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

Intake

Intake ID: [redacted]

Intake Taken By: [redacted]

Intake Date/Time: 09/15/2024 10:04 AM [redacted]

Track Assigned: Investigation

Priority Assigned: 1

Screened By: [redacted]

Date Screened: 09/16/2024

Investigation

Investigation ID: [redacted]

First County/Region Assigned: [redacted]

Date/Time Assigned : 09/16/2024 08:55 AM

First Team Leader Assigned: [redacted]

Date/Time Assigned : 09/16/2024 12:00 AM

First Case Manager Assigned: [redacted]

Date/Time Assigned : 09/16/2024 12:00 AM

Allegations

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

Referent(s)

Referent Name: [redacted]

Role to Alleged Victim(s): [redacted]

Referent Address:

Referent Phone Number: [redacted]

Type of Contact: I-3 Phone

Notification: E-mail

Narrative: NON-CUSTODIAL CHILD DEATH

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

TFACTS Notes: Case [redacted] is listed as open and there is nothing under the case.

Family Case ID Detailed History:
Open Court Custody/FSS/FCIP No
Closed Court Custody Yes (older than 5yrs)

Pending: None
Awaiting Screening: None
Submitted: None

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Open CPS: None
Substantiated: Yes - [redacted] /DEC/ [redacted] Allegation Substantiated / Perpetrator Substantiated / closed 2021

Death: None
Screen Outs: Yes (older than 5yrs)

History (not listed above): Yes (older than 5yrs)

County of Jurisdiction: [redacted]
School/ Daycare: No

Reporter's name/relationship: [redacted]

-Child/Family Identification and Relationship Introduction Paragraph:
[redacted] (4 months) and [redacted] (3) resides with birth mother, [redacted] (24) and birth father, [redacted] (23) in [redacted] County.

-Are you requesting immediate assistance from DCS to your location, or only an immediate phone call?
DCS is needed on site. Address is [redacted] TN.

-Please provide a brief summary of the concerns and why DCS is needed to respond immediately.
On 09.15.2024 around 3:00am, the mother went to feed [redacted] was given a bottle. Things were fine and [redacted] went back to sleep. At 9:30AM on 09.15.2024 the mother went to [redacted] room to wake [redacted] up. The mother found [redacted] not breathing. The mother took [redacted] in the living and handed [redacted] over to the father. The father knows CPR and the father started CPR and chest compressions. The mother called 911. CPR was continued until LE arrived. EMS was not far behind. EMS took over CPR and EMS started to work on [redacted] was taken by EMS to [redacted] hospital. The hospital pronounced [redacted] deceased, unknown time. Detectives came out on scene and took over. The parents have been notified of [redacted] death. [redacted] was born prematurely and had trouble breathing at that time. One month later after his birth, [redacted] was medically cleared through Dr. [redacted] (pediatrician). The parent's said [redacted] has not been sick, nothing out of the norm.

[redacted] had a bruise on the left lower jawbone and EMS was not concerned. The hospital wanted a detective to respond to the hospital as they said there was bruising around the neck. It is not clear if this is the same mark (bruise on jawbone) that the hospital is referring to. There is no more information for the bruising at this time. There is no concern for foul play at this time. There are no concerns for the brother in the home. There are no concerns for neglect at this time. A blanket and small items (small pillow and another outfit for the child) were in the crib, but nothing that raised alarms.

It has not been stated DCS has been involved with the family in the past. LE # [redacted]

-Are there any concerns for the safety of a Department of Children's Services Case Manager responding to the child's home?
The family lives in a trailer. Things look fine and not out of place.

-Anything additional to add to this initial report for the responding worker to know prior to response?
LE is on scene.

Intake Notation: None

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Screener Notation: None

Emailed/Paged CPSI On Call: Paged for immediate assistance.

Recipients	Time Issued	Response Received	Devices	Responses
[redacted]	09-15-24 10:32:37 AM	[redacted]	---	[redacted]v
Email Sent				
	09-15-24 10:32:37 AM	[redacted]	---	PRIVATE
	09-15-24 10:32:37 AM	[redacted]	09-15-24 10:33:28 AM	[redacted] Received

Machine Answered

Investigation Track - Child Death (assignment agreed upon by On Call Director, [redacted])
[redacted], CAH Director, on 9/16/24 @ 8:40am

Notified Child Death/Preliminary Near-Death Notification Group via Email:
[redacted]t
Child Programs Director: [redacted]

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Participant(s)

Name: [redacted] [redacted]

Gender: Male

Date of Birth: [redacted]

Partipant ID: [redacted]

SSN:

Race:

Age: 3 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:

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Name: [redacted] [redacted]

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

SSN: | Race: White | Age: Deceased

Address: , Tennessee

Deceased Date: 09/15/2024

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:

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Name: [redacted] [redacted]

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

SSN: | Race: | Age: 24 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:

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Name: [redacted] [redacted]

Gender: Female
Date of Birth: [redacted]
Partipant ID: [redacted]
SSN:
Race:
Age: 25 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:

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Name: Unknown Participant [redacted] Unknown

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

SSN: Race: Age:

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: Yes

DCS Foster Child: No

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:

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Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-06-10 04:37:00	Contact Method:	
Contact Time:	04:37 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	06/10/2025
Completed date:	06/10/2025	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 06/10/2025 03:38 AM Entered By: [redacted]

Team Leader [redacted] has reviewed the submitted case for closure.
The Department received a referral with the allegations of Abuse Death

Classification: Allegation Unsubstantiated / Perpetrator Unsubstantiated & Allegation Unsubstantiated / Perpetrator Unsubstantiated (for unknown perpetrator)
- [redacted] preliminary autopsy results showed that [redacted] had a subdural hematoma and hemorrhaging in both eyes. [redacted] has been charged with Aggravated Assault, First Degree Murder, and Child Abuse/Neglect/Endangerment of a child under 8 in the death of [redacted] Law Enforcement found incriminating messages and google searches on Mr. [redacted] and Ms. [redacted] phones.

The victim (s) was listed as [redacted]

The alleged perpetrator (s) was listed as Unknown, [redacted] & [redacted]

Response was met by Case Manager (CM) [redacted]

The initial SAFETY was completed on 9/22/2024 Immediate Intervention Recommended

The initial FAST was completed on 9/22/2024 High Need/Risk
- [redacted] autopsy showed a subdural hematoma and a hemorrhage in the optic nerve. The full report has not been received, but there are concerns that [redacted] was shaken. [redacted] mother and alleged father have been arrested and charged with Aggravated Assault in relation to [redacted] death and the charges may be upgraded. An IPA was put in place stating that [redacted] would remain the care of his paternal grandmother and have no contact with his parents at this time.

Collateral Contact: - October 23, 2024 the case was presented to the Child Protective Investigation Team (CPIT) and the Abuse Death allegations were classified as Allegation Substantiated, Perpetrator Substantiated.

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Case Recording Summary

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

Initial Notification to Juvenile Court & CS-0740 Sent to [redacted] County ([redacted]) Juvenile Court Per Protocol.

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Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-06-06 15:30:00	Contact Method:	
Contact Time:	03:30 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	06/06/2025
Completed date:	06/06/2025	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Case Summary		
Contact Sub Type:	Closing		

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 06/06/2025 02:31 PM Entered By: [redacted]

On September 15, 2024 the Department of Childrens Services (DCS) received a referral for an allegation of Abuse Death regarding Alleged Child Victim (ACV) [redacted] (4 months). The Alleged Perpetrator (AP) for this referral was unknown. Allegations of Abuse Death were later added with the Alleged Perpetrators listed as [redacted] and [redacted] Response for this referral was initially met by Child Protective Services Case Manager (CM) [redacted] and CM [redacted] on call. The case was assigned to CM [redacted] by Team Leader (TL) [redacted] on September 16, 2024. This case was worked in conjunction with [redacted] County Sheriffs Office ([redacted]CSO) Detective [redacted]

[redacted] lived at home with birth parents [redacted] and [redacted] Also in the home was his brother, [redacted] (3).

On September 15, 2024, Ms. [redacted] went to wake [redacted] up and noticed that he was not breathing. Ms. [redacted] took [redacted] to the living room and handed him to Mr. [redacted] Mr. [redacted] began cardiopulmonary resuscitation (CPR) and Ms. [redacted] contacted 911. CPR continued until law enforcement arrived at the home. Emergency Medical Services (EMS) arrived at the home and continued CPR. [redacted] was transported to [redacted] Community Hospital ([redacted]CH) by EMS where [redacted] was pronounced deceased. Ms. [redacted] and Mr. [redacted] were notified of [redacted] death. The parents reported that [redacted] had been born prematurely and had trouble breathing. [redacted] was medically cleared a week later by his pediatrician, Doctor (Dr.) [redacted] EMS noticed a bruise on the left lower jawbone of [redacted] but no concerns were noted. Detectives were asked to respond to the hospital after bruising around [redacted] neck was observed. The referent noted no concerns of foul play, neglect, or concerns for [redacted] brother. Law enforcement observed a blanket, small pillow, and an outfit in [redacted] crib.

On 9/15/2024 CM [redacted] and CM [redacted] arrived at the family home ([redacted] CM [redacted] and CM [redacted] were notified that Ms. [redacted] Mr. [redacted] and Detective (Det.) [redacted] had left the residence and went to [redacted]CH. The officers on scene advised that they had obtained photographs of each area of the residence and had completed a video reenactment. The officers stated that Ms. [redacted] and Mr. [redacted] had laughed during the video reenactment and while they realized that everyone processed grief differently, they found it odd that the parents had reacted

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Case Status: Close Organization: [redacted] Region

that way. CM [redacted] and CM [redacted] were given permission to enter the home under the condition that they touch nothing in the home and were escorted into the home by law enforcement officers. CM [redacted] and CM [redacted] assessed for the environmental conditions and obtained photographs of each room. The residence was observed to be a two-bedroom mobile home. In the corner of Ms. [redacted] and Mr. [redacted] room, CM [redacted] and CM [redacted] observed a bassinet, which appeared to be uneven (with the right side lower than the left, when looking at it from the doorway), with clothes inside, a small boppy style pillow (blue and white polka dots). A blue blanket with what appeared to be skateboard designs was observed on the floor near the bassinet. CM [redacted] observed two small dogs in the room belonging to [redacted] along with dog feces in the floor along with some clutter. The dogs were contained in [redacted] bedroom for the duration of the visit and law enforcement reported that they had been kept in there as the scene was being processed.

CM [redacted] and CM [redacted] arrived at [redacted] CH. Upon arrival, CM [redacted] was escorted to the room where [redacted] body was located by Nurse [redacted] (last name unknown). Nurse [redacted] assisted CM [redacted] in obtaining photographs of [redacted] body. Nurse [redacted] explained that due to the time that had passed since [redacted] death that the marks on his body and the coloration looked different than when he first arrived. Nurse [redacted] advised that the concerning bruises and marks that were identified upon [redacted] arrival were a bruise near the back of his left jawline near his neck, a small abrasion approximately one centimeter in diameter on [redacted] lower right back, and bruise located on [redacted] head on the right side approximately two centimeters above the top of his right ear. All of these marks were photographed with Nurse [redacted] assistance and using a measure scale. CM [redacted] inquired if the marks were considered non-accidental trauma or if there could be a feasible explanation for any of the marks being caused accidentally. Nurse [redacted] reported that could not be stated with any certainty at that this time but that it was the medical staffs opinion that the marks were inconsistent with what would be expected to be seen on a child that age. Nurse [redacted] advised that it was her understanding that an autopsy would be completed early the following morning.

At approximately 2:00 p.m. CM [redacted] and CM [redacted] interviewed Ms. [redacted] privately in a hospital room at [redacted] CH. [redacted] was also present during the interview. CM [redacted] asked Ms. [redacted] to provide a timeline for the last 24 hours starting at 12:00pm on September 14, 2024 leading up to the time of them finding that [redacted] did not appear to be breathing. Ms. [redacted] advised that around 12:00 p.m. on September 14, 2024, she and [redacted] had been in the floor in the living room watching tv, showing [redacted] toys, and laughing. Ms. [redacted] reported that she had put [redacted] down for a nap in the basinet which was in the living room at that time and she watched a movie with [redacted] began to cry, and Ms. [redacted] got him out of the bassinet. Ms. [redacted] stated that she played Call of Duty with Mr. [redacted] while [redacted] was on her lap for approximately 5 minutes. Ms. [redacted] then made food for [redacted] while Mr. [redacted] continued playing Call of Duty. At approximately 4:00pm, [redacted] was asleep in his bassinet until he woke at 5:00pm. Ms. [redacted] reported that [redacted] played outside with Mr. [redacted] while [redacted] was inside the home with her. Ms. [redacted] gave [redacted] a bath at 7:00pm and he played inside the home. Ms. [redacted] estimated that Mr. [redacted] gave [redacted] a bath at 9:00pm. [redacted] and [redacted] went to bed around 10:00pm. Ms. [redacted] fed [redacted] at 3:00am on September 15, 2024. He then went back to sleep. Ms. [redacted] stated that she was woken up by [redacted] that morning at approximately 9:00am. Ms. [redacted] checked on [redacted] by touching his chest, neck, and back to see if he was breathing. Ms. [redacted] did not feel a pulse or see that [redacted] was breathing. Ms. [redacted] woke Mr. [redacted] up and asked him to check if [redacted] was breathing. Mr. [redacted] agreed that [redacted] did not seem to be breathing and 911 was contacted. Ms. [redacted] reported that Mr. [redacted] laid [redacted] down to go to sleep, but Mr. [redacted] had not got up with [redacted] through the night. Ms. [redacted] explained that after she woke to feed [redacted] at around 3:00 a.m., she and [redacted] had stayed awake watching his tablet until about 5:00 a.m. at which time [redacted] fell asleep, and she went back to bed. Ms. [redacted] advised that she did not know of any marks or bruises on [redacted] and would not have an explanation for how he might have sustained them. When asked if she had ever had concerns for Mr. [redacted] getting frustrated with [redacted] or having an explosive temper in general Ms. [redacted] stated Mr. [redacted] was not aggressive and she had no concerns he might have hurt [redacted] Ms. [redacted] appeared to be unaware of safe sleep practices.

CM [redacted] and CM [redacted] interviewed Mr. [redacted] privately in a hospital room at [redacted] CH. Mr. [redacted] advised that starting at 12:00pm on September 14, 2024, he was outside preparing the grill for dinner. At one point, Mr. [redacted] reported he went to the store to get meat and returned to the home around 5:30pm or 6:00pm. Mr. [redacted] explained that he went inside at

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Case Status: Close Organization: [redacted] Region

various times during that time span and did not have any concerns with [redacted] or Ms. [redacted] during that time. Mr. [redacted] denied that [redacted] acted differently during the day, but did say that at one point [redacted] started screaming because he was tired. Mr. [redacted] explained that they tried to keep [redacted] awake during the day. Mr. [redacted] stated that he recalled around 5:00 or 6:00 p.m. That he observed [redacted] in his chair and that [redacted] smiled at him. Mr. [redacted] stated that he had concerns about [redacted] birth and reported that he felt [redacted] had sustained some type of injury during his birth (via cesarean section) that was caused by one of the nurses. Mr. [redacted] believes a nurse may have caused injury to [redacted] because [redacted] wants to lean over or sideways". Mr. [redacted] stated that since [redacted] had been born, his head would flop to the side and his head needed to be held nearly all the time. Mr. [redacted] reported that he grilled chicken and steak shish-kabobs. Mr. [redacted] stated that he gave [redacted] a bath in the bathroom sink around 9:00 p.m. and then put him to bed. Mr. [redacted] stated that he estimated that [redacted] had gone to bed at around 11:30 p.m.12:00 a.m. Mr. [redacted] denied hearing [redacted] cry during the night, but noted Ms. [redacted] had told him that she fed [redacted] at 3:00am. Mr. [redacted] reported that when he discovered [redacted] was not breathing, he started to blow in [redacted] mouth but that it was not working. 911 was contacted and Mr. [redacted] performed CPR by pushing on [redacted] chest 30 times using only his two fingers and then blowing in [redacted] mouth after each of the 30 pushes. Mr. [redacted] reported that when he put [redacted] to bed, [redacted] was wearing a diaper and was swaddled in a comforter. A c-shaped pillow was also present in the bassinet. Mr. [redacted] reported that he had not observed any bruising on [redacted] head, jawline, or any type of abrasion/scab/rash/ flaky area on [redacted] back. Mr. [redacted] reported that when he bathed [redacted] he would hold [redacted] in his hands over the bathroom sink and did not flip him over while bathing him but rather would take his hand and rub it on [redacted] back and buttocks area to wash him. Regarding any bruises, Mr. [redacted] advised that [redacted] could at times be rough with [redacted] but that he did not know of him having caused any marks or bruises. Mr. [redacted] reiterated that it was possible that [redacted] might have fallen over and again explained his concerns about [redacted] not being able to sit up straight.

On September 16, 2024, CM [redacted] received a phone call from Detective [redacted] Det. [redacted] reported that [redacted] autopsy showed a subdural hematoma and a hemorrage in the optic nerve. Det. [redacted] informed CM [redacted] that they were going to have the parents come to the sheriff's office on this date for the interviews.

At approximately 1:00pm on September 16, 2024, CM [redacted] arrived at [redacted] County Sheriffs Office ([redacted]CSO) to observe interviews with Ms. [redacted] and Ms. [redacted] Ms. [redacted] was interviewed first by Det. [redacted] and Sergeant (Sgt.) [redacted] Ms. [redacted] reported that the family woke up around 8:00am and they stayed at home all day on September 14th, 2024. Ms. [redacted] stated that Mr. [redacted] gave [redacted] a bath in the bathroom sink near their bedroom and then he put [redacted] to bed around 10:00pm. Ms. [redacted] noted that she has never given [redacted] a bath because she is afraid to bathe babies. She reported she didn't give [redacted] a bath until he was older. According to Ms. [redacted] woke up at 3:00am and she fed him a bottle. She stated that [redacted] was breathing normally at this time. After the bottle, [redacted] fell back asleep. [redacted] did not finish his bottle. Ms. [redacted] reported that [redacted] takes iron drops and that he had breathing issues when he was in the Neonatal Intensive Care Unit (NICU). It was stated that Mr. [redacted] had told law enforcement that [redacted] might have had brain issues. Ms. [redacted] denied that [redacted] had issues with his brain and stated that her mother told Mr. [redacted] that due to him having a lack of oxygen at birth. Ms. [redacted] stated that her and Mr. [redacted] are the primary caregivers. She denied anyone else being at the home during the weekend. Ms. [redacted] reported that she usually takes care of [redacted] and Mr. [redacted] takes care of [redacted] Mr. [redacted] lays [redacted] down each night on his side. Ms. [redacted] denies getting frustrated with [redacted] when he would cry. She denied that Mr. [redacted] gets frustrated with the kids. Ms. [redacted] stated she believes [redacted] died from Sudden Infant Death Syndrome (SIDS). Det. [redacted] and Sgt. [redacted] took a break from Ms. [redacted] interview and went to interview Mr. [redacted]

Mr. [redacted] interview began at approximately 1:45pm. Mr. [redacted] informed Det. [redacted] and Sgt. [redacted] that he and Ms. [redacted] played Call of Duty War Zone on September 14th, 2024 before he gave [redacted] a bath. Mr. [redacted] reported that [redacted] was sitting on Ms. [redacted] lap while they were playing the game and then he gave [redacted] a bath and put him to bed. Mr. [redacted] reported that [redacted] woke up around 3:00am and then went back to bed. Mr. [redacted] and Ms. [redacted] woke up around 9:30am or 10:00am on September 15th, 2024 and Ms. [redacted] told Mr. [redacted] that [redacted] was not breathing. Mr. [redacted] reported he checked on [redacted] and told Ms. [redacted] to call 911 while he started CPR. Mr. [redacted] stated that when he

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blew in [redacted] mouth during CPR, yellow snot came out of [redacted] nose. Mr. [redacted] noted that prior to Sunday morning, [redacted] has been fine. Mr. [redacted] reported that on September 14th he spent the majority of the day outside and that he went to [redacted] by himself to get shish kabobs because they were grilling out on that day. Mr. [redacted] reported that [redacted] only had chicken kabobs and he had to wait at the store for them to make him steak kabobs too. Mr. [redacted] stated that when he came back home from the store on Saturday, [redacted] was in his swing smiling at Ms. [redacted] Mr. [redacted] mentioned that Ms. [redacted] leaves [redacted] in his swing for long periods of time. Mr. [redacted] usually bathes [redacted] every two or three days in the bathroom sink. Mr. [redacted] stated that [redacted] smelled like spoiled milk and that his poop smelled really bad. Mr. [redacted] reported that when he was giving [redacted] a bath, [redacted] was screaming and crying. He was also kicking and moving his head. Mr. [redacted] stated that [redacted] could have hit his head on the sink, but denied seeing him do it. Mr. [redacted] reported that he holds [redacted] head in the palm of his hand while he is giving him a bath. Mr. [redacted] stated that he does get frustrated when the kids scream. Mr. [redacted] reported that a case worker told him there was a bruise on the back of [redacted] head and side. He denied seeing the bruises when he gave [redacted] a bath. Mr. [redacted] said that [redacted] stopped crying when the bath was over and he was quiet. Mr. [redacted] stated that he never shook the baby because his dad told him that it could kill the baby. He denied that [redacted] hit his head. Mr. [redacted] reported that [redacted] went to sleep after the bath. Det. [redacted] and Sgt. [redacted] took a break from Mr. [redacted] interview and returned to interview Ms. [redacted]

Ms. [redacted] stated that [redacted] has never received bruises in her care and denied that any accidents happened this weekend. Ms. [redacted] reported that her, [redacted] and [redacted] went with Mr. [redacted] to [redacted] on Saturday. They went to the [redacted] in [redacted]. Ms. [redacted] stated that she was with [redacted] while Mr. [redacted] was giving [redacted] a bath. She reported that she heard [redacted] crying during the bath. Ms. [redacted] was asked about playing video games on Saturday. She stated that she told the case worker and law enforcement that they played video games prior to [redacted] bath on Saturday. She noted that [redacted] was laying on her chest while they played the game. After they finished playing the game, Mr. [redacted] gave [redacted] a bath and put him to bed. Ms. [redacted] stated that at 4:00am on Sunday morning, she laid [redacted] back down and then went to lay in [redacted] bed. Ms. [redacted] was asked about checking on [redacted] Sunday morning. Ms. [redacted] stated that she did touch [redacted] chest and back to see if he was breathing. She reported that Mr. [redacted] told her to check to see if [redacted] was breathing. Ms. [redacted] said that Mr. [redacted] puts [redacted] to bed every night. Ms. [redacted] stated that she has never dropped her baby. Ms. [redacted] noted that [redacted] snores when he sleeps. She stated that she has never shaken or hit [redacted] or [redacted] She denied seeing Mr. [redacted] shake or hit the kids. Ms. [redacted] became tearful at the end of the interview.

While Det. [redacted] was interviewing Ms. [redacted] Sgt. [redacted] continued the interview with Mr. [redacted] CM [redacted] was unable to observe that portion of Mr. [redacted] interview. Sgt. [redacted] stated that Mr. [redacted] asked for a lawyer and the interview was ended.

Mr. [redacted] and Ms. [redacted] were placed in the interview room together. They were speaking low and it was difficult to hear what they were speaking about. Mr. [redacted] mentioned something about [redacted] hitting [redacted] with a toy. Mr. [redacted] told Ms. [redacted] to ask for a lawyer if law enforcement continues to ask questions.

CM [redacted] spoke with Assistant District Attorney (ADA) [redacted] after the interviews. ADA [redacted] reported that the medical examiner did not note the bruising while they were observing the autopsy. ADA [redacted] stated that there was a subdural hematoma, hemorrage in the optic nerve, and a lot of blood in the brain. Due to what is known from the autopsy at this time, they are leaning towards it being ruled a homicide.

On September 17, 2024, CM [redacted] spoke with Det. [redacted] regarding the information that was found on Ms. [redacted] and Mr. [redacted] phones. The phones showed that Ms. [redacted] and Mr. [redacted] had made over 50 internet searches that started on September 13, 2024. They searched questions such as, do babies bruise after they died, do babies stop breathing before they die, why is my baby in such a deep sleep and not waking up?, why is my baby tensing up like hes trying to get some air when we barely shake him?, and baby not breathing well after we shook him. Ms. [redacted] had a message on her phone from her stepfather saying that they needed to keep their story straight. Information found on Ms.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Status: Close Organization: [redacted] Region

[redacted] phone also indicated that Mr. [redacted] may not be the biological father of [redacted] Det. [redacted] informed CM [redacted] that Ms. [redacted] and Mr. [redacted] were going to be arrested and charged with Aggravated Assault and Failure to Protect. The case will be presented to the grand jury on September 25, 2024 for charges of First Degree Murder.

On September 25, 2024, CM [redacted] was notified by Det. [redacted] that Ms. [redacted] and Mr. [redacted] were indicted on charges of First Degree Murder and Aggravated Child Abuse/Neglect/Endangerment of a Child Under 8.

On February 14, 2025, CM [redacted] was informed by Det. [redacted] that [redacted] autopsy had came back. The manner of death was listed as homicide and the cause of death was blunt force injuries.

On September 16, 2024, an autopsy was completed by Dr. [redacted] Forensic Center, [redacted], TN. The autopsy stated, The decedent is a 4 month old male infant who was reportedly found unresponsive at home and was pronounced dead at [redacted] Children's Hospital. Autopsy revealed subdural hemorrhage. The dura, brain, bilateral eye globes with optic nerves and en bloc spine with spinal cord and nerve roots were fixed in formalin and submitted to the [redacted] for detailed Neuropathology examination. The cause of death is blunt force injuries. The manner of death is homicide. The blunt force injuries consist of a subdural hemorrhage and a hemorrhage in the anterior epicardial surface of heart. The report also notes that [redacted] had a 0.25 inch abrasion on the crus of left ear helix, 0.5 inch green-brown contusion on the left lower jaw, 1/8 inch abrasion on the left 1st finger, and a 0.5 inch abrasion on the right lower back.
The brain was sent to [redacted] for further examination. The neuropathology report noted a subarachnoid hemorrhage (acute with features of very early organization), cerebral cortical contusion (right inferior-lateral occipital), uncal herniation (left), optic nerve sheath (subdural, intradural) hemorrhage, bilateral globes without significant abnormalities, spine with multilevel foci of scant subdural, intradural, and perineural hemorrhage, and frequent individual and clustered amyloid precursor protein-positive axonal varicosities/spheroids of cerebral and brainstem white matter.

On October 23, 2024 CM [redacted] presented this case to [redacted] County ([redacted] Child Protective Investigation Team (CPIT). Those in attendance were TL [redacted] Det. [redacted] Assistant District Attorneys [redacted] and [redacted], Childrens Advocacy Center (CAC) Victim Services Supervisor [redacted], CAC Therapist [redacted], Dr. [redacted], and [redacted] with the [redacted] Juvenile Court. The team was in agreement that there is a preponderance of evidence that supports the substantiation of Abuse Death.

Per DCS Policy 14, Work Aid 1, Section G:

Child Death is defined as:
a) Any child death caused by abuse or neglect. b) Any unexplained death of a child when the cause of death is unknown or pending an autopsy report. c) Any child death caused by abuse or neglect resulting from the parent or legal custodian/caretaker failure to stop another persons direct action that resulted in the death of the child. Child deaths are always treated as severe abuse.

On September, 15 2024 an Immediate Protection Agreement (IPA) was implemented stating that Ms. [redacted] and Mr. [redacted] contact with sibling, [redacted] would be supervised by [redacted] After additional information was provided, on September 16, 2024 an IPA was implemented stating that [redacted] would remain with Ms. [redacted] and have no contact with Ms. [redacted] and Mr. [redacted] Throughout the course of the investigation, a petition was filed by DCS to transfer custody of [redacted] to relatives, [redacted] and [redacted] remains in the care of Mr. and Mrs. [redacted] and does not have contact with Ms. [redacted] and Mr. [redacted] Ms. [redacted] and Mr. [redacted] remain incarcerated in [redacted] County Jail.

There is a preponderance of evidence that supports the substantiation for Abuse Death against [redacted] and [redacted]

Tennessee Department of Children's Services

Case Recording Summary

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

[redacted] This case will be closed and classified as Allegation Substantiated, Perpetrator Substantiated for Abuse Death against [redacted] and [redacted]

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-06-06 14:50:00	Contact Method:	
Contact Time:	02:50 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	06/06/2025
Completed date:	06/06/2025	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 06/06/2025 01:58 PM Entered By: [redacted]

Case Manager (CM) [redacted] spoke with [redacted] regarding [redacted] Mrs. [redacted] stated that [redacted] is doing well and really enjoys his headstart program. [redacted] went to the eye doctor last week and has to wear glasses due to being farsighted and having an eye that turns in. Mrs. [redacted] reported that [redacted] language has improved and that he talks nonstop. Mrs. [redacted] said that her and Mr. [redacted] are considering filing to adopt [redacted]

CM [redacted] asked Mrs. [redacted] if the family was in need of anything at this time, she stated no.

CM [redacted] informed Mrs. [redacted] that the case would be closing.

CM [redacted] thanked Mrs. [redacted] for her time and the visit was ended.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-05-15 01:00:00	Contact Method:	
Contact Time:	01:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	05/27/2025
Completed date:	05/27/2025	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 05/27/2025 08:59 AM Entered By: [redacted]

CASE REVIEW:
The parents have stipulated to the finding outlined in the Dependency and Neglect petition filed by the Department of Childrens Services. The surviving child resides in [redacted], Tennessee with a relative. Case Manager (CM) [redacted] will follow up with the caregiver to discuss how [redacted] is doing (address the childs well being and safety)
All investigative tasks have been completed. Closing Summary has been sent to supervision for reviewing.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-05-01 11:58:00	Contact Method:	
Contact Time:	11:58 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	05/01/2025
Completed date:	05/01/2025	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 05/01/2025 11:10 AM Entered By: [redacted]

CASE REVIEW:
Case Manager (CM) [redacted] attend the court hearing for the family. During the court proceedings the parents stipulated to the findings of Dependence/Neglect due to the parents being incarcerated.
The parents will need to complete the following actions before filing a petition to regain custody of the child
complete parenting assessment and a mental health assessment (follow recommendations)
resolve criminal matters
obtain/maintain stable housing.

The draft of the closing summary has been sent to supervision for review.
At this time all investigative tasks have been completed.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-05-01 09:30:00	Contact Method:	Face To Face
Contact Time:	09:30 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Court	Created Date:	05/07/2025
Completed date:	05/07/2025	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Court Hearing		
Contact Sub Type:			

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 05/07/2025 07:44 AM Entered By: [redacted]

On May 1, 2025, Case Manager (CM) [redacted] attended a court hearing regarding custody of [redacted]

Present during the hearing:
Judge [redacted] (Juvenile Court)
[redacted] (Department of Children's Services Attorney)
[redacted] (Guardian Ad Litem)
(Mr. [redacted] Attorney)
(Ms. [redacted] Attorney)
[redacted] (Department of Children's Services Case Manager)
[redacted] (Department of Children's Services Court Liaison)
[redacted] (Father)
[redacted] (Mother)
[redacted] (Custodian, via Zoom)
[redacted] (Custodian, via Zoom)

Ms. [redacted] and Mr. [redacted] stipulated to [redacted] being Dependent and Neglected due to their incarceration. Ms. [redacted] and Mr. [redacted] also agreed to complete parenting and mental health assessments, have stable housing, and have all criminal matters taken care of before refiling for custody of [redacted] Ms. [redacted] and Mr. [redacted] can have no contact with [redacted]

Mrs. [redacted] reported that [redacted] is doing well in her and Mr. [redacted] care.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-04-25 10:30:00	Contact Method:	
Contact Time:	10:30 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	05/27/2025
Completed date:	05/27/2025	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

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

CASE REVIEW:
The family has another court appearance May 1, 2025 at 9:30a. The surviving child is residing with relatives in [redacted], Tennessee. The remain incarcerated.
A draft of the closing summary has been sent to supervision for review.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-04-21 15:30:00	Contact Method:	
Contact Time:	03:30 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	06/06/2025
Completed date:	06/06/2025	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 06/06/2025 01:47 PM Entered By: [redacted]

Case Manager (CM) [redacted] spoke with [redacted] regarding [redacted] Mrs. [redacted] stated that [redacted] is doing well and he is not in a headstart program. Mrs. [redacted] noted no concerns.

Mrs. [redacted] asked CM [redacted] if her and Mr. [redacted] could video conference into the court hearing. CM [redacted] will ask for a Zoom link.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-04-10 16:34:00	Contact Method:	
Contact Time:	04:34 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	04/10/2025
Completed date:	04/11/2025	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 04/10/2025 03:38 PM Entered By: [redacted]

Case Manager (CM) [redacted] has completed the closing summary draft. Team Leader (TL) [redacted] has reviewed the summary and sent to Team Coordinator (TC) [redacted] for review.
CM [redacted] has uploaded the necessary required documents.
The surviving child is currently residing with a family friend, the home is an open foster home. An Expedited Home Study (EHS) was not completed as the placement is a current foster home. The lack of EHS being completed was a directive of Team Coordinator (TC) [redacted]

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-03-27 13:16:00	Contact Method:	
Contact Time:	01:16 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	03/27/2025
Completed date:	03/27/2025	Completed By:	[redacted]
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 03/27/2025 12:22 PM Entered By: [redacted]

TC [redacted] has reviewed this case

Items to be uploaded-genogram, intake, police report, expedited
Follow up to see if a Tennessee Early Intervention referral had been completed.
There was a pending court review on 1-9-25 in which the outcome of the hearing needs to be documented.
Per TL [redacted] CM was contacting Alleged Child Victim [redacted] caretakers for monthly follow up-this needs to be updated.
CM is to work on the closing summary

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-03-19 12:00:00	Contact Method:	
Contact Time:	12:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	04/03/2025
Completed date:	04/03/2025	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 04/03/2025 02:06 PM Entered By: [redacted]

CASE REVIEW:
Team Leader (TL) [redacted] has reviewed the case and provide Case Manger (CM) [redacted] with feedback about the case documentation.

Missing Information:
Case intake form
This is what was discussed in the February Case Review
CM [redacted] reported that she is checking in with [redacted] caregivers monthly to discuss his progress.
But I do not see any notations about his contact with the family to discuss check ins for the other child.

Can we set a date for the draft of the closing summary? Per phone conversation we can schedule you an office day to get this completed if needed?

Enter a note of the date/time that the petition was filed with the juvenile court for the transfer of custody.
You have a court hearing note that says that there would be a court hearing on January 9, 2025 Was there a court hearing on January 9, 2025. If so there is no documentation for that hearing. If the hearing was reset please document that the hearing was reset.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-03-07 10:50:00	Contact Method:	
Contact Time:	10:50 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	06/06/2025
Completed date:	06/06/2025	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 06/06/2025 01:45 PM Entered By: [redacted]

Case Manager (CM) [redacted] spoke with [redacted] regarding [redacted] Mrs. [redacted] reported that [redacted] is doing well and they hope to have him enrolled in headstart soon.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-02-20 14:50:00	Contact Method:	
Contact Time:	02:50 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	02/25/2025
Completed date:	02/25/2025	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 02/25/2025 09:10 AM Entered By: [redacted]

Case Manager (CM) [redacted] received and reviewed a copy of the autopsy report for [redacted]

[redacted] autopsy was performed at [redacted] Forensic Center by Doctor [redacted] on September 16th, 2024.

The cause of death is blunt force injuries. The manner of death is homicide.

The blunt force injuries consist of a subdural hemorrhage and a hemorrhage in the anterior epicardial surface of heart. The report also notes that [redacted] had a 0.25 inch abrasion on the crus of left ear helix, 0.5 inch green-brown contusion on the left lower jaw, 1/8 inch abrasion on the left 1st finger, and a 0.5 inch abrasion on the right lower back.

The brain was sent to [redacted] for further examination. The neuropathology report noted a subarachnoid hemorrhage (acute with features of very early organization), cerebral cortical contusion (right inferior-lateral occipital), uncal herniation (left), optic nerve sheath (subdural, intradural) hemorrhage, bilateral globes without significant abnormalities, spine with multilevel foci of scant subdural, intradural, and perineural hemorrhage, and frequent individual and clustered amyloid precursor protein-positive axonal varicosities/spheroids of cerebral and brainstem white matter (with foci of irregular, streay staining).

The full report is available under the documents tab.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-02-13 14:00:00	Contact Method:	
Contact Time:	02:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	06/06/2025
Completed date:	06/06/2025	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 06/06/2025 01:43 PM Entered By: [redacted]

Case Manager (CM) [redacted] spoke to [redacted] regarding [redacted] Mrs. [redacted] reported that [redacted] is doing well and has been well behaved. No concerns were reported.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-02-07 10:00:00	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	02/11/2025
Completed date:	02/11/2025	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 02/11/2025 12:14 AM Entered By: [redacted]

CASE REVIEW:
There are no updates at this time. CM [redacted] reported that the last time that she spoke with [redacted] caregivers, last month, the caregivers reported no concerns for [redacted] CM [redacted] reported that she is checking in with [redacted] caregivers monthly to discuss his progress. The parents remain in jail at this time. Autopsy is still pending.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-01-22 10:00:00	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	01/27/2025
Completed date:	01/27/2025	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 01/27/2025 10:45 AM Entered By: [redacted]

CASE REVIEW:
The parents remain incarcerated at this time, next court date for criminal matters has been set for March 14, 2025. [redacted] is reported to be doing well with his custodian. For the juvenile matter this case has not been adjudicated at this time as the court is requesting the childs medical records. CM [redacted] will be present for the next juvenile court hearing. [redacted] is not currently in counseling but he has an assessment to determine what services he needs prior to starting school. Autopsy is still pending.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-01-09 13:58:00	Contact Method:	
Contact Time:	01:58 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	01/09/2025
Completed date:	01/09/2025	Completed By:	[redacted]
Purpose(s):	Service Planning		
Contact Type(s):	Administrative Review		
Contact Sub Type:			

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 01/09/2025 12:58 PM Entered By: [redacted]

This case is overdue. Death Autopsy is pending at this time.
Once autopsy is received CM will need to reach out to ,the DCS Team Leader and Law Enforcement to determine next steps. Case will need to be presented to the CPIT Team.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-01-09 09:30:00	Contact Method:	Face To Face
Contact Time:	09:30 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Court	Created Date:	04/03/2025
Completed date:	04/03/2025	Completed By:	[redacted]

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

Contact Type(s): Court Hearing

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 04/03/2025 02:24 PM Entered By: [redacted]

On January 9, 2025, Case Manager (CM) [redacted] attended a court hearing regarding custody of [redacted]

Present during the hearing:
Judge [redacted]
[redacted] (Juvenile Court)
[redacted] (Department of Children's Services Attorney)
[redacted] (Guardian Ad Litem)
(Mr. [redacted] Attorney)
(Ms. [redacted] Attorney)
[redacted] (Department of Children's Services Case Manager)
[redacted] (Department of Children's Services Court Liaison)
[redacted] (Father)
[redacted] (Mother)
[redacted] (Custodian, via Zoom)

The court hearing was reset for May 1, 2025 at 9:30am to allow time to subpoena the records and wait for the autopsy results.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2025-01-02 10:45:00	Contact Method:	
Contact Time:	10:45 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	06/06/2025
Completed date:	06/06/2025	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 06/06/2025 01:39 PM Entered By: [redacted]

Case Manager (CM) [redacted] spoke with [redacted] regarding [redacted] Mrs. [redacted] reported that [redacted] is doing well in her and Mr. [redacted] care. Mrs. [redacted] denied having any concerns regarding [redacted] Mrs. [redacted] informed CM [redacted] that they are working on getting [redacted] assessed so he can start headstart.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2024-12-11 12:00:00	Contact Method:	
Contact Time:	12:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	12/15/2024
Completed date:	12/15/2024	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 12/15/2024 12:58 AM Entered By: [redacted]

CASE REVIEW:
Autopsy is still pending. [redacted] remains in the care of a relative and there are no reported concerns for the child. The next court hearing is January 9, 2025. Case will be presented to the Child Protective Investigation Team once the autopsy is returned. The parents remain incarcerated at this time.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2024-11-21 10:00:00	Contact Method:	
Contact Time:	10:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	11/22/2024
Completed date:	11/22/2024	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 11/22/2024 10:06 AM Entered By: [redacted]

CASE REVIEW:
Autopsy is still pending. The parents are currently incarcerated as they have been charged with First Degree Murder as a result of the childs death. [redacted] remains in the custody of a relative. The next court date, for juvenile court, is January 9th, 2025 at 930a.
The custodian for [redacted] is working on getting [redacted] insurance established so that they can get him in on to speech services and established with a primary care physician.

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:	2024-10-24 09:30:00	Contact Method:	Face To Face
Contact Time:	09:30 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Court	Created Date:	11/01/2024
Completed date:	11/01/2024	Completed By:	[redacted]

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

Contact Type(s): Court Hearing,Sibling Interview/Observation

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 11/01/2024 11:38 AM Entered By: [redacted]

On October 24th, 2024, Case Manager (CM) [redacted] attended a court hearing regarding custody of [redacted]

[redacted] and [redacted] had separate hearings regarding the matter.

Present during Mr. [redacted] hearing:
Judge [redacted] (Juvenile Court)
[redacted] (Department of Children's Services Attorney)
[redacted] (Guardian Ad Litem)
(Mr. [redacted] Attorney)
[redacted] (Department of Children's Services Case Manager)
[redacted] (Department of Children's Services Court Liaison)
[redacted] (Father)
[redacted] (Custodian)

Mr. [redacted] informed the court that Mr. [redacted] has an attorney for his criminal charges. The attorney for that matter is [redacted] Mr. [redacted] has a court hearing regarding the charges on December 13th, 2024 at 9:00am. Mr. [redacted] waived his 3 day hearing and right to have the hearing within 30 days. The next court hearing was scheduled for January 9th, 2024 at 9:30am.

Present during Ms. [redacted] hearing:
Judge [redacted] (Juvenile Court)
[redacted] (Department of Children's Services Attorney)
[redacted] (Guardian Ad Litem)
(Ms. [redacted] Attorney)

Tennessee Department of Children's Services

Case Recording Summary

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

[redacted] (Department of Children's Services Case Manager)
[redacted] (Department of Children's Services Court Liaison)
[redacted] (Mother)
[redacted] (Custodian)

Ms. [redacted] has a court hearing regarding the criminal charges on December 13th, 2024 at 9:00am. Ms. [redacted] waived his 3 day hearing and right to have the hearing within 30 days. The next court hearing was scheduled for January 9th, 2024 at 9:30am.

CM [redacted] spoke with [redacted] (Custodian). Mr. [redacted] reported that [redacted] was adjusting well and is getting along with the other children. Mr. [redacted] was holding [redacted] told CM [redacted] hi. [redacted] appeared comfortable with Mr. [redacted] was dressed appropriately for season and setting. [redacted] hygiene appeared to be maintained. CM [redacted] did not observe any concerning marks or bruises on [redacted]

CM [redacted] spoke with [redacted] (Custodian). Ms. [redacted] and CM [redacted] discussed the services that [redacted] is in need of such as speech. Ms. [redacted] stated that she has been in contact with TennCare and has requested a copy of [redacted] insurance card.

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:	2024-10-23 08:30:00	Contact Method:	Face To Face
Contact Time:	08:30 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Other Community Site	Created Date:	11/01/2024
Completed date:	11/01/2024	Completed By:	[redacted]

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

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

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 11/01/2024 11:21 AM Entered By: [redacted]

Child Protective Investigation Team (CPIT) convened per Child Protective Services (CPS) policies #14.3 Section G # 6 as well as 14.6 and per local protocol for [redacted] County ([redacted]

Alleged Perpetrator: [redacted]
Allegation: Abuse Death
Classification: Allegation Substantiated, Perpetrator Substantiated

Alleged Perpetrator: [redacted]
Allegation: Abuse Death
Classification: Allegation Substantiated, Perpetrator Substantiated

Ms. [redacted] and Mr. [redacted] have been charged with First Degree Murder and Child Abuse/Neglect/Endangerment for a child under 8 in the death of [redacted]

Members present for CPIT were as follows:
[redacted] (CAC)
([redacted] Juvenile Court)
[redacted] (DCS Team Leader)
[redacted] (DCS-Investigator)
[redacted] (DCS-Investigator)
[redacted] (DCS-Investigator)
[redacted] (DCS-Investigator)
[redacted] (DCS-Investigator)
[redacted] (CSO)
[redacted] (DCS [redacted] Drug Team Leader)

Tennessee Department of Children's Services

Case Recording Summary

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

[redacted] (CAC)
[redacted] (DCS-Investigator)
[redacted] (DCS Investigator)
[redacted] (DAs office)
[redacted] Co. Sheriffs Office)
[redacted] (DCS-Investigator)
[redacted] PD)
[redacted] (CAC)
[redacted] (DCS Investigator)
[redacted] (DCS-Team Leader)
[redacted] (DAs office)
[redacted] (CAC-Forensic Interviewer)

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:	2024-10-22 14:30:00	Contact Method:	
Contact Time:	02:30 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	10/25/2024
Completed date:	10/25/2024	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/25/2024 05:31 PM Entered By: [redacted]

Case Manager (CM) [redacted] reviewed and uploaded [redacted] medical records from [redacted] Children's Hospital and [redacted] Community Hospital.

[redacted] was transferred to [redacted] Children's Hospital after birth on [redacted] and remained in the Neonatal Intensive Care Unit (NICU) until his discharge on May 10th, 2024.

[redacted] was admitted to [redacted] Community Hospital on September 15th, 2024 at 10:25am. [redacted] was pronounced deceased at 10:37am by Dr. [redacted]. The records indicate that [redacted] was cold and pale when he arrived to the hospital in cardiac arrest. Bruising was observed on the left side of [redacted] chin and neck.

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:	2024-10-16 11:00:00	Contact Method:	
Contact Time:	11:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	11/22/2024
Completed date:	11/22/2024	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 11/22/2024 10:06 AM Entered By: [redacted]

CASE REVIEW:

A petition was filed on behalf a relative to have custody of [redacted] This relative is a certified foster parent. Both parents were arrested and charged with First Degree Murder, Child Abuse/Endangerment/Neglect of a child under the age of 8yo. The next court hearing is scheduled for October 24, 2024. Autopsy results for [redacted] is pending.
Case Manager (CM) [redacted] has received hospital records, Primary Care Physician, [redacted] Medical Center, and [redacted] These records will need to be uploaded into TFACTS. CM [redacted] has also requested from [redacted] Community, where the child was born, but those records have not been received.
CM [redacted] will continue to entered documentation timely. Team Leader (TL) [redacted] will staff case with Team Coordinator (TC) to discuss if CM [redacted] needs to continue making monthly contact with [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:	2024-09-25 20:12:00	Contact Method:	
Contact Time:	08:12 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	06/06/2025
Completed date:	06/06/2025	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 06/06/2025 02:13 PM Entered By: [redacted]

Case Manager (CM) [redacted] was notified by Detective [redacted] that [redacted] and [redacted] were indicted on charges of First Degree Murder by the grand jury.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2024-09-19 16:15:00	Contact Method:	
Contact Time:	04:15 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	10/01/2024
Completed date:	10/01/2024	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/01/2024 11:56 AM Entered By: [redacted]

Case Manager (CM) [redacted] received and reviewed [redacted] medical records from his Primary Care Provider.

[redacted] had appointments at this office on the following dates:

September 4th, 2024- These records note that the visit was a well child check and the parents noted nasal congestion and a rash. Vaccines were given on this date.
July 12th, 2024- These records indicate this visit was a well child check and an encounter for circumcision. The notes state Failure to Thrive (FTT) in infant and a referral to Pediatric Urology is needed.
May 28th, 2024- This visit was a well child check.
May 14th, 2024- [redacted] was prescribed Poly-Vi-Sol Oral Solution at this visit.

The records have been uploaded and available under the documents tab.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2024-09-19 14:40:00	Contact Method:	
Contact Time:	02:40 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	09/19/2024
Completed date:	09/19/2024	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/19/2024 01:50 PM Entered By: [redacted]

Case Manager (CM) [redacted] faxed a request for medical records to [redacted] Health requesting all medical records pertaining to [redacted] from [redacted] Community Hospital and [redacted] Community Hospital.

CM [redacted] also faxed a request for medical records to [redacted] primary care provider at [redacted] Health Medical [redacted] Pediatrics in [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:	2024-09-18 12:00:00	Contact Method:	
Contact Time:	12:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	10/21/2024
Completed date:	10/21/2024	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 10/21/2024 08:23 AM Entered By: [redacted]

The death investigation regarding Alleged Child Victim (ACV) [redacted] aw was debriefed with the following staff: Case Manager (CM) [redacted] CM [redacted] CM [redacted] Team Leader (TL) [redacted], TL [redacted] Team Coordinator (TC) [redacted] CPS Director (CPSD) [redacted], and Director of Critical Incident Support (DCIS) [redacted].

The CPS investigation was assigned in TFACTS on 9/15/24 concerning the death of ACV [redacted] (4mo). It was reported [redacted] resided with his birth mother [redacted] birth father [redacted] and sibling [redacted] 3yo] in [redacted] County.

On the morning of 9/15/24 the mother reportedly found [redacted] unresponsive in the bassinet he had been placed to sleep the evening prior. 911 was called and [redacted] were transported to the hospital where pronounced deceased. Final autopsy results are pending. Some marks were noted on [redacted] body including a small circular scab on his lower right back, bruising around the jaw line, and a bruise on the right side of the head above the ear. Preliminary autopsy results revealed subdural hematoma, hemorrhage in the optic nerve, and blood in the brain.

The parents have denied knowledge of any injury to [redacted] The father reported [redacted] to sleep in his bassinet on his side at approximately 9:30pm the night prior. The mother reported to feeding [redacted] as 3am at which time she reported he appeared fine. Between 9-10am the 3yo sibling woke and the mother checked on [redacted] in his bassinet and found him unresponsive, alerted the father, and he initiated CPR. The parents agreed to have their smartphones extracted and analyzed by law enforcement. That process revealed concerning Google searches indicating issues with [redacted] condition, beginning as early as two days prior. The parents have been arrested and charged with aggravated assault and failure to protect. Murder charges are likely pending.

The 3yo sibling was medically cleared with no concerns. He is not communicative enough to complete an interview. An IPA was completed, and the sibling was safety placed with paternal great grandmother who is residing in the parents home currently while they remain in jail. The IPA includes a no-contact agreement for the parents and sibling.

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 request caretaker to schedule current PCP appointment for sibling to assess for any needs or delays and address accordingly.
-- Team will continue to explore long-term placement support and options for sibling.
-- CM will document and upload autopsy into TFACTS once received.
-- CM will complete Closing FAST prior to case closure.
-- CM will present findings to the Child Protective Investigative Team (CPIT) for classification review.

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

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Created In Error
Contact Date:	2024-09-18 11:02:00	Contact Method:	
Contact Time:	11:02 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	09/18/2024
Completed date:	09/18/2024	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/18/2024 08:59 PM Entered By: [redacted]

This occurred on 9/16/24.

Case Manager (CM) [redacted] received a phone call from Detective [redacted] Det. [redacted] reported that [redacted] autopsy showed a subdural hematoma and a hemorrage in the optic nerve. Det. [redacted] informed CM [redacted] that they were going to have the parents come to the sheriff's office on this date for the interviews.

CM [redacted] informed Team Leader (TL) [redacted] of the new information.

CM [redacted] sent Detective [redacted] a message at 11:24am and asked for Det. [redacted] to inform CM [redacted] of what time the parents were coming to speak with the detectives.

CM [redacted] received a text message from Det. [redacted] at 11:38am stating that the parents were coming in for their interviews at 1:00pm.

Narrative Type: Created In Error Entry Date/Time: 04/10/2025 09:24 AM Entered By: [redacted]

This occurred on 9/16/24.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2024-09-17 16:00:00	Contact Method:	
Contact Time:	04:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	04/10/2025
Completed date:	04/10/2025	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 04/10/2025 10:23 AM Entered By: [redacted]

On September 17, 2024, Case Manager (CM) [redacted] spoke with Detective (Det.) [redacted] regarding the information that was found on Ms. [redacted] and Mr. [redacted] phones. The phones showed that Ms. [redacted] and Mr. [redacted] had made over 50 internet searches that started on September 13, 2024. They searched questions such as, do babies bruise after they died, do babies stop breathing before they die, why is my baby in such a deep sleep and not waking up?, why is my baby tensing up like hes trying to get some air when we barely shake him?, and baby not breathing well after we shook him. Ms. [redacted] had a message on her phone from her stepfather saying that they needed to keep their story straight. Information found on Ms. [redacted] phone also indicated that Mr. [redacted] may not be the biological father of [redacted] Det. [redacted] informed CM [redacted] that Ms. [redacted] and Mr. [redacted] were going to be arrested and charged with Aggravated Assault and Failure to Protect. The case will be presented to the grand jury next week for charges of First Degree Murder.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2024-09-16 18:30:00	Contact Method:	Face To Face
Contact Time:	06:30 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	09/22/2024
Completed date:	09/22/2024	Completed By:	[redacted]

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

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

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/22/2024 12:25 AM Entered By: [redacted]

On September 16th, 2024 at 6:30pm, Case Manager (CM) [redacted] arrived at [redacted] in [redacted] to meet with [redacted] and [redacted].

When CM [redacted] arrived at the home, Mr. [redacted] was outside with family members. CM [redacted] made introductions and asked to speak with Mr. [redacted] and Ms. [redacted] privately inside the home.

CM [redacted] explained to Mr. [redacted] and Ms. [redacted] that additional concerns arose due to what was discovered during [redacted] autopsy. Ms. [redacted] asked CM [redacted] to explain what was in the autopsy because law enforcement told her that [redacted] had bleeding in his brain and told Mr. [redacted] that [redacted] had bruising. CM [redacted] explained to Mr. [redacted] and Ms. [redacted] that the full report from the autopsy had not been received, but the preliminary results showed bleeding in [redacted] brain.

CM [redacted] informed Mr. [redacted] and Ms. [redacted] that the Department of Children's Services (DCS) was asking for an Immediate Protection Agreement (IPA) to be put in place stating that [redacted] would remain at the family home with [redacted] (Paternal Great-Grandmother) and that Mr. [redacted] and Ms. [redacted] would have no contact with [redacted] at this time. Mr. [redacted] and Ms. [redacted] said they could go stay with Mr. [redacted] father [redacted] at his home in [redacted] CM [redacted] asked for Ms. [redacted] to come inside to discuss the IPA. Ms. [redacted] asked about taking [redacted] to her home instead. CM [redacted] explained the process of an Expedited Home Study (EHS) to Ms. [redacted] Ms. [redacted] reported that she lives in a one bedroom camper and the home may not pass. She decided to stay at Mr. [redacted] and Ms. [redacted] residence. [redacted] came into the home. CM [redacted] confirmed that Mr. [redacted] and Ms. [redacted] could stay at his home.

Ms. [redacted] asked if Mr. [redacted] and Ms. [redacted] could stay at the home with her and [redacted] until [redacted] could take their other family members home and then come back to pick up Mr. [redacted] and Ms. [redacted] so [redacted] could drop her car off to her. Mr. [redacted] stated that when his father returns with Ms. [redacted] car, he would drive his car to his father's home. CM [redacted] staffed this with Team Leader (TL) [redacted] and it was written into the IPA.

Tennessee Department of Children's Services

Case Recording Summary

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

Mr. [redacted] and Ms. [redacted] consented to the IPA. The IPA was signed by Mr. [redacted] Ms. [redacted] and Ms. [redacted]

When Ms. [redacted] came into the residence to speak with CM [redacted] she brought [redacted] into the living room. CM [redacted] did not observe any concerning marks or bruises on [redacted]

Mr. [redacted] and Ms. [redacted] asked CM [redacted] about getting their phones back from [redacted] County Sheriff's Office. CM [redacted] explained that law enforcement would contact them when they are ready to be picked up.

CM [redacted] asked the family if they had any questions or anything else they wanted to discuss. They stated that they did not. CM [redacted] thanked the family for their time and the visit was ended.

Before leaving the home, CM [redacted] contacted TL [redacted] The IPA was approved.

CM [redacted] contacted DCS Attorney [redacted] regarding the IPA.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2024-09-16 13:10:00	Contact Method:	Face To Face
Contact Time:	01:10 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Detention/Jail	Created Date:	09/20/2024
Completed date:	09/20/2024	Completed By:	[redacted]

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

Contact Type(s): Alleged Perpetrator Interview,Parent/Caretaker Interview

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/20/2024 08:56 AM Entered By: [redacted]

On September 16th, 2024 Case Manager (CM) [redacted] arrived at the [redacted] County Sheriff's Office to observe the Alleged Perpetrator (AP) interviews for [redacted] and [redacted].

[redacted] was interviewed first by Detective [redacted] and Sergeant [redacted]. The interview started at 1:10pm. Ms. [redacted] reported that her and [redacted] have been together since 2019, but they are not married. They have lived at [redacted] in [redacted] since October 2023. Ms. [redacted] stated that she is on disability because she cannot count money or do math. Ms. [redacted] attended high school at [redacted], but her mother made her drop out prior to her senior year. Ms. [redacted] reported that she can read a little bit and is able to write.

Ms. [redacted] stated that on Friday morning (September 13th, 2024) [redacted] woke up around 7:00am and she fed him a bottle. After [redacted] finished his bottle, Ms. [redacted] placed [redacted] in his swing located in the living room. At this time, Mr. [redacted] was getting [redacted] ready. Ms. [redacted] stated that her, Mr. [redacted] and [redacted] went to Wal-Mart at some point on this date. Ms. [redacted] reported that [redacted] was fine and nothing out of the ordinary occurred. Ms. [redacted] said that [redacted] sleeps in his bassinet and she does not allow him to sleep in his swing.

Ms. [redacted] reported that the family woke up around 8:00am and they stayed at home all day on September 14th (Saturday). Ms. [redacted] stated that Mr. [redacted] gave [redacted] a bath in the bathroom sink near their bedroom and then he put [redacted] to bed around 10:00pm. Ms. [redacted] noted that she has never given [redacted] a bath because she is afraid to bathe babies. She reported she didn't give [redacted] a bath until he was older. According to Ms. [redacted] woke up at 3:00am and she fed him a bottle. She stated that [redacted] was breathing normally at this time. After the bottle, [redacted] fell back asleep. [redacted] did not finish his bottle.

Ms. [redacted] reported that [redacted] takes iron drops and that he had breathing issues when he was in the Neonatal Intensive Care Unit (NICU). It was stated that Mr. [redacted] had told law enforcement that [redacted] might have had brain issues. Ms. [redacted] denied that [redacted] had issues with his brain and stated that her mother told Mr. [redacted] that due to him having a lack of oxygen at birth. Ms. [redacted] stated that her and Mr. [redacted] are the primary caregivers. She denied anyone else being at

Tennessee Department of Children's Services

Case Recording Summary

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

Case Status: Close Organization: [redacted] Region

the home during the weekend. Ms. [redacted] reported that she usually takes care of [redacted] and Mr. [redacted] takes care of [redacted] Mr. [redacted] lays [redacted] down each night on his side. Ms. [redacted] denied that safe sleep was discussed with her or Mr. [redacted] when [redacted] was born. The family only had one bottle in the house. Ms. [redacted] reported that [redacted] bottles are usually made with 6oz. Sometimes [redacted] will drink it all, other times he will drink 4oz or 5oz.

Ms. [redacted] denies getting frustrated with [redacted] when he would cry. She denied that Mr. [redacted] gets frustrated with the kids. Ms. [redacted] reported that [redacted] wakes up at 8:00am and sometimes at 10:00am. She said that [redacted] gets along with [redacted] Ms. [redacted] stated she believes [redacted] died from Sudden Infant Death Syndrome (SIDS).

Det. [redacted] and Sgt. [redacted] took a break from Ms. [redacted] interview and went to interview [redacted]

[redacted] interview began at approximately 1:45pm.

Mr. [redacted] informed Det. [redacted] and Sgt. [redacted] that he and Ms. [redacted] played Call of Duty War Zone on September 14th (Saturday) before he have [redacted] a bath. Mr. [redacted] reported that [redacted] was sitting on Ms. [redacted] lap while they were playing the game and then he gave [redacted] a bath and put him to bed. Mr. [redacted] reported that [redacted] woke up around 3:00am and then went back to bed. Mr. [redacted] and Ms. [redacted] woke up around 9:30am or 10:00am on September 15th (Sunday) and Ms. [redacted] told Mr. [redacted] that [redacted] was not breathing. Mr. [redacted] reported he checked on [redacted] and told Ms. [redacted] to call 911 while he started cardiopulmonary resuscitation (CPR). Mr. [redacted] stated that when he blew in [redacted] mouth during CPR, yellow snot came out of [redacted] nose. Mr. [redacted] noted that prior to Sunday morning, [redacted] has been fine.

Mr. [redacted] reported that on September 14th (Saturday) he spent the majority of the day outside and that he went to [redacted] by himself to get shish kabobs because they were grilling out on that day. Mr. [redacted] reported that [redacted] only had chicken kabobs and he had to wait at the store for them to make him steak kabobs too.

Mr. [redacted] stated that [redacted] loves [redacted] He reported that on September 14th, [redacted] took a gummy before bed. Mr. [redacted] stated that [redacted] mostly stays with him and Ms. [redacted] is the primary caregiver for [redacted] Mr. [redacted] reported that Ms. [redacted] mother thinks something was wrong with [redacted] brain.

Mr. [redacted] usually bathes [redacted] every two or three days in the bathroom sink. Mr. [redacted] stated that [redacted] smelled like spoiled milk and that his poop smelled really bad. Mr. [redacted] reported that when he was giving [redacted] a bath, [redacted] was screaming and crying. He was also kicking and moving his head. Mr. [redacted] stated that [redacted] could have hit his head on the sink, but denied seeing him do it. Mr. [redacted] reported that he holds [redacted] head in the palm of his hand while he is giving him a bath. Mr. [redacted] stated that he does get frustrated when the kids scream. Mr. [redacted] reported that a case worker told him there was a bruise on the back of [redacted] head and side. He denied seeing the bruises when he gave [redacted] a bath. Mr. [redacted] said that [redacted] stopped crying when the bath was over and he was quiet. Mr. [redacted] stated that he never shook the baby because his dad told him that it could kill the baby. He denied that [redacted] hit his head. Mr. [redacted] reported that [redacted] went to sleep after the bath.

Mr. [redacted] reported that he and Ms. [redacted] stayed up until 12:00am or 1:00am. He stated that he did not hear [redacted] when he woke up at 3:00am and that he usually does hear him when he wakes up. Mr. [redacted] reported that [redacted] woke him and Ms. [redacted] up around 9:30am or 10:00am. Mr. [redacted] stated that Ms. [redacted] checked on [redacted] and said he wasn't breathing. He denied that Ms. [redacted] touched [redacted] to see if he was breathing. Mr. [redacted] reported that [redacted] does wake up sometimes during the night and noted that he woke up during the night on Friday but not on Saturday.

Mr. [redacted] stated that when he came back home from the store on Saturday, [redacted] was in his swing smiling at Ms. [redacted] Mr. [redacted] mentioned that Ms. [redacted] leaves [redacted] in his swing for long periods of time.

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Case Recording Summary

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

Mr. [redacted] reported that his dad told him not to kill anyone when he was a kid.

Det. [redacted] and Sgt. [redacted] took a break from Mr. [redacted] interview and returned to interview Ms. [redacted]

Ms. [redacted] stated that [redacted] has never received bruises in her care and denied that any accidents happened this weekend. Ms. [redacted] reported that her, [redacted] and [redacted] went with Mr. [redacted] to [redacted] on Saturday. They went to the [redacted] in [redacted]. Ms. [redacted] stated that she was with [redacted] while Mr. [redacted] was giving [redacted] a bath. She reported that she heard [redacted] crying during the bath. Ms. [redacted] was asked about playing video games on Saturday. She stated that she told the case worker and law enforcement that they played video games prior to [redacted] bath on Saturday. She noted that [redacted] was laying on her chest while they played the game. After they finished playing the game, Mr. [redacted] gave [redacted] a bath and put him to bed. Ms. [redacted] stated that at 4:00am on Sunday morning, she laid [redacted] back down and then went to lay in [redacted] bed.

Ms. [redacted] was asked about checking on [redacted] Sunday morning. Ms. [redacted] stated that she did touch [redacted] chest and back to see if he was breathing. She reported that Mr. [redacted] told her to check to see if [redacted] was breathing. Ms. [redacted] said that Mr. [redacted] puts [redacted] to bed every night. Ms. [redacted] stated that she has never dropped her baby.

Ms. [redacted] stated that they went to [redacted] at 12:00pm and had to wait for 30 minutes for the shish kabobs. Ms. [redacted] told Det. [redacted] to watch the video from [redacted]

At one point, Sgt. [redacted] left the interview room and Det. [redacted] continued to interview Ms. [redacted]

Ms. [redacted] stated that it was a normal bed time routine on September 14th. She reported that [redacted] did not have a bruise on his head when they were sitting on the couch playing video games. Ms. [redacted] noted that [redacted] snores when he sleeps. She stated that she has never shaken or hit [redacted] or [redacted] She denied seeing Mr. [redacted] shake or hit the kids. Ms. [redacted] became tearful at the end of the interview.

While Det. [redacted] was interviewing Ms. [redacted] Sgt. [redacted] continued the interview with Mr. [redacted] CM [redacted] was unable to observe that portion of Mr. [redacted] interview. Sgt. [redacted] stated that Mr. [redacted] asked for a lawyer and the interview was ended.

Mr. [redacted] and Ms. [redacted] consented to law enforcement going through their phones.

Mr. [redacted] and Ms. [redacted] were placed in the interview room together. They were speaking low and it was difficult to hear what they were speaking about. Mr. [redacted] mentioned something about [redacted] hitting [redacted] with a toy. Mr. [redacted] told Ms. [redacted] to ask for a lawyer if law enforcement continues to ask questions.

CM [redacted] spoke with Assistant District Attorney (ADA) [redacted] after the interviews. ADA [redacted] reported that the medical examiner did not note the bruising while they were observing the autopsy. ADA [redacted] stated that there was a subdural hematoma, hemorrage in the optic nerve, and a lot of blood in the brain. Due to what is known from the autopsy at this time, they are leaning towards it being ruled a homicide.

CM [redacted] informed Team Leader (TL) [redacted] of the information learned from the interviews and of the conversation with ADA [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:	2024-09-16 13:00:00	Contact Method:	
Contact Time:	01:00 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	09/19/2024
Completed date:	09/19/2024	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/19/2024 09:21 PM Entered By: [redacted]

Case Manager (CM) [redacted] received an email from Detective [redacted] containing the following documents:

Sudden Unexplained Infant Death Investigation (SUIDI) Reporting Form
[redacted]
County Sheriff's Office Criminal Investigation Division (CID) Evidence Recovery Log
County Sheriff's Office Crime Scene Entry Control Log
County Sheriff's Office Criminal Investigation Division (CID) Synopsis of Recorded Statement from Detective
interviews with [redacted] and [redacted] on September 15th, 2024

All documents were reviewed and are uploaded under the documents tab.

The SUIDI form reported that [redacted] (Alleged Father) placed [redacted] in his bassinet at 11:30pm on September 14th, 2024. [redacted] (Birth Mother) fed [redacted] a bottle at 3:00am and placed him back in his bassinet. Ms. [redacted] stated that [redacted] was breathing normally at this time. Ms. [redacted] and Mr. [redacted] told law enforcement that they woke up at 9:30am and found [redacted] unresponsive. [redacted] was swaddled in an adult blanket and was wearing a diaper. It was noted on the form that when [redacted] was found he had yellow "snot" coming from his nose, self inflicted scratches, and a bruise on his neck. The SUIDI form also provides information regarding the home environment, [redacted] pediatrician, and details about his birth.

The CID Evidence Recovery Log details the items that were collected from the scene: formula, blanket, baby bottle, crib, gray t-shirt, red t-shirt, blue pillow, and bottle drops.

The Crime Scene Entry Control Log details the individuals that entered the crime scene at the family home.

The Recorded Synopsis Statement provided a timeline of events that occurred on September 14th, 2024 and September 15th, 2024. Mr. [redacted] told Det. [redacted] that he gave [redacted] a bath in the bathroom sink on September 14th around 9:30pm or 10:00pm and that [redacted] was screaming, tired, and did not want to take a bath. Mr. [redacted] reported that [redacted] was fine

Tennessee Department of Children's Services

Case Recording Summary

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

when he got out of the bath. Ms. [redacted] got up with [redacted] at 3:00am on September 15th because he was crying and fed him a bottle. [redacted] then went back to sleep in his bassinet. Mr. [redacted] and Ms. [redacted] woke up around 9:30am and noticed that [redacted] was not breathing. 911 was called and Mr. [redacted] started cardiopulmonary resuscitation (CPR). Mr. [redacted] said [redacted] body felt warm, but his head felt cold when he picked him up. Ms. [redacted] noted that she did not see [redacted] while Mr. [redacted] was giving him a bath and she denied knowing why [redacted] would have a bruise on his neck. The family reported that [redacted] was born prematurely and had to be put on a machine to help him breathe. [redacted] had an iron deficiency and used iron drops.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2024-09-16 11:02:00	Contact Method:	
Contact Time:	11:02 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	04/10/2025
Completed date:	04/10/2025	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Notation		
Contact Sub Type:			

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 04/10/2025 09:25 AM Entered By: [redacted]

Case Manager (CM) [redacted] received a phone call from Detective [redacted] Det. [redacted] reported that [redacted] autopsy showed a subdural hematoma and a hemorrage in the optic nerve. Det. [redacted] informed CM [redacted] that they were going to have the parents come to the sheriff's office on this date for the interviews.

CM [redacted] informed Team Leader (TL) [redacted] of the new information.

CM [redacted] sent Detective [redacted] a message at 11:24am and asked for Det. [redacted] to inform CM [redacted] of what time the parents were coming to speak with the detectives.

CM [redacted] received a text message from Det. [redacted] at 11:38am stating that the parents were coming in for their interviews at 1:00pm.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2024-09-16 10:50:00	Contact Method:	Correspondence
Contact Time:	10:50 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	09/18/2024
Completed date:	09/18/2024	Completed By:	[redacted]

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

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

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/18/2024 08:54 PM Entered By: [redacted]

Child Protective Investigation Team (CPIT) convened per Child Protective Services (CPS) policies #14.3 Section G # 6 as well as 14.6 and per local protocol for [redacted] County ([redacted]

Case Manager (CM) [redacted] sent the referral to the following CPIT members:

[redacted] (Children's Advocacy Center)
[redacted] (Children's Advocacy Center)
[redacted] (Children's Advocacy Center)
[redacted] (District Attorney's Office)
[redacted] (Juvenile Court)
[redacted] ([redacted] County Sheriff's Office)
[redacted] ([redacted] County Sheriff's Office)

CM [redacted] sent a message to Detective [redacted] informing him that CM [redacted] had been assigned the case. Det. [redacted] informed CM [redacted] that the case had been assigned to Det. [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:	2024-09-16 10:15:00	Contact Method:	
Contact Time:	10:15 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	09/18/2024
Completed date:	09/18/2024	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Case Summary		
Contact Sub Type:	Opening		

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 09/18/2024 08:48 PM Entered By: [redacted]

On September 15th, 2024 a P1 was screened into [redacted] County with allegations of Abuse Death. The Alleged Child Victim is [redacted] The Alleged Perpetrator is Unknown. The case was assigned to Case Manager (CM) [redacted] on September 16th, 2024 by Child Protective Services (CPS) Reader [redacted]. CM [redacted] was notified via email. The district attorneys office and juvenile court were notified of the referral per local protocol.

HOUSEHOLD COMPOSITION:
[redacted] (Alleged Father, Date of Birth: [redacted])
[redacted] (Birth Mother, Date of Birth: [redacted])
[redacted] (Brother, Date of Birth: [redacted])
[redacted] (ACV, Date of Birth: [redacted], Reported Date of Death: September 15th, 2024)

A Tennessee Family and Child Tracking System (TFACTS) history check was completed on the family. The search showed no previous history for [redacted] or [redacted] The parents [redacted] and [redacted] had previous cases where they were listed as the alleged child victim.

The following records were checked on [redacted] and [redacted]
Sex Offender Registry
Meth Offender Registry
Adult Abuse Registry
National Sex Offender Registry
Felony Offender Registry
Search yielded no results

Background checks were completed via internet checks.

Allegations Assessed and Assigned by Central Intake: The following report was NOT copied verbatim from the Intake

Tennessee Department of Children's Services

Case Recording Summary

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

Referral and the reporters identification was redacted. Tennessee laws protect persons who report abuse or neglect. Tennessee Code Annotated 37-1-410.

According to Intake:

On September 15th, 2024 at approximately 3:00am, the mother fed [redacted] a bottle and he went back to sleep. At 9:30am, the mother checked on [redacted] and noticed he wasn't breathing. The mother gave [redacted] to the father to start cardiopulmonary resuscitation (CPR). 911 was called and when Emergency Medical Services (EMS) arrived they continued CPR. Law Enforcement arrived not long after EMS. [redacted] was transported to [redacted] Community Hospital where he was declared deceased. Detectives responded to the hospital and took over the investigation. [redacted] was born prematurely and had trouble breathing at that time. [redacted] was medically cleared by Dr. [redacted] The parents reported that [redacted] had not been sick.

[redacted] had a bruise on the left lower jawbone and EMS was not concerned. The hospital wanted a detective to respond to the hospital as they said there was bruising around the neck. It is not clear if this is the same mark (bruise on jawbone) that the hospital is referring to. There is no more information for the bruising at this time. There is no concern for foul play at this time. There are no concerns for the brother in the home. There are no concerns for neglect at this time. A blanket and small items (small pillow and another outfit for the child) were in the crib, but nothing that raised alarms. It has not been stated DCS has been involved with the family in the past. LE # [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:	2024-09-16 09:00:00	Contact Method:	Attempted Phone Call
Contact Time:	09:00 AM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	DCS Office	Created Date:	06/06/2025
Completed date:	06/06/2025	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Referent Interview		
Contact Sub Type:			

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 06/06/2025 01:29 PM Entered By: [redacted]

Case Manager (CM) [redacted] attempted a call to the referent to verify the information in the referral.

Tennessee Department of Children's Services

Case Recording Summary

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

Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2024-09-15 19:40:00	Contact Method:	
Contact Time:	07:40 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:		Created Date:	09/23/2024
Completed date:	09/23/2024	Completed By:	[redacted]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning

Participant(s)

Narrative Details

Narrative Type: Original Entry Date/Time: 09/23/2024 12:01 PM Entered By: [redacted]

Team Leader (TL) [redacted] received the following information from Team Leader (TL) [redacted] Case Manager (CM) [redacted] and Case Manager [redacted] met response on this. The 4-month-old ([redacted] was found deceased when his mother went to wake him and feed him. There is also a three-year-old ([redacted] in the home who will need to be added to the case for Environmental Neglect concerns. Detective [redacted] interviewed the parents. Law Enforcement reported no concerns except for the condition of the familys home. The family had two small dogs who had defecated in the floor. The parents reported to CM [redacted] that they were unaware of safe sleep. Both Case Managers reported that there was only one bottle in the home. The parents had a can of formula but its unknown if there was formula in it. [redacted] was observed to have inconsistent bruising. The coroner has taken the child for an autopsy and more will be known once this is completed. The maternal aunt is coming into town from Texas. An Immediate Protection Agreement (IPA) was completed with paternal great-grandmother, [redacted] TL [redacted] completed all checks including a code-x on the great grandmother and these came back clear. [redacted] will be residing in the family home. This plan was staffed and approved by Team Coordinator [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:	2024-09-15 13:31:00	Contact Method:	Face To Face
Contact Time:	01:31 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Hospital	Created Date:	10/14/2024
Completed date:	10/14/2024	Completed By:	[redacted]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Alleged Perpetrator Interview,Initial ACV Face To Face,Notation		
Contact Sub Type:			

Children Concerning

[redacted]

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/14/2024 08:17 AM Entered By: [redacted] V

On September 15, 2024 at 1:31 Case Manager [redacted] (CM) and CM [redacted] arrived at [redacted] Community Hospital ([redacted]CH) located at [redacted] Tennessee. Upon arrival to the hospital, CMs spoke with the registered nurse/charge nurse, [redacted] (last name unknown), who gave some basic information about alleged child victim, [redacted] Nurse [redacted] advised that [redacted] was born at 28 weeks and two days gestation in [redacted] Tennessee and was then transferred to the [redacted] Children's Hospital in [redacted], Tennessee for an unknown reason.

CM [redacted] asked to take pictures of [redacted] body to assess for appearance of the reported bruising on [redacted] body and Nurse [redacted] agreed.

Nurse [redacted] escorted CM [redacted] to the room where [redacted] body was located and assisted CM [redacted] in obtaining pictures of [redacted] body. Nurse [redacted] explained that due to the time that had passed since [redacted] death that the marks on his body and the coloration looked different when he first arrived. Nurse [redacted] advised that the concerning bruises marks that were identified upon [redacted] arrival were a bruise near the back of his left jawline near his neck, a small abrasion approximately one centimeter in diameter on [redacted] lower right back, and bruise located on [redacted] head on the right side approximately two centimeters above the top of his right ear. All of these marks were photographed with Nurse [redacted] assistance and using a measure scale. Additional photographs were taking taken also. Nurse [redacted] advised that the medical record would contain pictures which would be the most accurate in reflecting the original state of the marks and bruises prior to the discoloration that emerged in the additional hours following his death.
CM [redacted] inquired if the marks were considered non-accidental trauma or if there could be a feasible explanation for any of the marks being caused accidentally, and Nurse [redacted] reported that could not be stated with any certainty at that this time but that it was the medical staffs opinion that the marks that were inconsistent with what would be expected to be seen on a child that age. Nurse [redacted] advised that it was her understanding that an autopsy would be completed early the following morning.

Tennessee Department of Children's Services

Case Recording Summary

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

At approximately 2:00 p.m. CM [redacted] and CM [redacted] interviewed mother/alleged perpetrator, [redacted] privately in a hospital room at [redacted] CH. Alleged child victim, [redacted] was also present sitting on the hospital bed with Ms. [redacted] appeared well bonded with Ms. [redacted] as evidenced by him hugging her, crawling into her lap, and sitting directly beside her for long periods of time and appearing content.

CM [redacted] asked Ms. [redacted] to provide a timeline for the last 24 hours and CM [redacted] asked specifically for Ms. [redacted] to begin at around 12:00 p.m. on Saturday September 14, 2024, leading up to the time of them finding that [redacted] did not appear to be breathing. CM [redacted] notes that at the onset of the interview Ms. [redacted] would answer with answers such as I usually will put him down for a nap at or he usually will wake up etc. and that CM [redacted] advised that while she understood that all families had routines and habits, it was vital that Ms. [redacted] provide the events of the timeline exactly as they occurred, not as she usually did them, and Ms. [redacted] stated that she understood.

Ms. [redacted] advised that at around 12:00 p.m. on September 14, 2024, she and [redacted] had been in the floor in the living room and that she had been showing [redacted] toys, watching tv, playing, and laughing. Ms. [redacted] reported that [redacted] had been happy and had not acted out of the ordinary at all. Ms. [redacted] reported [redacted] was present also at the home but was running back and forth playing with his toys. Ms. [redacted] reported that she had put [redacted] down for a nap in the basinet which was in the living room at that time because she liked to keep him close, and she watched a movie with [redacted] when she heard [redacted] cry. Ms. [redacted] reported that in response to hearing [redacted] cry, she went to him, picked him up, and rocked him. Ms. [redacted] explained that while the bassinet was located in the bedroom on this date when law enforcement came to the home, she would bring it into the living room during times she was in the living room so she could hear [redacted] if he cried.

CM [redacted] inquired if there were any other materials in the bassinet (such as pillows or bedding) and Ms. [redacted] stated that there were no other materials other than a blanket that she used to swaddle [redacted] Ms. [redacted] advised that she estimated it was 20 to 30 minutes between the time she put [redacted] down for his nap and he began to cry. Ms. [redacted] advised that after she picked [redacted] up and rocked him, she put him in his baby swing which was also located in living room. Ms. [redacted] stated that she estimated [redacted] stayed awake for one to two hours while they watched television and CM [redacted] clarified that, per timeline, if the time at that point would have been around 3:00 p.m. and Ms. [redacted] advised that was correct. Ms. [redacted] advise that was in the primary care taking role to [redacted] that day.

Ms. [redacted] advised she then played Call of Duty for a few minutes with Mr. [redacted] and she was holding [redacted] in her lap while she did so. Ms. [redacted] advised that she estimated she only played Call of Duty for about five minutes because [redacted] did not like to sit still and preferred to be rocked instead. Ms. [redacted] reported that while Mr. [redacted] was playing Call of Duty and she was rocking [redacted] and [redacted] was playing with his toys and with the dogs.

Ms. [redacted] advised that shortly after she stopped playing Call of Duty and was rocking [redacted] she began cooking something for [redacted] which was chicken nuggets and french fries. CMs asked where Mr. [redacted] was while she was cooking the meal and she advised that he was still playing Call of Duty.

Ms. [redacted] advised at around 4:00 p.m. [redacted] was asleep in his bassinet in the living room and she was checking to see if he was breathing, as that is a habit that she has had with both children because she would get nervous that they would stop breathing. Ms. [redacted] advised that when she checked on [redacted] he was breathing good and then [redacted] got up around 5:00 p.m.

At this time CM [redacted] stepped out of the room and spoke with Investigator [redacted] who advised that stated that at the conclusion of CM [redacted] and CM [redacted] speaking with Ms. [redacted] he would speak with her and reported that he had finished speaking with Mr. [redacted]

CM [redacted] re-entered the room and resumed listening to Ms. [redacted] timeline. Ms. [redacted] advised that she watched Disney Plus and had [redacted] in her care while [redacted] was outside playing with Mr. [redacted] Ms. [redacted] stated that at around 7:00 p.m. she gave [redacted] a bath.

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Ms. [redacted] advised after she gave [redacted] a bath she got him dressed and he played with his toys for a while, ate some watermelon, and then she brushed his teeth. Ms. [redacted] estimated that by that time in the day it would have been about 10:00 p.m. Ms. [redacted] advised that she gives [redacted] melatonin at night and that [redacted] also usually goes to bed around 10:00 p.m. Ms. [redacted] stated she estimated Mr. [redacted] had given [redacted] a bath around 9:00 p.m. Ms. [redacted] explained that it was the familys habit that she would bathe [redacted] while Mr. [redacted] would bathe [redacted]
CM [redacted] inquired about [redacted] sleeping habits and Ms. [redacted] replied that during the night [redacted] would sleep for long stretches and after being put to bed would usually wake up anytime between 2:00 a.m. and 4:00 a.m. for a bottle. Ms. [redacted] reported that during the early morning hours of September 15, 2024, [redacted] had awakened at 3:00 a.m. and she fed him his bottle. When asked about [redacted] eating habits Ms. [redacted] explained that she estimated she fed him every hour or just when he seemed to be hungry. Ms. [redacted] reiterated that she did feed [redacted] a bottle around 3:00 a.m. on September 15, 2024, and that while she did so she was holding him and was sitting on the end of her and Mr. [redacted] bed.
When asked where [redacted] was at the time she fed [redacted] at 3:00 a.m., Ms. [redacted] explained that [redacted] was asleep on the couch (located on the left of the front door upon entering the living room), as that is where he prefers to sleep as opposed to the toddler bed in his room.
Ms. [redacted] stated that later on in the morning of September 15, 2024, she was awakened by [redacted] and when she went to check on [redacted] she observed that he did not appear to be breathing. CM [redacted] inquired what [redacted] was wearing at that time and Ms. [redacted] reported that he was wearing only a diaper, as that was her habit to put him to sleep wearing only a diaper and being swaddled. Ms. [redacted] stated that the blanket that she had swaddled [redacted] with had cars is on it. CM [redacted] discussed safe sleep practices with Ms. [redacted] who exhibited very limited knowledge of safe sleep practices.
Ms. [redacted] stated that she estimated she had gone to check on [redacted] around 9:00 a.m. after [redacted] had woken her. Ms. [redacted] stated that she put her hand on [redacted] chest, back, and neck and did not feel a pulse or that he was breathing so she told Mr. [redacted] to wake up and check [redacted] and Mr. [redacted] also agreed that [redacted] did not seem to be breathing and then they called 9-1-1. Ms. [redacted] stated that she estimates that emergency responders arrived approximately five minutes after the call was placed. Ms. [redacted] advised that she was unsure what occurred when law enforcement and emergency services arrived because she had taken [redacted] to another location because she did not want him to see what was happening.
At this time CM [redacted] stepped out of the interview to ask hospital staff if they had any snacks for [redacted] as he appeared to be getting hungry/tired/discontent.
Ms. [redacted] explained that since the police had been at the family home earlier and then the family had come directly to the hospital [redacted] had not had much to eat on that date.

CM [redacted] obtained information about the familys financial and living circumstances. Ms. [redacted] stated she moved to [redacted] Tennessee in October 2023. Ms. [redacted] stated that her rent is $675/monthly. Ms. [redacted] stated that she receives about $800/monthly in Social Security Income (SSI)/Disability and that Mr. [redacted] is the payee for her check. When asked the reason she receives SSI/Disability, Ms. [redacted] stated that she was not entirely sure but that she assumed it was because she was in special ed in school. Ms. [redacted] reported that Mr. [redacted] was not employed currently, and they and the children are at home most of the time unless they go to Walmart or something. Ms. [redacted] stated that the family receives food stamp benefits and additional benefits through the Women, Infants, and Children, (WIC) program. Ms. [redacted] stated that [redacted] has United Healthcare health insurance and [redacted] had Wellpoint health insurance.
CM [redacted] inquired of Ms. [redacted] about any history she has with substance use and Ms. [redacted] reported that she does not use any illegal/illicit substances or consume alcohol. Ms. [redacted] stated that Mr. [redacted] also does not use any illegal or illicit substances or consume alcohol. Ms. [redacted] reported that she is not in therapy/counseling.
CM [redacted] advised that childrens Tylenol and ibuprofen had been observed in the home on the countertops and therefore that they would be accessible to [redacted] which was a safety concern. Ms. [redacted] advised that she and Mr. [redacted] generally kept those medicines high up on the refrigeration but that she had never been told that medications should be kept in a lock box or out of reach children. CM [redacted] advised that she had additional concerns about the home environment, specifically the dog feces located in [redacted] bedroom and the trash located in the bathroom area.
CM [redacted] asked about the bathroom habits of the dogs in the home, Ms. [redacted] advised that the dogs were always let outside to use the bathroom and would indicate that they needed to use the bathroom by standing near the door and

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jumping at it. CM [redacted] inquired about the form of discipline used in the home and Ms. [redacted] responded that when [redacted] got into trouble she would have him sit in the corner. CM [redacted] inquired about what type of learning activities Ms. [redacted] had been doing with [redacted] and she stated that she they had ABC books at the and that there were various learning activities on [redacted] tablet. Regarding transportation, Ms. [redacted] advised that she does not drive as she had never learned how. Ms. [redacted] advised that neither [redacted] nor [redacted] had any major health diagnoses, but both had iron deficiency issues.
Regarding [redacted] birth history and health history, Ms. [redacted] advised that [redacted] was born in [redacted] Tennessee at [redacted] Hospital and Dr. [redacted] of [redacted] Pediatrics was his pediatrician. Ms. [redacted] stated that [redacted] had last been seen at [redacted] Pediatrics on August 20, 2024. CM [redacted] inquired about medicines observed at the home, the childrens Tylenol and gas drops and asked about when Ms. [redacted] and Mr. [redacted] would administer medications and Ms. [redacted] stated that she would give [redacted] the childrens Tylenol after he received vaccinations as that had caused him to have a fever and that it was her understanding that doing so was the correct thing to do.
Regarding any prescribed medications, Ms. [redacted] reported that [redacted] had only been given a medication for having low iron. CM [redacted] asked Ms. [redacted] what she would generally do if [redacted] became fussy and she stated that she would pick him up and rock him and walk around while holding him until he calmed down.

CM [redacted] inquired if anyone else had ever been in a caregiving role to [redacted] and Ms. [redacted] stated that nobody other than herself and Mr. [redacted] had ever been. Ms. [redacted] stated that there had only been a few occasions in [redacted] life when he had ever stayed with anyone else, and those times had not been recent.
CM [redacted] asked Ms. [redacted] if she had experienced any symptoms associated with postpartum depression or any other changes in mood since [redacted] birth and Ms. [redacted] answered that she had not.
CM [redacted] inquired about the dogs activities at night and asked where that the dogs were generally located during that time and Ms. [redacted] answered that the male dog would sleep at the end of her and Mr. [redacted] bed and that the female dog would sleep in the living room near the TV stand.
CM [redacted] inquired of Ms. [redacted] if Mr. [redacted] ever got up during the night with [redacted] and she advised that he did and that they would often take turns. CM [redacted] inquired if Mr. [redacted] had, to Ms. [redacted] knowledge, gotten up with [redacted] at all during the night hours of September 14, 2024/the early morning hours of September 15, 2024 and she answered that Mr. [redacted] had not, to her knowledge.
Ms. [redacted] reported that Mr. [redacted] was the one who laid [redacted] down to go to sleep, but Mr. [redacted] had not gotten up with [redacted] through the night. Ms. [redacted] explained that after she woke to feed [redacted] at around 3:00 a.m., she and [redacted] had stayed awake watching his tablet until about 5:00 a.m. at which time [redacted] fell asleep and she went back to bed.
CM inquired of Ms. [redacted] if [redacted] had any birthmarks or chronic rashes since his birth and she stated that he did not. Ms. [redacted] advised that she did not know of any marks or bruises on [redacted] and would not have an explanation for how he might have sustained them. When asked if she had ever had concerns for Mr. [redacted] getting frustrated with [redacted] or having an explosive temper in general Ms. [redacted] stated Mr. [redacted] was not aggressive and she had no concerns he might have hurt [redacted] intentionally or lost his temper and hurt [redacted]

CM asked Ms. [redacted] to please remove the clothing and diaper from [redacted] so that CMs could check for any concerning marks or bruises and she agreed. [redacted] was observed to have a small mark on his lower left lip area which appeared like he may have bitten it or bumped into something. [redacted] also was observed to have some bruises on bony protrusions such as shins and knees. [redacted] was observed to have two dark red marks (one more linear and one more circular) on his upper right top thigh area) but it was not observed to appear as a patterned bruise. [redacted] was observed to have dirt around his knee/upper shin areas and Ms. [redacted] stated that dirt was from [redacted] playing outside while she and Mr. [redacted] allowed law enforcement inside the home.
Pictures were taken of [redacted] with Ms. [redacted] permission and assistance.

CMs explained that due to the marks and bruises on a non-ambulatory child and there being no clear explanation for them, there was a concern as such that would necessitate her and Mr. [redacted] either having supervised contact only with [redacted] or [redacted] staying somewhere else temporarily while additional testing was performed.

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CMs inquired about family support and Ms. [redacted] advised that the maternal grandmother, [redacted] and her boyfriend, [redacted], were the only family she had in the area and that [redacted] is a methamphetamine user. CMs inquired of Ms. [redacted] if she had any positive supports and she stated that her sister, [redacted] lives in Texas but that she was flying to Tennessee to be with her in light of what had happened. Ms. [redacted] advised that [redacted] phone number is [redacted] and that CM [redacted] could contact her to discuss her availability and willingness to be part of an IPA for supervised contact or a temporary placement for [redacted]

CM [redacted] stepped out of the room around this time and asked to speak with Nurse [redacted] CM requested that [redacted] be admitted as a patient and for the hospital to complete a full non-accidental trauma workup and was advised that the hospital would do so.

At 2:46 CMs [redacted] and [redacted] interviewed [redacted] privately in a hospital room at [redacted] CH.
CM [redacted] asked Mr. [redacted] to provide a timeline of the last 24 hours, beginning at 12:00 p.m. on Saturday September 14, 2024. Mr. [redacted] explained that at around noon on that day he was grilling outside the family home while Ms. [redacted] was inside with both children. Mr. [redacted] estimated that he was outside until about 5:00 or 6:00 p.m. when he went to the store to get the meat. Mr. [redacted] explained that he returned at around 5:30 or 6:00 p.m. CM [redacted] asked Mr. [redacted] to elaborate on what he was doing during the stretch of time between 12:00 p.m. and the time he reported he went to get meat from the store, as that was a lengthy amount of time.
Mr. [redacted] explained that beginning around noon and between the time frame of noon to 6:00 he had been cleaning his grill and prepping the meat by heating it up to kill the germs. Mr. [redacted] explained that he went inside at various times hearing that span of time and did not have any concerns at all with [redacted] or Ms. [redacted] during that time. Mr. [redacted] explained that he had not noted [redacted] to appear to act differently at any point. Mr. [redacted] explained that there was one time later in the day toward nighttime that [redacted] was screaming because was tired but added that he and Ms. [redacted] tried to keep [redacted] awake during the day because the doctors had told them to do so.
Mr. [redacted] stated that he had concerns about [redacted] birth, and reported that he felt [redacted] had sustained some type of injury during his birth (via cesarean section) and that it was caused by one of the nurses. CMs asked Mr. [redacted] to explain more about this and he stated that he felt the nurses may have caused injury to [redacted] because [redacted] wants to lean over or sideways". Mr. [redacted] stated that since [redacted] had been born his head would flop to the side and his head needed to be held nearly all the time.
Resuming talk about the timeline, Mr. [redacted] stated that he recalled around 5:00 or 6:00 p.m. That he observed [redacted] in his chair and that [redacted] smiled at him.
Mr. [redacted] reported that meat he had grilled was chicken and steak shish-kabobs. Mr. [redacted] stated that he gave [redacted] a bath in the bathroom sink at around 9:00 p.m. and then put him to bed. Mr. [redacted] stated that he estimated that [redacted] had gone to bed at around 11:30 p.m.12:00 a.m.
Regarding anything that happened during the nighttime on September 14, 2024/the early morning hours of September 15, 2024, Mr. [redacted] explained that he did not get up during the night, but that Ms. [redacted] told him that [redacted] had awoken at around 3:00 a.m. but that he had not heard [redacted] Mr. [redacted] stated that Ms. [redacted] advised that she fed [redacted] a bottle around 3:00 a.m. and that the following morning is when they discovered that [redacted] was not breathing and so he started to blow in [redacted] mouth but that it was not working. Mr. [redacted] advised that they that he and Ms. [redacted] contacted 9-1-1 and that he performed cardiopulmonary resuscitation (CPR) in the meantime which consisted of him pushing on [redacted] chest 30 times using only his two fingers and then blowing in [redacted] mouth after each of the 30 pushes.
Mr. [redacted] was asked what [redacted] was wearing when he put [redacted] to bed and he advised that [redacted] was wearing a diaper only, with a swaddle, and that he had laid [redacted] down on his side as he had been instructed to do in the past by hospital staff. Mr. [redacted] explained that [redacted] had been very anemic after his birth and that was why [redacted] had stayed in the hospital for a period of time. Mr. [redacted] explained that it was during that time that he had reportedly been advised to place [redacted] on his side to sleep and also to keep him on the side on his side while feeding him to ensure that he did not choke. Mr. [redacted] was asked if there was any other materials in the bassinet at the time that he put [redacted] to sleep and he stated that there was a c-shaped pillow that they sometimes used to prop [redacted] up but that the pillow was off to the side away from [redacted] Mr. [redacted] explained that the other material in there was the comforter did they use to swaddle is

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the one that they have always used. Mr. [redacted] explained that was asked to describe the blanket he had used to swaddle [redacted] and he stated that he could not describe it very well but that it was all different colors and had cars on it. CM [redacted] inquired about the form of discipline used and Mr. [redacted] stated that he would spank [redacted] at times at which time he spontaneously grabbed [redacted] (who had entered the room at some point and was standing nearby) and spontaneously hit [redacted] on his buttocks area, over his diaper, with an open hand. CMs noted that [redacted] did not cry at this time but appeared frightened and looked at Mr. [redacted] and then looked at CMs in confusion.
CMs explained that due to the marks and bruises on a non-ambulatory child and there being no clear explanation for them, there was a concern as such that would necessitate him and Ms. [redacted] either having supervised contact only with [redacted] or [redacted] staying somewhere else temporarily while additional testing was performed.
CMs inquired of Mr. [redacted] what type of family support he had, and he stated that his father, [redacted] resides in [redacted] Tennessee with the paternal grandmother, [redacted] and could be reached via phone number [redacted]. Mr. [redacted] explained that he has a sister, also named [redacted] who lives with the paternal grandparents, as does her daughter, [redacted] Mr. [redacted] stated that the paternal grandparents have custody of [redacted] and though he was unsure exactly why, it was because his sister, [redacted] was not all there. Lastly, Mr. [redacted] explained that he has another sister named [redacted] Regarding the custody situation with [redacted] Mr. [redacted] explained that he was unsure if DCS had placed [redacted] there, but that he recalled there had been a caseworker and a lawyer involved. Mr. [redacted] reported that if [redacted] had to stay elsewhere he would prefer him to stay with [redacted] CM notes it was later determined that [redacted] could not be approved due to concerns with TFACTS history.
Around this time CM [redacted] accompanied [redacted] to a separate hospital room for him to await the non-accidentally trauma workup while CM [redacted] remained with Mr. [redacted]
At some point CM [redacted] joined CM [redacted] in the room with [redacted] and stayed with him while CM [redacted] went to complete other tasks.

At 4:21 CM [redacted] called DCS attorney, [redacted], who advised he had already discussed the case with CM [redacted] for removal to DCS custody, however, he advised that he did not feel there was exigent need to remove, questioned why removal was being sought, and suggested that a tier III petition would be his opinion of the most appropriate course of action. Mr. [redacted] and stated he would contact Regional General Counsel (RGC), [redacted], to discuss the situation further before moving forward.
In the interim CMs discussed additional supports in an attempt to find a non-custodial placement/supervisor for an IPA at less restrictive option per best practice for trauma reduction.

CM [redacted] spoke again with Ms. [redacted] in an attempt to see if she might provide any new of differing information about the concerning marks and bruises but she provided nothing of that sort. CM [redacted] obtained permission to contact [redacted] and discuss her assisting with being a temporary placement or involved in supervising the parents through an IPA. Ms. [redacted] stated that she desperately wanted to avoid [redacted] having to stay with strangers in a foster home. Ms. [redacted] advised that CM could contact [redacted] she had mentioned might be willing to supervise the contact would be willing to supervise the contact and or watch [redacted] temporarily and so with Miss [redacted] permission CM contacted [redacted] (hereafter referred to as [redacted] for clarity sake) and discuss this with her.
CM asked Mr. [redacted] if he would be comfortable with [redacted] being part of the family plan and he stated that he would. CMs revisited some questions about the marks and bruises observed on [redacted] which were concerning. Mr. [redacted] that he had not observed any bruising on [redacted] head, jawline, or any type of abrasion/scab/rash/ flaky area on [redacted] back. CM suggested that Mr. [redacted] should likely have noticed it when bathing [redacted] Mr. [redacted] reported that when he bathed [redacted] he would hold [redacted] in his hands over the bathroom sink and did not flip him over while bathing him but rather would take his hand and rub it on [redacted] back and buttocks area to wash him. Regarding any bruises, Mr. [redacted] advised that [redacted] could at times be rough with [redacted] but that he did not know of him having caused any marks or bruises.
Mr. [redacted] reiterated that it was possible that [redacted] might have fallen over and again explained his concerns about [redacted]

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not being able to sit up straight.

CM [redacted] and CM [redacted] spoke with the Department of Childrens Services (DCS) Team Leader, [redacted], and Team Coordinator, [redacted], at various times throughout the case. CM [redacted] and TL [redacted] reiterated what Mr. [redacted] had said in terms of there possibly being insufficient grounds for an exigent removal since there was not any documentation of non-accidental trauma or any documentation stating that the marks and bruises could not have been caused by [redacted] accidentally hitting his head after tipping over; as Mr. [redacted] had suggested may have occurred.

CM [redacted] contacted [redacted] (hereinafter referred to as [redacted] for clarity sake) via phone and she advised that she was not flying to Tennessee but rather was driving and was still over 11 hours away. [redacted] stated that while she understood that she was too far away to assist with an IPA, one of her friends, [redacted], had come to the hospital as a support and would be willing to likely be a support/part of a plan for Ms. [redacted] and Mr. [redacted]
CM spoke with [redacted] and inquired if she would be comfortable with Ms. [redacted] being part of the family plan and she stated that she would.
CM located Ms. [redacted] in the parking lot area of the hospital as she had stepped out to her vehicle. CM explained that while she could not release a great deal of information at this time but stated that there were concerns as such that DCS would request that the parents have supervised contact only either within their own residence or for [redacted] to stay elsewhere until more information was learned. Ms. [redacted] stated that she would not be able to assist the family at this time as she has two children of her own, works from 10:00 a.m. to 7:00 p.m. each day, and would not have a plan for childcare for [redacted]

CMs then spoke again with Ms. [redacted] and Mr. [redacted] (separately) and while Ms. [redacted] and advised that neither [redacted] nor [redacted] were able to be part of the plan/IPA. CM [redacted] attempted again to identify any additional supports at which time Mr. [redacted] identified the paternal great-grandmother, [redacted] as someone who would be willing, able, and appropriate to supervise their contact with [redacted] pending further decision.
Mr. [redacted] advised that Ms. [redacted] was present at the hospital at this time and the CM had permission to speak with her about supervising their contact or keeping [redacted] temporarily.
CM contacted Ms. [redacted] by phone number [redacted] and she advised she would be willing to supervise Mr. [redacted] and Ms. [redacted] contact with [redacted] pending further decision and that as she did not work she could stay with them at their home and be available all day and night.
The requisite background checks were completed on Ms. [redacted] and no concerns were noted found to be acceptable completed and immediate protection agreement. Ms. [redacted] advised that her social security number was [redacted] her date of birth [redacted], and her address was [redacted], Tennessee. CM [redacted] discussed with Ms. [redacted] that supervised contact meant that the parents and [redacted] would have to be within her eyesight and earshot at all times and she stated that she understood.

Regarding the conditions in the home that were of concern CM [redacted] advised Ms. [redacted] that the dog feces would need to be cleaned and the trash would need to be taken out of the home and she agreed that she and Mr. [redacted] would clean the areas of concern. CM [redacted] requested that Ms. [redacted] and Mr. [redacted] send her pictures of the area of concern having been remedied later on this date and they agreed they would.

The IPA reflected that the parents would have supervised contact only, to be supervised by [redacted] pending a Child and Family Team Meeting and further decision.

The non-accidental trauma workup concerning [redacted] yielded no concerning results. CM [redacted] obtained a copy of the discharge paperwork for [redacted] which indicates that was seen for concerns for child abuse and had an x-ray bone survey completed. The discharge paperwork indicates [redacted] should have a follow-up visit with Dr. [redacted] within two days

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and he was noted as having low body mass index (in the 5th percentile).

A copy of the IPA was given to the hospital and he was discharged to Ms. [redacted] care. CM obtained the information available through the medical record at this time which was for [redacted] discharge.

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Case Recording Details

Recording ID:	[redacted]	Status:	Completed
Contact Date:	2024-09-15 12:50:00	Contact Method:	
Contact Time:	12:50 PM	Contact Duration:	
Entered By:	[redacted]	Recorded For:	
Location:	Family Home	Created Date:	10/14/2024
Completed date:	10/14/2024	Completed By:	[redacted]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning

Participant(s)

[redacted]

Narrative Details

Narrative Type: Original Entry Date/Time: 10/14/2024 08:13 AM Entered By: [redacted]

On September 15, 2024 at 12:50 Case Manager [redacted] (CM [redacted] arrived at the address listed in the referral for the family home, [redacted] Tennessee. Within a few moments of CMs arrival Case Manager [redacted] (CM [redacted] also arrived at the home.
CMs spoke with law enforcement officers, [redacted], and [redacted] of the [redacted] County Sheriffs Office ([redacted] CSO) who were present at the home processing the scene. CMs were advised by officers that Investigator [redacted] of the was assigned to the case and had left the family home a few minutes prior and gone to [redacted] Community Hospital [redacted] CH) in [redacted] Tennessee. Officers advised that mother/alleged perpetrator, [redacted] and father/alleged perpetrator, [redacted] had also left with alleged child victim, [redacted] around the same time to go to [redacted] CH.
The officers advised that they had obtained photographs of each area of the residence and had completed a video reenactment. The officers stated that Ms. [redacted] and Mr. [redacted] had laughed during the video reenactment and while they realized that everyone processed grief differently, they found it to odd that the parents had done that.
CM [redacted] and CM [redacted] spoke with Investigator [redacted] around this time, via separate phone calls, at separate times and he advised that after completing a visit at the family home CMs could come to [redacted] CH to speak with him and thereafter interview the parents.
CMs were given permission to enter the home under the condition that they touch nothing in the home and were escorted into the home by law enforcement officers and assessed for the environmental conditions and obtained photographs of each room. The residence was observed to be a two-bedroom mobile home.
CMs observed that the living room floor had crumbs in the floor and there were soda bottles and clothes on the couch. The kitchen counters were cluttered with items. Law enforcement officers opened the refrigerator and deep freezer and CMs observed that there was an abundance of food in the home. The bathroom area had bags of trash and an odor of trash. There was a can of open formula on the bathroom sink along with cleaning products. The bedroom belonging to the parents was observed to have clutter also, which consisted of clothes, diapers, paper, soda bottles, and food boxes.
CMs observed a bassinet in the corner of the parents bedroom, which appeared to be uneven (with the right side lower than the left, when looking at it from the doorway), with clothes inside, a small boppy style pillow (blue and white polka dots). A blue blanket with what appeared to be skateboard designs was observed on the floor near the bassinet.

Tennessee Department of Children's Services

Case Recording Summary

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

CM [redacted] observed two small dogs in the room belonging to alleged child victim, [redacted] along with dog feces in the floor along with some clutter. The dogs were contained in [redacted] bedroom for the duration of the visit and law enforcement reported that they had been kept in there as the scene was being processed. CM [redacted] did not observe this room.

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: 09/15/2024

Assignment Date: 09/16/2024

Street Adress: [redacted]

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

B. Allegation

#	Children's Name	DOB	Specific Allegation for Each	Alleged Perpetrator's Name	DOB	Classification	Severe Abuse / CSEM	Classified By / Classified
1	[redacted]	[redacted]	Abuse Death	[redacted]	[redacted], 12:00 AM	Allegation Substantiated / Perpetrator Substantiated	Yes	[redacted] / 11/12/2024
2	[redacted]	[redacted]	Abuse Death	[redacted]	[redacted], 12:00 AM	Allegation Substantiated / Perpetrator Substantiated	Yes	[redacted] / 11/12/2024
3	[redacted]	[redacted]	Abuse Death	Unk, Unk		Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[redacted] / 11/12/2024

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: Case assessed and submitted for closure with the allegations of Abuse Death classified as Allegation Substantiated, Perpetrator Substantiated.

D. Case Workers

Case Worker: [redacted] Date: 11/12/2024

Team Leader: [redacted] Date: 11/12/2024

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:

September 15, 2024- Response was met on call by Case Manager (CM) [redacted] and CM [redacted] An Immediate Protection Agreement (IPA) was put in place stating that [redacted] and [redacted] contact with [redacted] would be supervised.

On September 16, 2024- The case was assigned to CM [redacted] CM [redacted] received a phone call from Detective [redacted] Det. [redacted] reported that [redacted] autopsy showed a subdural hematoma and a hemorrage in the

Department of Children's Services

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

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

optic nerve. Det. [redacted] informed CM [redacted] that they were going to have the parents come to the sheriff's office on this date for the interviews.

CM [redacted] observed the Alleged Perpetrator interviews with [redacted] and [redacted] During the interviews, the parents provided timelines of the days leading up to [redacted] death and details regarding the day of [redacted] death. Due to the concern of the preliminary autopsy report, CM [redacted] put an IPA in place stating Ms. [redacted] and Mr. [redacted] could have no contact with [redacted] at this time.

On September 17, 2024, Case Manager (CM) [redacted] spoke with Detective (Det.) [redacted] regarding the information that was found on Ms. [redacted] and Mr. [redacted] phones. The phones showed that Ms. [redacted] and Mr. [redacted] had made over 50 internet searches that started on September 13, 2024. They searched questions such as, "do babies bruise after they died," "do babies stop breathing before they die," "why is my baby in such a deep sleep and not waking up?," "why is my baby tensing up like he's trying to get some air when we barely shake him?," and "baby not breathing well after we shook him." Ms. [redacted] had a message on her phone from her stepfather saying that they needed to keep their story straight. Information found on Ms. [redacted] phone also indicated that Mr. [redacted] may not be the biological father of [redacted] Det. [redacted] informed CM [redacted] that Ms. [redacted] and Mr. [redacted] were going to be arrested and charged with Aggravated Assault and Failure to Protect. The case will be presented to the grand jury next week for charges of First Degree Murder.

On September 25, 2024 Case Manager (CM) [redacted] was notified by Detective [redacted] that [redacted] and [redacted] were indicted on charges of First Degree Murder by the grand jury.

On October 10, 2024, the order was signed giving Mr. and Mrs. [redacted] temporary custody of [redacted]

October 23, 2024 the case was presented to the Child Protective Investigation Team (CPIT) and the Abuse Death allegations were classified as Allegation Substantiated, Perpetrator Substantiated.

On February 20, 2025 CM [redacted] received and reviewed a copy of the autopsy report for [redacted] autopsy was performed at [redacted] Forensic Center by Doctor [redacted] on September 16th, 2024. The cause of death is blunt force injuries. The manner of death is homicide.

On May 1, 2025

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

October 23, 2024 the case was presented to the Child Protective Investigation Team (CPIT) and the Abuse Death allegations were classified as Allegation Substantiated, Perpetrator Substantiated.

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

[redacted] was interviewed first by Detective [redacted] and Sergeant [redacted] The interview started at 1:10pm. Ms. [redacted] reported that her and [redacted] have been together since 2019, but they are not married. They have lived at [redacted] in [redacted] since October 2023. Ms. [redacted] stated that she is on disability because she cannot count money or do math. Ms. [redacted] attended high school at [redacted], but her mother made her drop out prior to her senior year. Ms. [redacted] reported that she can read a little bit and is able to write. Ms. [redacted] stated that on Friday morning (September 13th, 2024) [redacted] woke up around 7:00am and she fed him a bottle. After [redacted] finished his bottle, Ms. [redacted] placed [redacted] in his swing located in the living room. At this time, Mr. [redacted] was getting [redacted] ready. Ms. [redacted] stated that her, Mr. [redacted] and [redacted] went to Wal-Mart at some point on this date. Ms. [redacted] reported that [redacted] was fine and nothing out of the ordinary occurred. Ms. [redacted] said that [redacted] sleeps in his bassinet and she does not allow him to sleep in his swing. Ms. [redacted] reported that the family woke up around 8:00am and they stayed at home all day on September 14th (Saturday). Ms. [redacted] stated that Mr. [redacted] gave [redacted] a bath in the bathroom sink near their bedroom and then he put [redacted] to bed around 10:00pm. Ms. [redacted] noted that she has never given [redacted] a bath because she is afraid to bathe babies. She reported she didn't give [redacted] a bath until he was older. According to Ms. [redacted] [redacted] woke up at 3:00am and she fed him a bottle. She stated that [redacted] was breathing normally at this time. After the bottle, [redacted] fell back asleep. [redacted] did not finish his bottle. Ms. [redacted] reported that

Department of Children's Services

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

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

[redacted] takes iron drops and that he had breathing issues when he was in the Neonatal Intensive Care Unit (NICU). It was stated that Mr. [redacted] had told law enforcement that [redacted] might have had brain issues. Ms. [redacted] denied that [redacted] had issues with his brain and stated that her mother told Mr. [redacted] that due to him having a lack of oxygen at birth. Ms. [redacted] stated that her and Mr. [redacted] are the primary caregivers. She denied anyone else being at the home during the weekend. Ms. [redacted] reported that she usually takes care of [redacted] and Mr. [redacted] takes care of [redacted] Mr. [redacted] lays [redacted] down each night on his side. Ms. [redacted] denied that safe sleep was discussed with her or Mr. [redacted] when [redacted] was born. The family only had one bottle in the house. Ms. [redacted] reported that [redacted] bottles are usually made with 6oz. Sometimes [redacted] will drink it all, other times he will drink 4oz or 5oz. Ms. [redacted] denies getting frustrated with [redacted] when he would cry. She denied that Mr. [redacted] gets frustrated with the kids. Ms. [redacted] reported that [redacted] wakes up at 8:00am and sometimes at 10:00am. She said that [redacted] gets along with [redacted] Ms. [redacted] stated she believes [redacted] died from Sudden Infant Death Syndrome (SIDS).

Det. [redacted] and Sgt. [redacted] took a break from Ms. [redacted] interview and went to interview [redacted]

[redacted] interview began at approximately 1:45pm.

Mr. [redacted] informed Det. [redacted] and Sgt. [redacted] that he and Ms. [redacted] played Call of Duty War Zone on September 14th (Saturday) before he have [redacted] a bath. Mr. [redacted] reported that [redacted] was sitting on Ms. [redacted] lap while they were playing the game and then he gave [redacted] a bath and put him to bed. Mr. [redacted] reported that [redacted] woke up around 3:00am and then went back to bed. Mr. [redacted] and Ms. [redacted] woke up around 9:30am or 10:00am on September 15th (Sunday) and Ms. [redacted] told Mr. [redacted] that [redacted] was not breathing. Mr. [redacted] reported he checked on [redacted] and told Ms. [redacted] to call 911 while he started cardiopulmonary resuscitation (CPR). Mr. [redacted] stated that when he blew in [redacted] mouth during CPR.

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

The referral reported:

On 09.15.2024 around 3:00am, the mother went to feed [redacted] was given a bottle. Things were fine and [redacted] went back to sleep. At 9:30AM on 09.15.2024 the mother went to [redacted] room to wake [redacted] up. The mother found [redacted] not breathing. The mother took [redacted] in the living and handed [redacted] over to the father. The father knows CPR and the father started CPR and chest compressions. The mother called 911. CPR was continued until LE arrived. EMS was not far behind. EMS took over CPR and EMS started to work on [redacted] was taken by EMS to [redacted] hospital. The hospital pronounced [redacted] deceased, unknown time. Detectives came out on scene and took over. The parents have been notified of [redacted] death. [redacted] was born prematurely and had trouble breathing at that time. One month later after his birth, [redacted] was medically cleared through Dr. [redacted] (pediatrician). The parent's said [redacted] has not been sick, nothing out of the norm.

[redacted] had a bruise on the left lower jawbone and EMS was not concerned. The hospital wanted a detective to respond to the hospital as they said there was bruising around the neck. It is not clear if this is the same mark (bruise on jawbone) that the hospital is referring to. There is no more information for the bruising at this time. There is no concern for foul play at this time. There are no concerns for the brother in the home. There are no concerns for neglect at this time. A blanket and small items (small pillow and another outfit for the child) were in the crib, but nothing that raised alarms.

It has not been stated DCS has been involved with the family in the past. LE # [redacted]

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

Ms. [redacted] and Mr. [redacted] remain incarcerated.

[redacted] is residing in [redacted], TN with [redacted] and [redacted]

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

Tennessee Department of Children's Services

FAST 2.0 Assessment Summary Report

Event Type: CPS Case	**Assessment Date: 09/18/2024**
Assessment Type: FAST	**CPS Case ID:** [redacted]

OVERVIEW

Safety Level: Immediate Intervention Recommended	**Assessed at Location:** In the Home
Risk Level: High Need/Risk	
Event Start Date: 06/16/2025	**Last Assessed Date:**
Assessment Status: Approved	**Assessor:** [redacted]
Date Approved: 09/23/2024	**Approver:** [redacted]

PARTICIPANTS

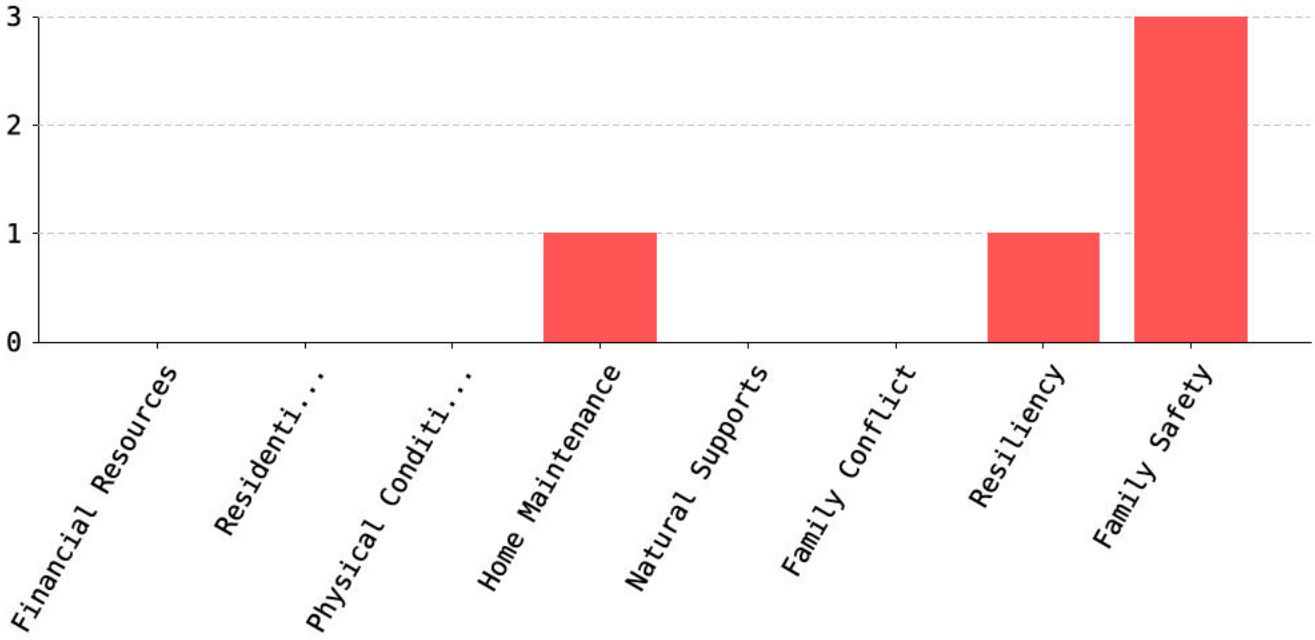
Name	Age	Role	Gender	Person ID	Trauma Score	CSEM Risk
[redacted] (ACV)	Deceased	Youth	M	[redacted]	6	Low
[redacted] (AP)	23 Yrs	Caregiver	M	[redacted]	N/A	N/A
[redacted]	61 Yrs	Caregiver	F	[redacted]	N/A	N/A
[redacted]	3 Yrs	Youth	M	[redacted]	3	Low
[redacted] (AP)	24 Yrs	Primary	F	[redacted]	N/A	N/A

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

Event Type: CPS Case	**Assessment Date:** 09/18/2024
Assessment Type: FAST	**CPS Case ID:** [redacted]

THE FAMILY TOGETHER

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

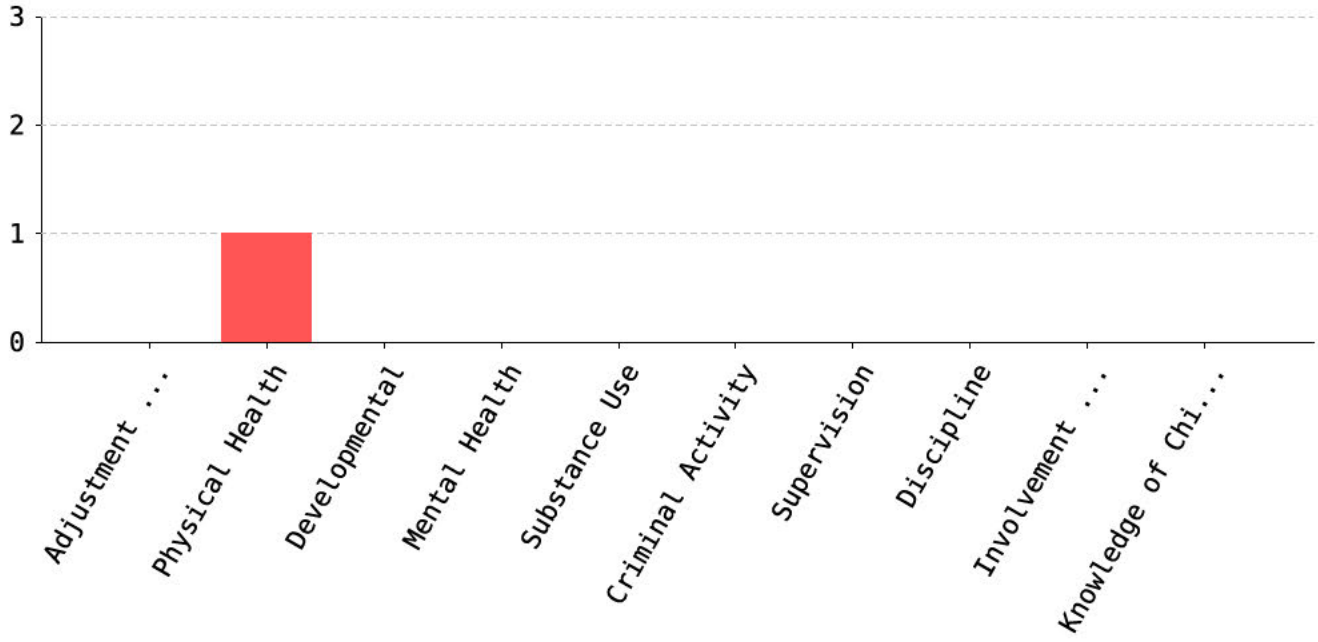


Item	Score	Justification/Narrative
Financial Resources	0	
Residential Stability	0	
Physical Condition of Home	0	
Home Maintenance	1	When DCS responded on 9/15, environmental concerns were noted in the home. CM [redacted] observed the home on 9/16 and it appeared that some of the concerns had been addressed by the family, a strong animal odor was present in the home.
Natural Supports	0	
Family Conflict	0	
Resiliency	1	Watching
Family Safety	3	An autopsy was completed on [redacted] on 9/16. The preliminary results showed a subdural hematoma and a hemorrage in the optic nerve. There are concerns that [redacted] was shaken. At this time, it appears that [redacted] death will be ruled a homicide.

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

Event Type: CPS Case	**Assessment Date:** 09/18/2024
Assessment Type: FAST	**CPS Case ID:** [redacted]

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



Item	Score	Justification/Narrative
Adjustment to Traumatic Experiences	0	
Physical Health	1	Ms. [redacted] reported that she has high blood pressure and COPD.
Developmental	0	
Mental Health	0	
Substance Use	0	
Criminal Activity	0	
Supervision	0	
Discipline	0	
Involvement in Caregiving Functions	0	
Knowledge of Child and Family Needs	0	

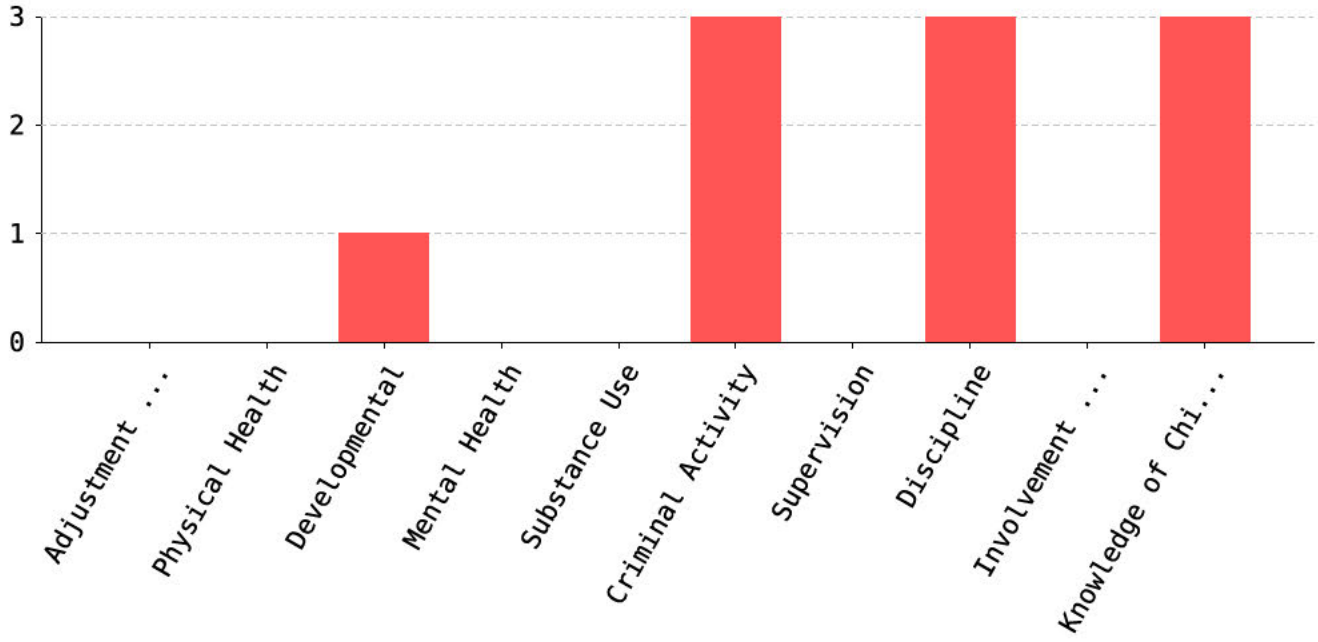
Tennessee Department of Children's Services
FAST 2.0 Assessment Detail Report

Event Type: CPS Case	**Assessment Date:** 09/18/2024
Assessment Type: FAST	**CPS Case ID:** [redacted]

CAREGIVERS

Each adult living in the family defined on the Summary Page who has any caregiver responsibilities would be rated separately in this section.

Participant: [redacted]	Person ID: [redacted]	Role: Caregiver

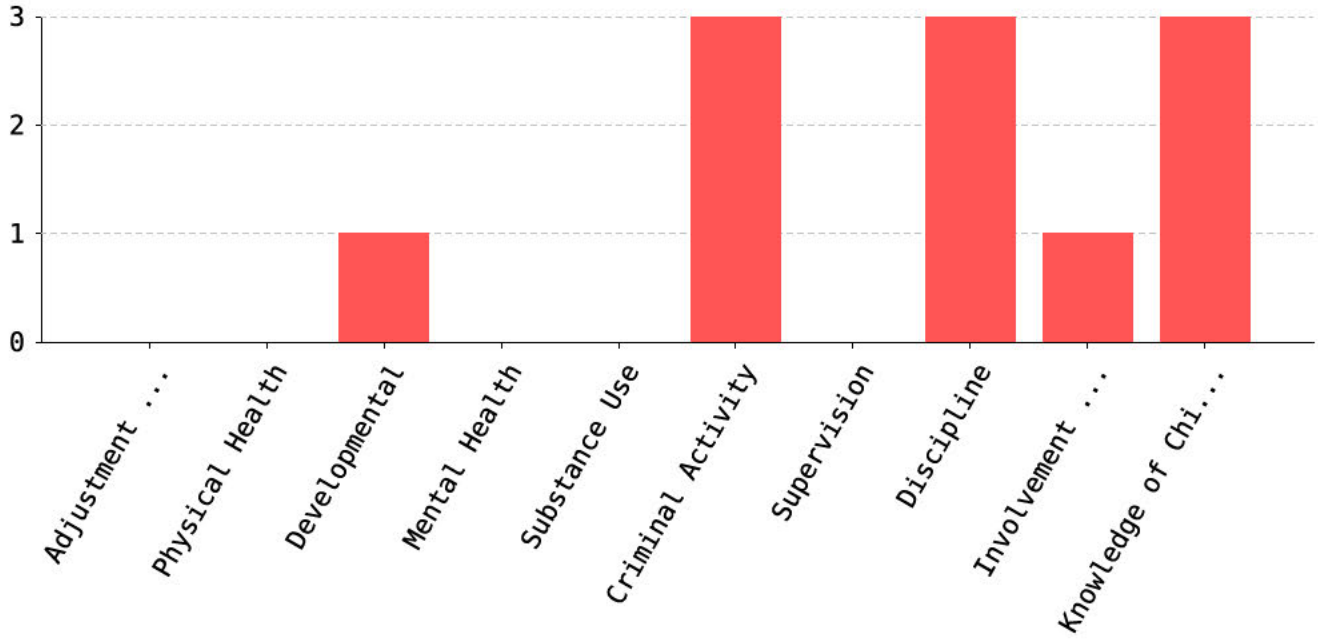


Item	Score	Justification/Narrative
Adjustment to Traumatic Experiences	0	
Physical Health	0	
Developmental	1	Watching; possible developmental delays.
Mental Health	0	
Substance Use	0	
Criminal Activity	3	[redacted] was arrested for Aggravated Assault on 9/17 for [redacted] death; the charge will potentially be upgraded.
Supervision	0	
Discipline	3	[redacted] was arrested for Aggravated Assault on 9/17 for [redacted] death; the charge will potentially be upgraded.
Involvement in Caregiving Functions	0	
Knowledge of Child and Family Needs	3	[redacted] was arrested for Aggravated Assault on 9/17 for [redacted] death; the charge will potentially be upgraded. The family reports that they were unaware of Safe Sleep for an infant.

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

Event Type: CPS Case	**Assessment Date:** 09/18/2024
Assessment Type: FAST	**CPS Case ID:** [redacted]

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



Item	Score	Justification/Narrative
Adjustment to Traumatic Experiences	0	
Physical Health	0	
Developmental	1	[redacted] reported that she was on disability due to not knowing how to count or do math.
Mental Health	0	
Substance Use	0	
Criminal Activity	3	[redacted] was arrested for Aggravated Assault on 9/17 for [redacted] death; the charge will potentially be upgraded.
Supervision	0	
Discipline	3	[redacted] was arrested for Aggravated Assault on 9/17 for [redacted] death; the charge will potentially be upgraded.
Involvement in Caregiving Functions	1	[redacted] reported that she has never given [redacted] a bath due to being scared of bathing babies.
Knowledge of Child and Family Needs	3	[redacted] was arrested for Aggravated Assault on 9/17 for [redacted] death; the charge will potentially be upgraded. The family reports that they were unaware of Safe Sleep for an infant.

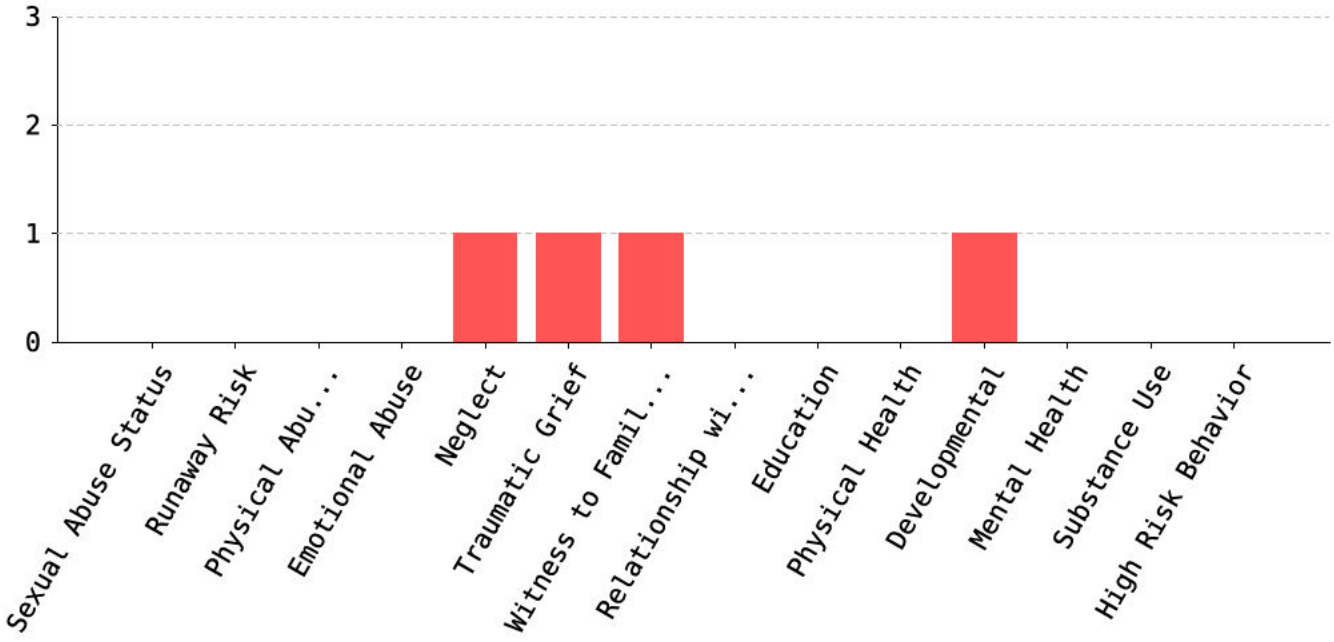
Tennessee Department of Children's Services
FAST 2.0 Assessment Detail Report

Event Type: CPS Case	**Assessment Date:** 09/18/2024
Assessment Type: FAST	**CPS Case ID:** [redacted]

YOUTH

This section is used to describe the strengths and needs of all children and youth whose age, at the time of the assessment, is 0 to 18 years.

Participant: [redacted]	Person ID: [redacted]	Age:3 Yrs



Item	Score	Justification/Narrative
Sexual Abuse Status	0	
Runaway Risk	0	
Physical Abuse Status	0	
Emotional Abuse	0	
Neglect	1	Environmental concerns were noted in the home.
Traumatic Grief	1	Watching; [redacted] baby brother recently passed away. An IPA has been put in place stating [redacted] will not have contact with his parents at this time.
Witness to Family, School or Community Violence	1	Watching; there are concerns that [redacted] may have witnessed the parents being abusive towards [redacted]
Relationship with Primary Caregiver	0	
Education	NA	
Physical Health	0	
Developmental	1	[redacted] may need speech classes.

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

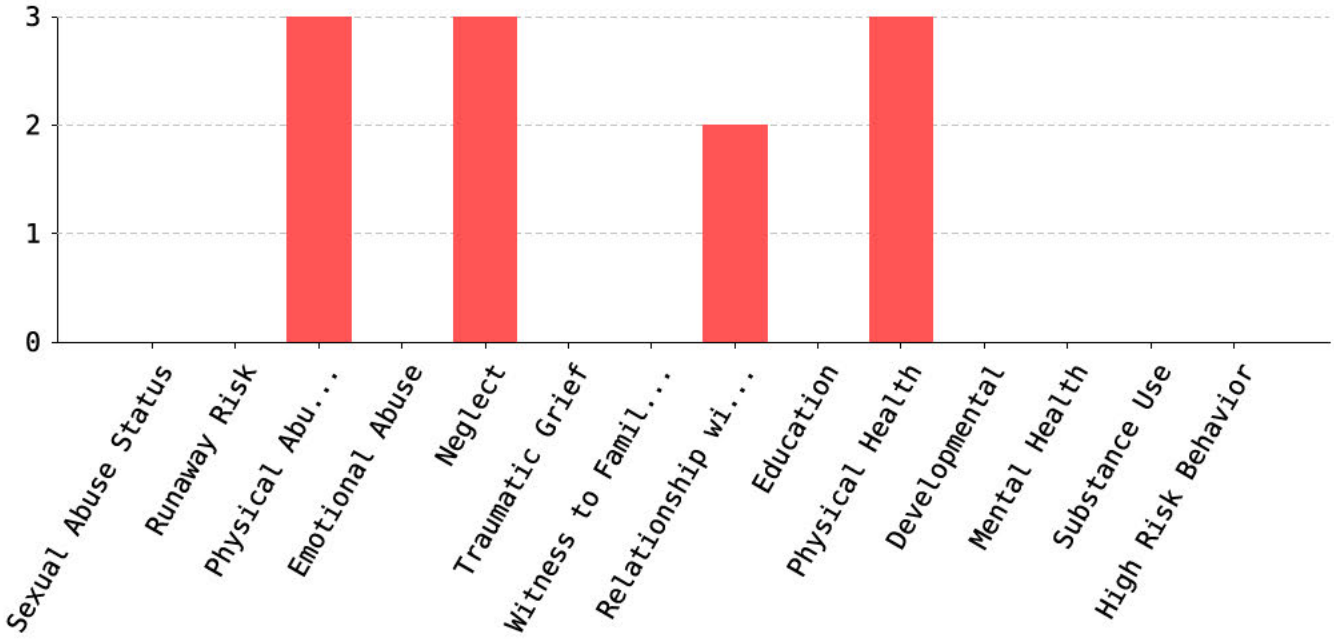
Event Type: CPS Case	**Assessment Date:** 09/18/2024
Assessment Type: FAST	**CPS Case ID:** [redacted]

Mental Health	0	
Substance Use	0	
High Risk Behavior	0	

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

Event Type: CPS Case	**Assessment Date:** 09/18/2024
Assessment Type: FAST	**CPS Case ID:** [redacted]

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



Item	Score	Justification/Narrative
Sexual Abuse Status	0	
Runaway Risk	0	
Physical Abuse Status	3	[redacted] autopsy showed a subdural hematoma and a hemorrage in the optic nerve. The full report has not been received, but there are concerns that [redacted] was shaken. [redacted] parents have been arrested for Aggravated Assault and the charges may be upgraded.
Emotional Abuse	0	
Neglect	3	[redacted] autopsy showed a subdural hematoma and a hemorrage in the optic nerve. The full report has not been received, but there are concerns that [redacted] was shaken. The family reported they were unaware of Safe Sleep practice for infants.
Traumatic Grief	0	
Witness to Family, School or Community Violence	0	
Relationship with Primary Caregiver	2	[redacted] autopsy showed a subdural hematoma and a hemorrage in the optic nerve. The full report has not been received, but there are concerns that [redacted] was shaken. The family reported they were unaware of Safe

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

Event Type: CPS Case	**Assessment Date:** 09/18/2024
Assessment Type: FAST	**CPS Case ID:** [redacted]

		Sleep practice for infants.
Education	NA	
Physical Health	3	[redacted] autopsy showed a subdural hematoma and a hemorrage in the optic nerve. The full report has not been received, but there are concerns that [redacted] was shaken.
Developmental	0	
Mental Health	0	
Substance Use	0	
High Risk Behavior	0	