and Amphetamines. TL then staffed with TC [redacted] and Legal in which it was determined to complete an IPA with the family. The parents have no other children.

Next Steps
Complete HV
Obtain and upload medical records
Obtain LE records
Staff case with legal

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:	2023-08-01 23:22:00	Contact Method:	Face To Face
Contact Time:	11:22 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	Hospital	Created Date:	09/15/2023
Completed date:	09/15/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Parent/Caretaker Interview		
Contact Sub Type:			

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/15/2023 11:08 AM Entered By: [redacted]

Cm [redacted] met with [redacted] in the patient waiting room of [redacted] Hospital at [redacted] Ms. [redacted] was present during the interview. [redacted] was asked to go over what happened that day starting from the start of the day leading up to the incident. [redacted] reported he wouldn't be able to do that because he was not home. Mr. [redacted] reported that he was at [redacted] Center in [redacted] TN when [redacted] was found unresponsive. When he got a call from Ms. [redacted] he reports he left and was driving close to 150mph to get back to [redacted] and Ms. [redacted] Mr. [redacted] denied having any concerns against Ms. [redacted] He reports that he and Ms. [redacted] both meet her basic needs such as making sure she is fed, bathed and changed. Cm [redacted] asked Mr. [redacted] if the [redacted] Center is contacted will they be able to confirm he was there. Mr. [redacted] said yes and CM [redacted] informed she would get a release to them so they can confirm.

CM [redacted] asked Mr. [redacted] why he went to the recovery center. Mr. [redacted] reported that he has a history of substance abuse. CM [redacted] had prior knowledge that another case was previously opened with concerns that Mr. [redacted] is on probation and tested for Fentanyl. In that referral concerns were disclosed that he last used on 7/19/23 but he usually uses on a daily basis. It was also reported that Mrs. [redacted] also uses Fentanyl and last used three weeks prior. Mr. [redacted] was asked if a previous worker had reached out and told him about this and he said no, he denies he has any other open case. CM [redacted] asked about Fentanyl use and he denied any current or recent use. He reported he used to use it and actually started using Fentanyl at age 15 after he started stealing the patches from his grandmother. CM [redacted] asked Mr. [redacted] if he had failed his drug screen at probation in July and he said no. He never tested for Fentanyl. He reports he is on probation from a charge he had years ago when he a teen.

CM [redacted] asked Mr. [redacted] if anything would show up if a drug screen was completed. Mr. [redacted] reported he would consent to one and joked that everyone would show up. He then said all that would show up is his Suboxone and maybe THC because he uses Delta 8 in a vape. Mr. [redacted] tested for THC, Buprenorphine and Amphetamine. CM [redacted] asked if he can confirm any prescriptions he has and he said he would, but he did not have them on him at the moment since they were at the hospital. CM [redacted] asked Ms. [redacted] if she would test for anything and Mr. [redacted] started to laugh. He then was giggling and said to Ms. [redacted] "awwww Granny gave you a Xanax today

Tennessee Department of Children's Services

Case Recording Summary

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

and now youre going to test for it." Mr. [redacted] grandmother, [redacted] had walked back in and heard this and she told Mr. [redacted] to "shut up."

It was observed that Mr. [redacted] has some delays or possibly under the influence. Mr. [redacted] and his family continuously made excuses that it is just because he has severe ADHD. Mr. [redacted] continued to make jokes of the whole situation such as the drug screens. When things like an immediate protection agreement was discussed, Mr. [redacted] would not stay still and make jokes, burp loudly and fart. Mr. [redacted] struggled staying focues and required a lot of attention. In order to build rapport but also gauge his bond with [redacted] CM [redacted] asked both parents to show her their favorited pictures and videos of [redacted] Ms. [redacted] was able to show some good ones. Mr. [redacted] showed a few but most of them were blurry or off focus. Some of the videos were just a few seconds long. It was unclear if he was possibly under the influence while taking them.

Cm [redacted] uploaded Mr. [redacted] drug screen results into TFACTS.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2023-08-01 23:21:00	Contact Method:	Face To Face
Contact Time:	11:21 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	Hospital	Created Date:	08/02/2023
Completed date:	08/03/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Alleged Perpetrator Interview		
Contact Sub Type:			

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 08/02/2023 04:41 PM Entered By: [redacted]

CM [redacted] completed a face-to-face interview with Ms. [redacted] at [redacted] Children's Hospital ([redacted] on 8/1/23 at 11:21 p.m. CM [redacted] was informed by nursing staff that Mr. [redacted] and Ms. [redacted] were in the family waiting room. CM [redacted] walked to the waiting room and waited for the parents to return due to them previously stepping out. When the parents entered the room, CM [redacted] introduced herself and explained what her role in the investigation is. Due to there being multiple family members around, Ms. [redacted] was asked if she would be willing to talk to CM [redacted] privately. CM [redacted] and Mr. [redacted] talked privately inside an empty room of the hospital.

CM [redacted] attempted to create a timeline of events leading up to [redacted] being found unresponsive. Ms. [redacted] reported she would start with what they did on the night of July 31st. Ms. [redacted] took [redacted] with her to the store to pick up formula for [redacted] uses Enfamil and has been formula fed since birth. While at the store there were no concerns or issues with [redacted] had fallen asleep on the ride home. Due to this [redacted] did not fall asleep at night until around 12am on 8/1/23. [redacted] fell asleep on Ms. [redacted] queen-sized bed. Ms. [redacted] was lying to the left of the bed and [redacted] was to the right of the bed. Ms. [redacted] explained she has a pillow at the edge of the bed to keep [redacted] from falling off the bed but [redacted] was not placed against it. [redacted] fell asleep with a bottle of formula. Around 7am, Ms. [redacted] woke up to [redacted] pinching her. Ms. [redacted] reported that [redacted] nails are a bit long since they haven't gotten around to cutting them. Ms. [redacted] gave [redacted] some toys to play with and put on Cocomelon (childrens show). [redacted] fell back asleep on the bed around 1pm and she was lying on her back holding a bottle with both hands. Ms. [redacted] fell asleep too and did not wake up until her alarm went off at 2:15pm. Ms. [redacted] had work at Domino's later in the evening and had preset her alarm. When she got up she observed [redacted] on the side of her. Ms. [redacted] demonstrated how [redacted] was and pressed both her palms/hands together, tilted her head and put her hands under her head. [redacted] legs were scrunched up towards her belly. Ms. [redacted] did not think anything of it at first and attempted to get [redacted] up. [redacted] was not waking up so Ms. [redacted] was saying "hey [redacted] and trying to awake her by moving her head. [redacted] was not responding and around that time she heard Ms. [redacted] coming out the back door. Ms. [redacted] grabbed [redacted] and ran to Ms. [redacted] because she did not know what to do. Ms. [redacted] doesn't know CPR and she also did not want to hurt [redacted]

Tennessee Department of Children's Services

Case Recording Summary

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

Ms. [redacted] started to do CPR on [redacted] and [redacted] was breathing funny and taking little gasps of air. Ms. [redacted] is the one who called 911 and it she believes it took 10 minutes for the ambulance to show up. It is believed a fire truck showed up right after. Ms. [redacted] rode in the front seat of the ambulance. Prior to that she believes first responders worked on [redacted] for about 15 minutes before they headed to the hospital. Ms. [redacted] believes they arrived to [redacted] around 4pm. She was informed that [redacted] would be transferred to [redacted] Children's Hospital as they are better equipped for the level of care [redacted] required.

Ms. [redacted] was asked about substance abuse from her and others in the home. Ms. [redacted] admitted she does smoke marijuana on occasion. She admitted that Ms. [redacted] had provided her with half a Xanax at the hospital a few hours prior. She denied any prior use of Xanax or any other medications. Ms. [redacted] mentioned that she has an anti-depressant but denied she has taken it yet. Ms. [redacted] was thanked for the information.

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:	2023-08-01 21:42:00	Contact Method:	Face To Face
Contact Time:	09:42 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	DCS Office	Created Date:	08/02/2023
Completed date:	08/02/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
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: 08/02/2023 04:07 PM Entered By: [redacted]

CM [redacted] responded out to [redacted] Children's Hospital ([redacted] on 8/1/23 at 9:42p.m to initiate the investigation. CM [redacted] was informed by hospital staff that [redacted] was in room [redacted] Cm [redacted] observed [redacted] lying on a hospital bed. [redacted] had on a neck brace and was not conscious. She was breathing with the assistance of a ventilator. [redacted] was observed to be connected to various medical equipment that included tubes, wires, IV's and a blood pressure leg cuff. At one point, CM [redacted] observed an electroencephalogram on [redacted] where medical staff was monitoring [redacted] brain activity.

[redacted] is fair skinned with hair that appears to be dirty blonde. [redacted] had a blanket over her and CM [redacted] requested permission from medical staff to remove the blanket to observe [redacted] and take photos. The nurse removed the blanket for CM [redacted] [redacted] skin appeared to be clean but she had visible dirt under her fingernails and toenails. CM [redacted] observed blood on her right index finger. The bedside nurse reported that is from where they did a finger stick to check [redacted] blood sugar. Some dried blood was observed on [redacted] right antecubital space. CM [redacted] inquired about it and the nurse took a wipe and wiped it off and reported she believes it was from the previous IV location. [redacted] had a very small red dot on the outside of her right leg. The area was not bleeding but it also did not appear to be scabbed over yet. [redacted] left eye lid was observed with a tiny abrasion that was scabbed over. She had what appeared to be a dime size bruise on the top right side of her head just before her hairline. CM [redacted] did not observe any visible injuries to the left side of [redacted] body. CM [redacted] was only able to observe the front of her body as she was lying on her back and it was not requested for her to be moved due to her medical condition. At certain angles it appeared that [redacted] had some light grey bruising to her chest, by her breastbone/sternum.

In the presence of CM [redacted] Ms. [redacted] talked with a doctor who discussed a blood transfusion for [redacted] Ms. [redacted] consented to this and signed the paperwork. CM [redacted] moved on to interviewing the family in a different room while [redacted] received the blood transfusion.

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:	2023-08-01 20:30:00	Contact Method:	Face To Face
Contact Time:	08:30 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	DCS Office	Created Date:	08/02/2023
Completed date:	08/02/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Referent Interview		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 08/02/2023 03:43 PM Entered By: [redacted]

CM contacted referent on 8/1/23. Referent notification sent via CARAT 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:	2023-08-01 20:00:00	Contact Method:	
Contact Time:	08:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	[redacted]
Location:	DCS Office	Created Date:	08/02/2023
Completed date:	08/02/2023	Completed By:	[redacted]
Purpose(s):	Safety - Child/Community		
Contact Type(s):	Case Summary		
Contact Sub Type:	Opening		

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 08/02/2023 03:36 PM Entered By: [redacted]

Case manager (CM) [redacted] was notified of the P1 investigation on 8/1/23 and assigned investigation on 8/2/23 by Reader [redacted]. Investigation received with allegation(s) of Lack of Supervision (severe) to Alleged Child Victim (ACV), [redacted] by Alleged Perpetrator (AP), [redacted]

CM verified the familys history of involvement with the Department through a search of TFACTS. The following history was found:

Private Provider Worker / [redacted] / [redacted] / CM: [redacted] / Sup: [redacted] / 12-28-18

Closed Court Custody:
[redacted] / 5-4-18 to 12-28-18
[redacted] / 4-19-12 to 4-8-13
[redacted] / 10-2-13 to 6-1-15
Pending: [redacted] / No allegation / 8-1-23
Awaiting Screening: None
Submitted: None
Open CPS:
ASMT / [redacted] / DEC / no classification / CM: [redacted] / Sup: [redacted] / ACV: [redacted]

Tennessee Department of Children's Services
Tennessee Child Abuse Hotline Summary
[redacted]
Substantiated: INV / [redacted] / AS PS 5-2-11 / 5-2-11
Death: None
Screen Outs: [redacted],

Tennessee Department of Children's Services

Case Recording Summary

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

Case Status: Close Organization: [redacted] Region

[redacted]
History (not listed above): No or if yes, (unsubstantiated or ASMT & RL)
Track (INV or ASMT) / Case #/ Allegation/ Classification/ End Date
ASMT / [redacted] / PHA / LOS / no services needed 2-23-18 / 3-13-18
ASMT / [redacted] / LOS / DEC / PHA / no services needed 9-9-21 / 9-10-21
SIU / [redacted] / LOS / AUPU 10-19-18 / 11-1-18
INV / [redacted] / SEE / AUPU 7-9-18 / 7-25-18
SIU / [redacted] / MDM / AUPU 7-5-18 / 7-11-18
ASMT / [redacted] / LOS / Services needed court ordered 5-18-18 / 5-22-18
ASMT / [redacted] / LOS / Services recommended and accepted 2-22-17 / 4-7-17
ASMT / [redacted] / LOS / Services recommended and accepted 3-31-15 / 5-29-15
ASMT / [redacted] / LOS / no services needed 12-1-14 / 1-16-15
INV / [redacted] / LOS / DEC / AUPU 5-5-14 / 6-19-14
INV / [redacted] / SEE / AUPU 5-2-11 / 5-2-11
INV / [redacted] / ENN / LOS / AUPU no date / 8-1-08
INV / [redacted] / PHA / AUPU no date / 4-23-01
INV / [redacted] / PHA / AUPU no date / 9-13-05

Cm [redacted] completed checks on all perpetrators at the following websites:
TN Sex Offender - negative
National Sex Offender - negative
TN Felony Offender - negative
Out of State Probation Registry - negative
TN Meth Offender negative
Abuse Registry negative

Initial Family Composition:
[redacted] (8 mos) resides with her birth mother, [redacted] and her birth father, [redacted] grandmother, [redacted] and her roommate, [redacted] reside in the main home on the property.
Notification of referral was sent to the Judge.

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: 08/01/2023

Assignment Date: 08/02/2023

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	Yes	[redacted] / 04/17/2024
2	[redacted]	[redacted]	Abuse Death	[redacted]	[redacted], 12:00 AM	Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[redacted] / 04/17/2024
3	[redacted]	[redacted]	Drug Exposed Child	[redacted]	[redacted], 12:00 AM	Allegation Substantiated / Perpetrator Substantiated	Yes	[redacted] / 09/29/2023
4	[redacted]	[redacted]	Lack of Supervision	[redacted]	[redacted], 12:00 AM	*Allegation Substantiated / Perpetrator Substantiated	Yes	[redacted] / 04/25/2024

* = This allegation set has been reclassified.

Preliminary Near Death: [redacted]

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: CM [redacted] is closing investigation as Allegation Unsubstantiated, Perpetrator Unsubstantiated for the Abuse Death of [redacted] Allegations of Drug Exposed Child and Lack of Supervision will be classified as Allegation Substantiated, Perpetrator Substantiated.

D. Case Workers

Case Worker: [redacted]

Date: 04/17/2024

Team Leader: [redacted]

Date: 04/22/2024

E. Investigation Summary

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

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

CM [redacted] was unable to interview [redacted] due to her age and condition.

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

CM [redacted] received a message from [redacted] on August 8th, 2023 regarding [redacted] toxicology. The expanded urine drug screen came back and she was positive for fentanyl, but they are reviewing the outside medical records to determine when she might have been exposed. LCSW [redacted] informed that [redacted] was getting a small amount of fentanyl at [redacted] Children's Hospital. LCSW [redacted] informed that they confirmed [redacted] did receive Fentanyl at [redacted] Hospital. At this time they are unable to determine if her Fentanyl exposure was prior to hospitalization.

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

Ms. [redacted] reported that she was co sleeping with [redacted] prior to her being found unresponsive. Ms. [redacted] consented to a drug screen and was positive for Benzodiazepine, MDMA and THC. Mr. [redacted] reported that he was not present when [redacted] was found unresponsive. He was at [redacted] Center in [redacted] TN. Mr. [redacted] reported that he has a history of substance abuse which includes Fentanyl. Mr. [redacted] tested for THC, Buprenorphine and Amphetamine. CM [redacted] asked if he can confirm any prescriptions he has and he said he would, but he did not have them on him at the moment since they were at the hospital.

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

N/A

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

N/A

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