



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

Intake

Intake ID: [REDACTED]

Intake Taken By: [REDACTED]

Intake Date/Time: 02/15/2022 04:51 PM [REDACTED]

Track Assigned: Investigation

Priority Assigned: 1

Screened By: [REDACTED]

Date Screened: 02/16/2022

Investigation

Investigation ID: [REDACTED]

First County/Region: [REDACTED]

Date/Time Assigned : 02/16/2022 12:57 PM

First Team Leader Assigned: [REDACTED] [REDACTED]

Date/Time 02/16/2022 12:00 AM

First Case Manager: [REDACTED] [REDACTED]

Date/Time 02/16/2022 12:00 AM

Allegations

Alleged Victim	Age	Allegation	Severe ?	Alleged Perpetrator	Relationship to Alleged Victim
			CSEM ?		
[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] (closed 2018)

Associated Case IDs: None

Family Case ID Detailed History:

Open Court Custody/FSS/FCIP None

Closed Court Custody None

Pending: None

Awaiting Screening: None

Submitted: None

Open CPS: None



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

Substantiated: None

Death: None

Screen Outs: None

History (not listed above):

ASMT # [REDACTED] EDN Services Recommended 12/3/18

INV # [REDACTED] ABN AUPU 8/17/12

RL # [REDACTED] 7/26/12

INV # [REDACTED] MDM AUPU - 1/19/12

INV # [REDACTED] MDM AUPU 1/18/12

County of Jurisdiction: [REDACTED]

School/ Daycare: [REDACTED] Elementary (siblings)

Active Military Status: No

Reporter's name/relationship: [REDACTED]

-Child/Family Identification and Relationship Introduction Paragraph:

[REDACTED] (13) resided in the home with her mother, [REDACTED] (35), [REDACTED] boyfriend, [REDACTED] (31), her brother (name unknown/est 6), and sister (name unknown/est 9) in [REDACTED] County.

-Are you requesting immediate assistance from DCS to your location, or only an immediate phone call?

No

-Please provide a brief summary of the concerns and why DCS is needed to respond immediately.

Detective [REDACTED] arrived at the family's home on 2.15.2022 after being informed of [REDACTED] passing. Detective [REDACTED] was not able to observe [REDACTED] because paramedics were already providing medical assistance to her. It is believed that [REDACTED] passed away during the night around 9pm on 2.14.2022. [REDACTED] found her around 8am on 2.15.2022. [REDACTED] was transported to [REDACTED] by EMS. The paramedics [REDACTED] Fire and Paramedics and Ambulance Unit [REDACTED] pronounced her deceased. They were the Unit [REDACTED] Shift. There was an autopsy ordered due to the unexpected death of [REDACTED]. The family believes that she had a seizure. It is currently unknown what caused [REDACTED] death.

Detective [REDACTED] was able to observe the conditions of the home. The living room area was clean, but the other rooms were dirty. There were dirty mattresses and dirt throughout the home. The home seemed to not have been dusted. The home smelled of feces but that could've been a result of [REDACTED] death. The condition of [REDACTED] room was concerning. There were some fluids (unknown specifically) and feces on her bed. It is unknown if the fluids and the feces were from [REDACTED] passing or if they were on the bed for an extended amount of time. To the left of [REDACTED] bed was a smaller bed with a mattress that had no bedding. It was reported that the sister sleeps in the bed. [REDACTED] wheelchair was also in the room. The wheelchair did not appear to have been used. There were baby wipes, tubing and other items on it. It appeared as if it was being used as a nightstand. There are concerns that [REDACTED] had been in the bed since 2.12.2022 but it is unknown for sure. [REDACTED] had the responsibility of getting [REDACTED] out of bed each day.

[REDACTED] and [REDACTED] (professional in home) were interviewed, briefly. They were visibly upset. [REDACTED] stated that on 2.14.2022 [REDACTED] seemed a little lethargic, but it could've been due to the medication she was given on 2.14.2022. The parents stated that she was fine. [REDACTED] takes Synthroid (daily after feeding along with MiralAX), DDavp (daily/seizures) and Keppra (seizure). The parents stated that they didn't have the DDavp over the weekend so that [REDACTED] was given a double dose on 2.14.2022. It is unknown if it is recommended that [REDACTED] is provided with a double dose of medication if she misses a dose. [REDACTED] is also prescribed hydrocortisone (for her skin) and Pediasure plus fiber (5 times a day). She takes Motrin as needed.

[REDACTED] and [REDACTED] were informed that DCS would be contacted. They expressed understanding. The parents informed Detective [REDACTED] that they personally didn't have anything else to share. Detective [REDACTED] is concerned that the sister could possibly have information to share with DCS. There is a concern



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

that the sister gets up for school at 6am but no one noticed that [REDACTED] had passed. There is also a concern that no one checked on [REDACTED] from 6a to 8a this morning. There is a concern that the death could be caused by a lack of supervision. It is unknown if there is a history of DCS involvement with the family. There are no substance concerns with the family. There are none known concerns of domestic violence. Law Enforcement is wanting DCS to investigate the home to ensure that there are not any environmental concerns for the younger children who reside in the home.

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

None reported.

-Anything additional to add to this initial report for the responding worker to know prior to response?

[REDACTED] goes to the home daily (8a to 2p, depending on how [REDACTED] does) to provide care to [REDACTED]. She monitored her and fed her. [REDACTED] had a feeding tube. She was also diagnosed with diabetes and had seizures. [REDACTED] was partially blind, had "percussion of puberty" (puberty was stopped), and was wheelchair bound. She had some bowel issues, so she wore diapers. She was also septic.

CM Notation: None

Screener Notation: None

Emailed/Paged CPSI On Call: None

**Additional Information per [REDACTED] M [REDACTED]

I have spoken to Detective [REDACTED] regarding the child death case. She has concerns for neglect and lack of supervision related to the death. The parents and provider in the home have conflicting stories. One states, child was lethargic and the other states, child was fine. Child was out of medication over the weekend and they double dosed the child as well to make up for that on Monday (I believe on date). That is a major concern as well. The child was deceased over night into the am hours and no one checked on the child which the detective believes due to child's medical, that should have been done. Supposedly, the other child sleeps in the same room but detective reported the observation of the room does not believe this is true either. She couldn't speak to other children yesterday. Detective [REDACTED] has concerns for the home environment with the other children as well. The child was sent for an autopsy and there was not a preliminary completed due to the EMS messing up. After speaking with the detective and her concerns, I believe this does need to be screened in.

Notified Child Death/Preliminary Near-Death Notification Group via Email:

DCS Child Death or Preliminary Near Death Alert group

RA: [REDACTED]

Per SDM: Investigation P1: Approved by CAH Director [REDACTED], CM3 [REDACTED] on 2/16/2022 @ 12:31 PM [REDACTED]. Email sent to [REDACTED] Region CPS Notification group, [REDACTED], and [REDACTED]. Received by [REDACTED]



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

Participant(s)

Name: [REDACTED]

Gender: Male

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN:

Race:

Age: 34 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] Race: Black/African Age: Deceased

Address: [REDACTED], [REDACTED] Tennessee [REDACTED]

Deceased Date: 02/14/2022

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact: [REDACTED]

Contact Type: CELL

Contact Comments: mother/[REDACTED]

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: [REDACTED]

Gender: Female

Date of Birth: [REDACTED]

Participant ID: [REDACTED]

SSN:

Race:

Age: 37 Yrs

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact:

Contact Type:

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: [REDACTED]

Gender: Female

Date of Birth:

Participant ID: [REDACTED]

SSN:

Race:

Age:

Address:

Deceased Date:

School/ ChildCare Comments:

Alleged Perpetrator: No

DCS Foster Child: No

Contact: [REDACTED]

Contact Type: CELL

Contact Comments:

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



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

Name: Unknown Participant [REDACTED] Unknown

Gender: [REDACTED] **Date of Birth:** [REDACTED]

Participant ID: [REDACTED]

SSN: [REDACTED] **Race:** [REDACTED]

Age: [REDACTED]

Address: [REDACTED]

Deceased Date: [REDACTED]

School/ ChildCare Comments: [REDACTED]

Alleged Perpetrator: Yes

DCS Foster Child: No

Contact: [REDACTED]

Contact Type: [REDACTED]

Contact Comments: [REDACTED]

External History Search Results:

DCS History Search Results:

DCS Intake Search Results:



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed

Contact Date: 2023-07-31 14:55:00.0 Contact Method:

Contact Time: 02:55 PM Contact Duration:

Entered By: [REDACTED] Recorded For:

Location: DCS Office Created Date: 07/31/2023

Completed date: 07/31/2023 Completed By: [REDACTED] [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 07/31/2023 02:57 PM Entered By: [REDACTED] [REDACTED]

This case has been reviewed by Central Office. Permission to close was granted by [REDACTED] on 7/27/23.
The 740 will be sent to [REDACTED] County Juvenile Court.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed

Contact Date: 2023-07-27 16:00:00.0 Contact Method:

Contact Time: 04:00 PM Contact Duration:

Entered By: [REDACTED] Recorded For:

Location: Other Community Site Created Date: 07/27/2023

Completed date: 07/27/2023 Completed By: [REDACTED] [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] [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 07/27/2023 04:04 PM Entered By: [REDACTED] [REDACTED]

On February 15, 2022, the Department of Childrens Services (DCS) received a referral for an allegation of Abuse Death regarding Alleged Child Victim (ACV) [REDACTED] (13). The Alleged Perpetrator (AP) was unknown at the time of the referral. This investigation was assigned to Child Protective Services Case Manager (CM) [REDACTED] by Team Lead (TL) [REDACTED]. This case was worked in conjunction with [REDACTED] Police Department (PD) Officer, [REDACTED] [REDACTED]

[REDACTED] lived at home with her birth mother, [REDACTED] mothers boyfriend, [REDACTED] and siblings, [REDACTED] (19), [REDACTED] (9) and [REDACTED] (5).

On February 15, 2022, [REDACTED] Police Department responded to the home of an unresponsive child. It is believed that [REDACTED] passed away on the night of February 14, 2022, but was not found until the morning of February 15, 2022, at approximately 8:00 am. [REDACTED] was transported to [REDACTED] Hospital by Emergency Medical Services (EMS) and it was unknown what caused [REDACTED] death. There was an autopsy ordered due to the unknown nature in which [REDACTED] passed away. [REDACTED] with [REDACTED] Police Department was able to observe the home on this date and the home was reported to be unclean and in disarray.

According to medical records, [REDACTED] had the following diagnosis: Cerebral Palsy, seizure disorder, and Panhypopituitarism per medical records as well as microcephaly, polymicrogyria, scoliosis, and underweight.

On February 15, 2022, [REDACTED] Home Health Nurse, reported that [REDACTED] seemed a little lethargic the day before, but stated that it could've been due to the medication that she was given on February 14, 2022. Ms. [REDACTED] reported that [REDACTED] takes Synthroid daily after feeding along with MiralAX, Desmopressin (DDavp), and Keppra. Ms. [REDACTED] reported that [REDACTED] is also prescribed hydrocortisone cream and Pediasure plus fiber 5 times per day and takes Motrin as needed. Ms. [REDACTED] reported that she goes to the home daily from 8:00 am to 2:00 pm to provide care to [REDACTED]. Ms. [REDACTED] reported that she would monitor [REDACTED] and feed her. Ms. [REDACTED] reported that [REDACTED] had a feeding tube. Ms. [REDACTED] reported that [REDACTED] was also diagnosed with diabetes and had seizures. Ms. [REDACTED] reported that [REDACTED] was partially blind, had "percussion of puberty" (meaning puberty was stopped), and was wheelchair bound. Ms. [REDACTED] reported that [REDACTED] had some bowel



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

issues, so she wore diapers. Ms. [REDACTED] reported that [REDACTED] was also septic.

On February 15, 2022, [REDACTED] was interviewed. She reported that she did not have [REDACTED] Desmopressin medication over the weekend, so she gave her a double dose on February 14, 2022. Ms. [REDACTED] reported that [REDACTED] has been delayed throughout her life, starting when she was 2yo. [REDACTED] had a seizure at 2years old, which hindered her brain development. At 5 years of age, [REDACTED] started hurting herself by hitting/scratching on herself. [REDACTED] has had to have 24/7 care throughout her life and she has had a nurse come in daily, who doesn't leave until approximately 8:00pm-10:00pm. Ms. [REDACTED] reported that the nurse did not leave the home until approximately 10:00pm on February 14, 2022. She reported that [REDACTED] sleeps in the room with [REDACTED] and she was asleep by approximately 9:00pm. Ms. [REDACTED] reported that she woke up around 8:00am on February 15, 2022 and laid in bed for approximately 15 minutes before going to check on [REDACTED]. The nurse was running late that morning due to staying late the night before. Ms. [REDACTED] went to change [REDACTED] diaper and noticed that her feet were cold and legs were stiff. She had her oldest daughter call EMS and Mr. [REDACTED] started CPR. Ms. [REDACTED] reported that [REDACTED] has had a plethora of health problems throughout her life and has never been developmentally on task.

On February 15, 2022, [REDACTED] and [REDACTED] were also interviewed; however, both children denied knowing what happened to [REDACTED]. Neither child made a disclosure of abuse or neglect and denied any abuse regarding [REDACTED].

On February 17, 2022, an autopsy was completed on [REDACTED] by Dr. [REDACTED], Regional Forensics Center, [REDACTED] TN. The autopsy reported clinical history of Cerebral Palsy, seizure disorder, and Panhypopituitarism per medical records as well as microcephaly, polymicrogyria, scoliosis, and underweight. The Cause of Death is Could Not Be Determined, and Manner of Death is Could Not Be Determined.

On January 18, 2023, CM [REDACTED] presented this case to the [REDACTED] County Child Protective Investigative Team (CPIT). Those in attendance were TL [REDACTED], Detective [REDACTED], ADA [REDACTED], Child Advocacy Center (CAC) Director [REDACTED], CAC Therapist [REDACTED], Medical Staff [REDACTED], and CAC Victim Advocate [REDACTED]. The team was in agreement that there was not a preponderance of evidence to support the allegation of Abuse Death. CM [REDACTED] met with family and offered grief counseling and other services to the family, however the mother declined the need at this time and stated she has been talking with a church member.

Per DCS Policy Work Aid 1 Section E:

Child Death is defined as:

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

There is not a preponderance of evidence to support the allegation of Abuse Death. This case will be closed and classified as Allegation Unsubstantiated, Perpetrator Unsubstantiated for the Abuse Death of ACV [REDACTED] [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed

Contact Date: 2023-06-21 14:18:00.0 Contact Method:

Contact Time: 02:18 PM Contact Duration:

Entered By: [REDACTED] Recorded For:

Location: DCS Office Created Date: 06/21/2023

Completed date: 06/21/2023 Completed By: [REDACTED] [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: 06/21/2023 01:21 PM Entered By: [REDACTED] [REDACTED]

This is a child death case. CM was to upload medical records, documents, any photos, home health records, and CPIT form. CM needs to update any notes. The case will need to be reviewed for closure once these are done.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
Contact Date: 2023-01-18 14:00:00.0 Contact Method: Face To Face
Contact Time: 02:00 PM Contact Duration:
Entered By: [REDACTED] Recorded For:
Location: Other Community Site Created Date: 02/21/2023
Completed date: 02/21/2023 Completed By: [REDACTED] [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] [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 02/21/2023 05:14 PM Entered By: [REDACTED] [REDACTED]

On January 18, 2023, CM [REDACTED] presented this case to the [REDACTED] County Child Protective Investigative Team (CPIT). Those in attendance were TL [REDACTED], Detective [REDACTED], ADA [REDACTED], Child Advocacy Center (CAC) Director [REDACTED], CAC Therapist [REDACTED], Medical Staff [REDACTED], and CAC Victim Advocate [REDACTED]. The team was in agreement that there was not a preponderance to support the allegation of Abuse Death. This case will be closed and classified as Allegation Unsubstantiated, Perpetrator Unsubstantiated for the Abuse Death of [REDACTED].



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed

Contact Date: 2023-01-17 08:30:00.0 Contact Method: Attempted Phone Call

Contact Time: 08:30 AM Contact Duration:

Entered By: [REDACTED] Recorded For:

Location: Other Community Site Created Date: 04/06/2023

Completed date: 04/06/2023 Completed By: [REDACTED] [REDACTED]

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

Contact Type(s): Alleged Perpetrator Interview

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED] Participant, Unknown

Narrative Details

Narrative Type: Original Entry Date/Time: 04/06/2023 01:52 PM Entered By: [REDACTED] [REDACTED]

No AP was named throughout this investigation; therefore, an AP interview could not be concluded.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed

Contact Date: 2022-12-19 09:26:00.0 Contact Method:

Contact Time: 09:26 AM Contact Duration:

Entered By: [REDACTED] Recorded For:

Location: Other Community Site Created Date: 12/19/2022

Completed date: 12/19/2022 Completed By: [REDACTED] [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 12/19/2022 10:37 AM Entered By: [REDACTED] [REDACTED]

Case staffed with CPS [REDACTED] [REDACTED] CPS [REDACTED] sent the medical records to Nurse [REDACTED] to be reviewed and CPS will staff with TL upon receiving the review of records. CPS will present to CPIT in January and close the case.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
Contact Date: 2022-12-08 10:00:00.0 Contact Method: Face To Face
Contact Time: 10:00 AM Contact Duration:
Entered By: [REDACTED] Recorded For:
Location: School Created Date: 03/13/2023
Completed date: 03/13/2023 Completed By: [REDACTED] [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
Contact Type(s): Sibling Interview/Observation
Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/13/2023 09:29 AM Entered By: [REDACTED] [REDACTED]

CPS completed a visit with [REDACTED] and [REDACTED]'s [REDACTED] at school. Both children were clean and well-groomed with no visible marks or bruises at the time of the visit. Both children reported liking school but reported they were ready and excited for Christmas/Christmas Break. Both children appeared to be happy and were talkative throughout the visit. No concerns were noted.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed

Contact Date: 2022-11-18 10:05:00.0 Contact Method:

Contact Time: 10:05 AM Contact Duration:

Entered By: [REDACTED] Recorded For:

Location: Other Community Site Created Date: 12/19/2022

Completed date: 12/19/2022 Completed By: [REDACTED] [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 12/19/2022 10:35 AM Entered By: [REDACTED] [REDACTED]

Case was staffed with CPS [REDACTED] [REDACTED]. Autopsy was received and it was reported cause and mannerism of death could not be determined. CPS [REDACTED] sent the medical records to Nurse [REDACTED] to be reviewed. CPS will get with LE following the review of medical records to prepare for CPIT and close the case.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
Contact Date: 2022-11-17 12:00:00.0 Contact Method: Face To Face
Contact Time: 12:00 PM Contact Duration:
Entered By: [REDACTED] Recorded For:
Location: School Created Date: 03/13/2023
Completed date: 03/13/2023 Completed By: [REDACTED] [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
Contact Type(s): Sibling Interview/Observation
Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/13/2023 10:19 AM Entered By: [REDACTED] [REDACTED]

CPS completed a visit with [REDACTED] and [REDACTED]'s [REDACTED] at school. Both children were clean and well-groomed with no visible marks or bruises at the time of the visit. Both children reported liking school but reported they were ready and excited for Thanksgiving Break. Both children appeared to be happy and were talkative throughout the visit. No concerns were noted.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
Contact Date: 2022-10-31 17:00:00.0 Contact Method: Face To Face
Contact Time: 05:00 PM Contact Duration:
Entered By: [REDACTED] Recorded For:
Location: Family Home Created Date: 03/13/2023
Completed date: 03/13/2023 Completed By: [REDACTED] [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
Contact Type(s): Parent/Caretaker Interview,Sibling Interview/Observation
Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/13/2023 09:59 AM Entered By: [REDACTED] [REDACTED]

CPS completed a follow up with the family at home. CPS was invited into the home by [REDACTED] CPS brought the children thick winter coats donated to the [REDACTED] CAC and the family was thankful. The children were anxious to get outside to go trick or treating so the visit was short. Both children appeared to be happy and healthy with no concerns and the home was clean.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
Contact Date: 2022-10-28 11:00:00.0 Contact Method:
Contact Time: 11:00 AM Contact Duration:
Entered By: [REDACTED] Recorded For:
Location: Other Community Site Created Date: 02/21/2023
Completed date: 02/21/2023 Completed By: [REDACTED] [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
Contact Type(s): Notation
Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED] [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 02/21/2023 05:17 PM Entered By: [REDACTED] [REDACTED]

CPS received the autopsy regarding [REDACTED] [REDACTED] The report indicates, On February 17, 2022, an autopsy was completed on [REDACTED] [REDACTED] by Dr. [REDACTED], Regional Forensics Center, [REDACTED] TN. The autopsy reported clinical history of Cerebral Palsy, seizure disorder, and Panhypopituitarism per medical records as well as microcephaly, polymicrogyria, scoliosis, and underweight. The Cause of Death is Could Not Be Determined, and Manner of Death is Could Not Be Determined.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed

Contact Date: 2022-10-18 09:29:00.0 Contact Method:

Contact Time: 09:29 AM Contact Duration:

Entered By: [REDACTED] Recorded For:

Location: DCS Office Created Date: 10/18/2022

Completed date: 10/18/2022 Completed By: [REDACTED] [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 10/18/2022 09:29 AM Entered By: [REDACTED] [REDACTED]

Case was staffed with CPS [REDACTED] [REDACTED] Autopsy is pending. CPS [REDACTED] will continue the investigative tasks and staff with TL, if needed.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed

Contact Date: 2022-09-29 09:23:00.0 Contact Method:

Contact Time: 09:23 AM Contact Duration:

Entered By: [REDACTED] Recorded For:

Location: DCS Office Created Date: 09/29/2022

Completed date: 09/29/2022 Completed By: [REDACTED] [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 09/29/2022 09:24 AM Entered By: [REDACTED] [REDACTED]

Case was staffed with CPS [REDACTED] [REDACTED] Autopsy is pending. CPS [REDACTED] will continue the investigative tasks and staff with TL, if needed.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
Contact Date: 2022-09-16 13:00:00.0 Contact Method: Face To Face
Contact Time: 01:00 PM Contact Duration:
Entered By: [REDACTED] Recorded For:
Location: School Created Date: 03/13/2023
Completed date: 03/13/2023 Completed By: [REDACTED] [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
Contact Type(s): Sibling Interview/Observation
Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/13/2023 09:31 AM Entered By: [REDACTED] [REDACTED]

CPS completed a visit with [REDACTED] and [REDACTED]'s [REDACTED] at school. Both children were clean and well-groomed with no visible marks or bruises at the time of the visit. Both children reported liking school and denied any issues at school or at home. Both children appeared to be happy and no concerns were noted.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed

Contact Date: 2022-08-31 16:00:00.0 Contact Method:

Contact Time: 04:00 PM Contact Duration:

Entered By: [REDACTED] Recorded For:

Location: DCS Office Created Date: 09/29/2022

Completed date: 09/29/2022 Completed By: [REDACTED] [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 09/29/2022 09:24 AM Entered By: [REDACTED] [REDACTED]

Case was staffed with CPS [REDACTED] [REDACTED] Autopsy is pending. CPS [REDACTED] will continue the investigative tasks and staff with TL, if needed.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
Contact Date: 2022-08-23 15:00:00.0 Contact Method: Face To Face
Contact Time: 03:00 PM Contact Duration:
Entered By: [REDACTED] Recorded For:
Location: Family Home Created Date: 03/13/2023
Completed date: 03/13/2023 Completed By: [REDACTED] [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
Contact Type(s): Parent/Caretaker Interview,Sibling Interview/Observation
Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/13/2023 09:56 AM Entered By: [REDACTED] [REDACTED]

CPS completed a follow up visit with the family at home. CPS was invited into the home by [REDACTED]. Both children were observed to be happy and healthy with no visible marks or bruises at the time of the visit. Both children talked about school and favorite thing they did over summer break. The home was clean and tidy on this date. [REDACTED] asked if CPS has gotten the autopsy back on [REDACTED] and CPS had not. CPS explained that as soon as the autopsy comes back, CPS will notify her. No other questions were asked and the visit concluded.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
Contact Date: 2022-07-27 14:00:00.0 Contact Method: Face To Face
Contact Time: 02:00 PM Contact Duration:
Entered By: [REDACTED] Recorded For:
Location: Family Home Created Date: 03/13/2023
Completed date: 03/13/2023 Completed By: [REDACTED] [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
Contact Type(s): Parent/Caretaker Interview,Sibling Interview/Observation
Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/13/2023 09:52 AM Entered By: [REDACTED] [REDACTED]

CPS completed a visit with the family at home. CPS was invited into the home by [REDACTED]. The children are currently out of school for summer break and state that they are enjoying being out of school. The children reported that they have played outside and visited with their adult sister for the summer. Both children appeared to be happy, healthy, and without any marks or bruises. The family denied any concerns and the visit concluded.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed

Contact Date: 2022-07-19 14:32:00.0 Contact Method:

Contact Time: 02:32 PM Contact Duration:

Entered By: [REDACTED] Recorded For:

Location: DCS Office Created Date: 07/19/2022

Completed date: 07/19/2022 Completed By: [REDACTED] [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 07/19/2022 02:33 PM Entered By: [REDACTED] [REDACTED]

Case was staffed with CPS [REDACTED] Autopsy is pending. CPS [REDACTED] will continue the investigative tasks and staff with TL, if needed.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed

Contact Date: 2022-06-30 16:25:00.0 Contact Method:

Contact Time: 04:25 PM Contact Duration:

Entered By: [REDACTED] Recorded For:

Location: DCS Office Created Date: 07/14/2022

Completed date: 07/14/2022 Completed By: [REDACTED] [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 07/14/2022 05:08 PM Entered By: [REDACTED] [REDACTED]

Case was staffed with CPS [REDACTED] Autopsy is pending. CPS [REDACTED] will continue the investigative tasks and staff with TL, if needed.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
Contact Date: 2022-06-22 15:00:00.0 Contact Method: Face To Face
Contact Time: 03:00 PM Contact Duration:
Entered By: [REDACTED] Recorded For:
Location: Family Home Created Date: 03/13/2023
Completed date: 03/13/2023 Completed By: [REDACTED] [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
Contact Type(s): Parent/Caretaker Interview,Sibling Interview/Observation
Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/13/2023 09:49 AM Entered By: [REDACTED] [REDACTED]

CPS completed a follow up visit with the family at home. CPS was greeted and invited into the home by [REDACTED] CPS observed the children to be clean and well-groomed with no visible marks or bruises. Both children were talkative with CPS and showed CPS different toys in their rooms. The home was observed to be clean. The family had no questions or concerns and the visit concluded.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed

Contact Date: 2022-05-31 09:45:00.0 Contact Method:

Contact Time: 09:45 AM Contact Duration:

Entered By: [REDACTED] Recorded For:

Location: Other Community Site Created Date: 06/03/2022

Completed date: 06/03/2022 Completed By: [REDACTED] [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 06/03/2022 10:19 AM Entered By: [REDACTED] [REDACTED]

Case was staffed with CPS [REDACTED] Autopsy is pending. CPS [REDACTED] will continue the investigative tasks and staff with TL, if needed.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
Contact Date: 2022-05-24 16:10:00.0 Contact Method: Face To Face
Contact Time: 04:10 PM Contact Duration:
Entered By: [REDACTED] Recorded For:
Location: Family Home Created Date: 03/13/2023
Completed date: 03/13/2023 Completed By: [REDACTED] [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
Contact Type(s): Parent/Caretaker Interview,Sibling Interview/Observation
Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/13/2023 09:46 AM Entered By: [REDACTED] [REDACTED]

CPS completed a follow up visit with the family at home. CPS was greeted and invited into the home by [REDACTED]. Upon entering the home, CPS observed the children in the living room. Both children appeared to be happy and healthy. The home was observed to be clean and tidy. CPS offered to refer the family to counseling services; however, the mother declined and stated that she has been talking with a church member. No concerns were noted on this date.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
Contact Date: 2022-04-22 16:00:00.0 Contact Method: Face To Face
Contact Time: 04:00 PM Contact Duration:
Entered By: [REDACTED] Recorded For:
Location: Family Home Created Date: 03/13/2023
Completed date: 03/13/2023 Completed By: [REDACTED] [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
Contact Type(s): Parent/Caretaker Interview,Sibling Interview/Observation
Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/13/2023 09:43 AM Entered By: [REDACTED] [REDACTED]

CPS met with the family at home in [REDACTED] Tn. CPS was greeted and invited inside the residence by [REDACTED] Both children were observed to be happy and playing throughout the visit. Both children were observed to be clean and well-groomed with no visible marks or bruises. The children showed CPS their toys and explained that they went to visit their adult sister to help get her moved into her apartment. The home was observed to be clean and [REDACTED] was cleaning throughout the visit. No concerns were noted on this date.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed

Contact Date: 2022-04-18 15:35:00.0 Contact Method:

Contact Time: 03:35 PM Contact Duration:

Entered By: [REDACTED] Recorded For:

Location: DCS Office Created Date: 04/19/2022

Completed date: 04/19/2022 Completed By: [REDACTED] [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 04/19/2022 01:59 PM Entered By: [REDACTED] [REDACTED]

Case staffed with CPS [REDACTED] autopsy is pending. CPS [REDACTED] will complete the monthly follow up visit and CPS [REDACTED] will continue the investigative tasks.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed

Contact Date: 2022-03-24 13:30:00.0 Contact Method:

Contact Time: 01:30 PM Contact Duration:

Entered By: [REDACTED] Recorded For:

Location: Other Community Site Created Date: 03/24/2022

Completed date: 03/24/2022 Completed By: [REDACTED] [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 03/24/2022 03:26 PM Entered By: [REDACTED] [REDACTED]

Case staffed with CPS [REDACTED] autopsy is pending. CPS [REDACTED] completed the monthly follow up visits with the family and will continue the investigative tasks.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed

Contact Date: 2022-03-02 14:00:00.0 Contact Method:

Contact Time: 02:00 PM Contact Duration:

Entered By: [REDACTED] Recorded For:

Location: Other Community Site Created Date: 03/02/2022

Completed date: 03/02/2022 Completed By: [REDACTED] [REDACTED]

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

Contact Type(s): Notation

Contact Sub Type:

Children Concerning**Participant(s)**

[REDACTED] [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/02/2022 04:07 PM Entered By: [REDACTED] [REDACTED]

CPS faxed a release of information for medical records to [REDACTED] [REDACTED] medical providers including: [REDACTED]
[REDACTED], Inc., [REDACTED] Children's Hospital, [REDACTED] Hospital, and [REDACTED] Pediatric Ophthalmology.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	2022-03-02 10:15:00.0	Contact Method:	Face To Face
Contact Time:	10:15 AM	Contact Duration:	
Entered By:	[REDACTED] [REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	02/12/2023
Completed date:	02/12/2023	Completed By:	[REDACTED] [REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Notation,Sibling Interview/Observation		
Contact Sub Type:			

Children Concerning**Participant(s)**

[REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 02/12/2023 08:30 PM Entered By: [REDACTED] [REDACTED]

CPS met with [REDACTED] and [REDACTED] at school on this date. The children both reported that they have been testing for TCAP and state that they are finished with testing at 9:45am each day. The children reported that school is going well with no issues as is home-life. The children reported feeling sad about their sister's passing but neither child had information about what caused [REDACTED] death. [REDACTED] was observed wearing [REDACTED] old hoodie that is too big; however, she reported that it gives her comfort. No concerns were noted for the children on this date.

CPS met with [REDACTED], Principal, as well as [REDACTED], [REDACTED] previous teacher. [REDACTED] reported that [REDACTED] has always been developmentally delayed and states that [REDACTED] has always had a nurse and has been medically fragile. [REDACTED] reported that [REDACTED] was visually impaired and would self-harm such as hitting herself/others, biting self/others, and was diabetic. [REDACTED] reported that [REDACTED] would come to school Monday-Thursday and would be out on Friday's so that her father could pick her up and spend the weekend with her. [REDACTED] reported that there were many occasions that [REDACTED] would get sick due to her low immune system and would have to miss school until she eventually went completely homebound due to her fragile state. [REDACTED] reported that [REDACTED] could eat "puffs" by hand if they were placed in a cup with a top where she could put her hand through. [REDACTED] reported that there were times when [REDACTED] mother, would have meetings with the school staff and would be defensive but was reasonable most of the time. Neither staff had any concerns regarding [REDACTED] or [REDACTED]



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed

Contact Date: 2022-02-18 14:30:00.0 Contact Method:

Contact Time: 02:30 PM Contact Duration:

Entered By: [REDACTED] Recorded For:

Location: Created Date: 04/19/2022

Completed date: 04/19/2022 Completed By: [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 04/19/2022 01:02 PM Entered By: [REDACTED]

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

The CPS investigation was assigned on 2/16/22 concerning the death of ACV [REDACTED] (13yo). It was reported [REDACTED] resided with her birth mother [REDACTED] the mothers paramour [REDACTED] and her siblings [REDACTED] /5yo, [REDACTED] 9yo, and [REDACTED] 19yo] in [REDACTED] County.

On 2/15/22 paramedics responded to the family home following a 911 after the mother reportedly found [REDACTED] unresponsive in bed. [REDACTED] was pronounced deceased and transported to [REDACTED] by EMS. An autopsy was ordered. It was reported [REDACTED] could not talk in complete sentences but could sing and hum. It was reported [REDACTED] was diagnosed with delayed development, blindness, diabetes, seizures, and is unable to eat or drink and she could not hold her waste, requiring tubes for feeding and elimination. There were initial concerns by LE regarding the cleanliness of the home. The parents reported no having [REDACTED] seizure medication over the weekend, so she was given a double dose on 2/14/22 when they were able to acquire the medicine. [REDACTED] cause of death is currently unknown or if related to her multiple medical diagnoses/issues or with the double dose of medication or improper care.

[REDACTED] has a home health nurse Monday through Friday from 8am to 10pm; however, the mother reported the new nurse is frequently late. At 8:02am on 2/15/22 the mother stated she got up to change [REDACTED] and observed it was odd as he went into [REDACTED] room that she was not awake as she usually is. The mother reported she went to move [REDACTED] and her legs were stiff and cold to the touch and she was not breathing. The mother stated she had the 19yo sibling call 911 and her boyfriend came in and did CPR while waiting on EMS. It was also noted that EMS mistakenly moved [REDACTED] although deceased, before law enforcement arrived to document the scene.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

The nurse and mother reported [REDACTED] was up the day before and they would get her up and used her wheelchair daily. The mother kept a binder detailing [REDACTED] diagnoses, medications, and care and appeared knowledgeable and involved in her care. The mother reported at 2yo [REDACTED] had a severe seizure and was declared brain dead but recovered. The mother said [REDACTED] did not have another seizure until the summer of 2021 and there is no medical explanation as to why the seizures have returned, but they have increased from once a month to 2-3 times a week. [REDACTED] was prescribed seizure medication and the mother stated it was not unusual for the medication to be on backorder and the pharmacy to not have it, and she has had to take her to the ER before to get the medicine when they were running low. The mother stated she did give [REDACTED] a double dose of the seizure medication the day she passed due to not having the days prior.

CM interviewed the siblings with no concerns. They made no disclosure of abuse or neglect towards themselves or [REDACTED]. The children get up at 6am and live the home to get on the school bus at 7:10am. The 9yo sister shares a bedroom with [REDACTED] and believed [REDACTED] was asleep when she left for school that morning. [REDACTED] was home schooled through Mumford Middle.

Next Steps:

- CM will request medical records for the ACV to include home health records. Records will be reviewed and uploaded to TFACTS. Safety Nurse consult to be completed.
- 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 follow-up regarding the seizure medication, if ACV had ever been given a double dose in the past, or if a double dose could cause harm.
- CM will document interviews with all household members and follow-up regarding grief counseling.
- 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] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID:	[REDACTED]	Status:	Created In Error
Contact Date:	2022-02-18 08:30:00.0	Contact Method:	
Contact Time:	08:30 AM	Contact Duration:	
Entered By:	[REDACTED]	Recorded For:	
Location:		Created Date:	02/24/2022
Completed date:	03/21/2022	Completed By:	TFACTS, Person Merge
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: 02/24/2022 02:19 PM Entered By: [REDACTED]

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

The CPS investigation was assigned on 2/16/22 concerning the death of ACV [REDACTED] (13yo). It was reported [REDACTED] resided with her birth mother [REDACTED] the mothers paramour [REDACTED] and her siblings [REDACTED] /5yo, [REDACTED] 9yo, and [REDACTED] 19yo] in [REDACTED] County.

On 2/15/22 paramedics responded to the family home following a 911 after the mother reportedly found [REDACTED] unresponsive in bed. [REDACTED] was pronounced deceased and transported to [REDACTED] by EMS. An autopsy was ordered. It was reported [REDACTED] could not talk in complete sentences but could sing and hum. It was reported [REDACTED] was diagnosed with delayed development, blindness, diabetes, seizures, and is unable to eat or drink and she could not hold her waste, requiring tubes for feeding and elimination. There were initial concerns by LE regarding the cleanliness of the home. The parents reported no having [REDACTED] seizure medication over the weekend, so she was given a double dose on 2/14/22 when they were able to acquire the medicine. [REDACTED] cause of death is currently unknown or if related to her multiple medical diagnoses/issues or with the double dose of medication or improper care.

[REDACTED] has a home health nurse Monday through Friday from 8am to 10pm; however, the mother reported the new nurse is frequently late. At 8:02am on 2/15/22 the mother stated she got up to change [REDACTED] and observed it was odd as he went into [REDACTED] room that she was not awake as she usually is. The mother reported she went to move [REDACTED] and her legs were stiff and cold to the touch and she was not breathing. The mother stated she had the 19yo sibling call 911 and her boyfriend came in and did CPR while waiting on EMS. It was also noted that EMS mistakenly moved [REDACTED] although deceased, before law enforcement arrived to document the scene.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

The nurse and mother reported [REDACTED] was up the day before and they would get her up and used her wheelchair daily. The mother kept a binder detailing [REDACTED] diagnoses, medications, and care and appeared knowledgeable and involved in her care. The mother reported at 2yo [REDACTED] had a severe seizure and was declared brain dead but recovered. The mother said [REDACTED] did not have another seizure until the summer of 2021 and there is no medical explanation as to why the seizures have returned, but they have increased from once a month to 2-3 times a week. [REDACTED] was prescribed seizure medication and the mother stated it was not unusual for the medication to be on backorder and the pharmacy to not have it, and she has had to take her to the ER before to get the medicine when they were running low. The mother stated she did give [REDACTED] a double dose of the seizure medication the day she passed due to not having the days prior.

CM interviewed the siblings with no concerns. They made no disclosure of abuse or neglect towards themselves or [REDACTED]. The children get up at 6am and live the home to get on the school bus at 7:10am. The 9yo sister shares a bedroom with [REDACTED] and believed [REDACTED] was asleep when she left for school that morning. [REDACTED] was home schooled through Mumford Middle.

Next Steps:

- CM will request medical records for the ACV to include home health records. Records will be reviewed and uploaded to TFACTS. Safety Nurse consult to be completed.
- 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 follow-up regarding the seizure medication, if ACV had ever been given a double dose in the past, or if a double dose could cause harm.
- CM will document interviews with all household members and follow-up regarding grief counseling.
- 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.

Narrative Type: Created In Error Entry Date/Time: 04/19/2022 01:02 PM Entered By: [REDACTED]

System completed. Reentered.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	2022-02-16 16:05:00.0	Contact Method:	Face To Face
Contact Time:	04:05 PM	Contact Duration:	
Entered By:	[REDACTED] [REDACTED]	Recorded For:	
Location:	Family Home	Created Date:	04/06/2023
Completed date:	04/06/2023	Completed By:	[REDACTED] [REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Parent/Caretaker Interview,Sibling Interview/Observation		
Contact Sub Type:			

Children Concerning**Participant(s)**

[REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 04/06/2023 02:10 PM Entered By: [REDACTED] [REDACTED]

CPS and Detective [REDACTED] with [REDACTED] Police Department met with the family at home. CPS and LE was invited into the home by [REDACTED] children's mother.

In order to engage the family, CPS explained the current report made to the Tennessee Department of Childrens Services. CPS explained all forms and engaged the family during the paperwork process. The custodian initialed and signed the Case Intake Packet Document Verification form (CS-0050) that provides the custodian with copies of the Clients Rights Handbook, Native American Heritage Veto Verification, Health Insurance Portability and Accountability Act (HIPAA) Acknowledgement, and the Notice of Equal Access to Programs and Services. CPS obtained the initialed and signed acknowledgement form. CPS also obtained all necessary release of information for all providers for [REDACTED] from the time of her birth until present.

[REDACTED] reported that [REDACTED] has been delayed throughout her life, starting when she was 2yo. [REDACTED] reported that [REDACTED] had a seizure at 2yo, which hindered her brain development. [REDACTED] reported that at 5yo, [REDACTED] started hurting herself by hitting/scratching on herself. [REDACTED] reported that [REDACTED] has had to have 23/7 care throughout her life and states that she has had a nurse come in daily, who doesn't leave until approximately 8-10pm. [REDACTED] reported that the nurse did not leave the home until approximately 10pm of 2/14/22 and states that [REDACTED] sleeps in the room with [REDACTED] and states that she was asleep by approximately 9pm. [REDACTED] reported that [REDACTED] typically wakes up mumbling/singing in the middle of the night but doesn't remember hearing her. [REDACTED] reported that she woke up around 8am on 2/15/22 and laid in bed for approximately 15 minutes before going to check on [REDACTED]. [REDACTED] reported that the nurse was running late that morning due to staying late the night before. [REDACTED] reported that she went to change [REDACTED] diaper and noticed that her feet were cold and legs were stiff. [REDACTED] reported that she started freaking out and had her oldest, adult daughter call 911 and [REDACTED] boyfriend started CPR. [REDACTED] reported that EMS arrived and took [REDACTED]. [REDACTED] reported that she doesn't know what cause [REDACTED] death. [REDACTED] reported that she is unsure if [REDACTED] checked on [REDACTED] prior to going to school that morning, as she leaves around 7:10am. [REDACTED] reported that [REDACTED] told her that she thought [REDACTED] just still sleeping when she left for school. [REDACTED] reported that



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

[REDACTED] has had a plethora of health problems throughout her life and has never been developmentally on task.

CPS met with [REDACTED] 9yo, privately. [REDACTED] reported that she enjoys school and feels safe at school and at home, [REDACTED] denied any abuse or neglect and denied witnessing anything happen to [REDACTED]. [REDACTED] reported that when she left for school on 2/14/22, she thought [REDACTED] was still sleeping.

CPS met with [REDACTED] 8yo, privately. [REDACTED] reported that he likes school and reported feeling safe at school and at home. [REDACTED] denied any abuse or neglect and denied witnessing anything happen to [REDACTED].

There were no safety hazards or concerns in the home or [REDACTED] and [REDACTED]. CPS staffed this case was TL [REDACTED] and no interventions were necessary at this time.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed

Contact Date: 2022-02-16 12:57:00.0 Contact Method:

Contact Time: 12:57 PM Contact Duration:

Entered By: [REDACTED] Recorded For:

Location: Other Community Site Created Date: 03/02/2022

Completed date: 03/02/2022 Completed By: [REDACTED] [REDACTED]

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

Contact Type(s): Administrative Review

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 03/02/2022 09:31 AM Entered By: [REDACTED] [REDACTED]

Case assigned:

Case Reference Name: [REDACTED] [REDACTED]

Referral Date: 2/15/22

Date Assigned: 2/16/22

P- RT due: P1, 2/16/22

Allegations: Abuse Death (S)

In initiating the case process, CM will check TFACTS for prior history. CM will make contact with the referent, if possible, to obtain additional information. CM will interview all parties, obtain household composition, speak with relevant collateral contacts such as teachers, doctors, neighbors and family members. CM will assure all notifications are completed as well as completion of assessments per policy guidelines. As needed, the CM will explore resources such as community partners, direct services and DCS contract agencies to meet the family's needs as determined if services are warranted.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
Contact Date: 2022-02-16 08:30:00.0 Contact Method: Correspondence
Contact Time: 08:30 AM Contact Duration:
Entered By: [REDACTED] Recorded For:
Location: Other Community Site Created Date: 03/13/2023
Completed date: 03/13/2023 Completed By: [REDACTED] [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] [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 03/13/2023 10:32 AM Entered By: [REDACTED] [REDACTED]

CPIT was convened with Detective [REDACTED] [REDACTED] from the [REDACTED] Police Department.

Allegation: Abuse Death

ACV: [REDACTED] [REDACTED]

AP: Unknown Participant

CPS emailed Detective [REDACTED] with the [REDACTED] Police Department to notify them of the severe abuse referral.

CPS emailed [REDACTED] (ADA), [REDACTED] (ADA), [REDACTED] (ADA) and [REDACTED] (ADA) to notify the District Attorneys Office of the severe abuse referral.

CPS emailed [REDACTED] to notify the CAC of the severe abuse referral.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed

Contact Date: 2022-02-15 17:10:00.0 Contact Method: Phone Call

Contact Time: 05:10 PM Contact Duration:

Entered By: [REDACTED] Recorded For:

Location: Other Community Site Created Date: 03/13/2023

Completed date: 03/13/2023 Completed By: [REDACTED] [REDACTED]

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

Contact Type(s): Referent Interview

Contact Sub Type:

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 03/13/2023 10:31 AM Entered By: [REDACTED] [REDACTED]

CPS was able to make contact with the referent. The referent stated that the information that was mentioned on the referral was correct to the best of their knowledge. The referent did not have any additional information.



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID:	[REDACTED]	Status:	Completed
Contact Date:	2022-02-15 17:00:00.0	Contact Method:	
Contact Time:	05:00 PM	Contact Duration:	
Entered By:	[REDACTED] [REDACTED]	Recorded For:	
Location:	Other Community Site	Created Date:	03/13/2023
Completed date:	03/13/2023	Completed By:	[REDACTED] [REDACTED]
Purpose(s):	Permanency,Safety - Child/Community,Service Planning,Well Being		
Contact Type(s):	Case Summary		
Contact Sub Type:	Opening		

Children Concerning**Participant(s)****Narrative Details**

Narrative Type: Original Entry Date/Time: 03/13/2023 10:29 AM Entered By: [REDACTED] [REDACTED]

OPENING CASE SUMMARY

On 02/15/2022 at 4:51 pm intake # [REDACTED] was called into the Department of Childrens Services (DCS) Child Abuse Hotline. The intake as screened into [REDACTED] County as a P1 with allegation(s) of Abuse Death against the alleged perpetrator (AP), Unknown Participant. The alleged child victim (ACV) is [REDACTED] [REDACTED]. The intake was assessed and assigned by Reader [REDACTED] to Investigator [REDACTED] [REDACTED] on 02/15/2022. Initial face to face response is due on 02/16/2022. It is unknown at this time if the child is of Native American decent. The local Juvenile Court and the District Attorneys Office are notified of referrals per local protocol. Notification of case assignment to the referent is automatically generated through the DCS CARAT System as requested.

The intake stated:

On February 15, 2022, [REDACTED] Police Department responded to the home of an unresponsive child. It is believed that [REDACTED] passed away on the night of February 14, 2022, but was not found until the morning of February 15, 2022, at approximately 8:00 am. [REDACTED] was transported to [REDACTED] Hospital by Emergency Medical Services (EMS) and it was unknown what caused [REDACTED] death. There was an autopsy ordered due to the unknown nature in which [REDACTED] passed away. [REDACTED] with [REDACTED] Police Department was able to observe the home on this date and the home was reported to be unclean and in disarray.

HOUSEHOLD COMPOSITION

The ACV(s) primary household is comprised of the following individuals:

ACV: [REDACTED]	DOB: [REDACTED]	Age: 34
Birth mother: [REDACTED]	DOB: [REDACTED]	Age: 9
Half-sister: [REDACTED]	DOB: [REDACTED]	Age: 6
Half-brother: [REDACTED]	DOB: [REDACTED]	Age: 6



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

TFACTS CHECKS

A TFACTS search was performed on 02/15/2022 for DCS history on the family members and other involved individuals and the results are as follows:

[REDACTED] Assessment 3: Closed 12/03/2018: [REDACTED] Region
[REDACTED] Resource Linkage: Closed 08/17/2012: [REDACTED] Region
Investigation 2: Closed 08/15/2012: [REDACTED] Region
Investigation 2: Closed 01/19/2012: [REDACTED] Region
Investigation 2: Closed 01/18/2011: [REDACTED] Region



Tennessee Department of Children's Services
Case Recording Summary

Case Id: [REDACTED]

Case Name: [REDACTED] [REDACTED]

Case Status: Close

Organization: Southwest Region

Case Recording Details

Recording ID: [REDACTED] Status: Completed
Contact Date: 2022-02-15 16:00:00.0 Contact Method: Face To Face
Contact Time: 04:00 PM Contact Duration:
Entered By: [REDACTED] Recorded For:
Location: Family Home Created Date: 05/04/2022
Completed date: 05/04/2022 Completed By: [REDACTED] [REDACTED]
Purpose(s): Permanency,Safety - Child/Community,Service Planning,Well Being
Contact Type(s): Initial ACV Face To Face
Contact Sub Type:

Children Concerning

[REDACTED] [REDACTED]

Participant(s)

[REDACTED] [REDACTED]

Narrative Details

Narrative Type: Original Entry Date/Time: 05/04/2022 10:24 AM Entered By: [REDACTED] [REDACTED]

ACV [REDACTED] [REDACTED] was not seen or observed due to the child being deceased per policy 20.27, Work Aid 2, Child Death-Near Death.



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

A. Investigation

Case Name: [REDACTED]

Investigation ID: [REDACTED]

Referral Date: 02/15/2022

Assignment Date: 02/16/2022

Street Address: [REDACTED],

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

B. Allegation

#	Children's Name	DOB	Specific Allegation for Each Child	Alleged Perpetrator's Name	DOB	Classification	Severe Abuse	Classified By Classified Date
							CSEM	
1	[REDACTED]	[REDACTED]	Abuse Death	Participant, Unknown		Allegation Unsubstantiated / Perpetrator Unsubstantiated	Yes	[REDACTED] 02/09/2023

C. Disposition Decision

Disposition Decision: Assessed and Closed

Comments: There is not a preponderance of evidence to support the allegation of Abuse Death. This case will be closed and classified as Allegation Unsubstantiated, Perpetrator Unsubstantiated for the Abuse Death of ACV
[REDACTED]**D. Case Workers**

Case Worker: [REDACTED]

Date: 05/04/2022

Team Leader: [REDACTED]

Date: 02/10/2023

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:

On February 15, 2022, [REDACTED] Police Department responded to the home of an unresponsive child. It is believed that [REDACTED] passed away on the night of February 14, 2022, but was not found until the morning of February 15, 2022, at approximately 8:00 am. [REDACTED] was transported to [REDACTED] Hospital by Emergency Medical Services (EMS) and it was unknown what caused [REDACTED] death. There was an autopsy ordered due to the unknown nature in which [REDACTED] passed away. [REDACTED] with [REDACTED] Police Department was able to observe the home on this date and the home was reported to be unclean and in disarray.

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

According to medical records, [REDACTED] had the following diagnosis: Cerebral Palsy, seizure disorder, and Panhypopituitarism per medical records as well as microcephaly, polymicrogyria, scoliosis, and underweight. On February 15, 2022, [REDACTED] Home Health Nurse, reported that [REDACTED] seemed a little lethargic the day before, but stated that it could've been due to the medication that she was given on February 14, 2022. Ms. [REDACTED] reported that [REDACTED] takes Synthroid daily after feeding along with MiralAX,



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

Case Name : [REDACTED]

Investigation ID: [REDACTED]

Desmopressin (DDavp), and Keppra. Ms. [REDACTED] reported that [REDACTED] is also prescribed hydrocortisone cream and Pediasure plus fiber 5 times per day and takes Motrin as needed. Ms. [REDACTED] reported that she goes to the home daily from 8:00 am to 2:00 pm to provide care to [REDACTED]. Ms. [REDACTED] reported that she would monitor [REDACTED] and feed her. Ms. [REDACTED] reported that [REDACTED] had a feeding tube. Ms. [REDACTED] reported that [REDACTED] was also diagnosed with diabetes and had seizures. Ms. [REDACTED] reported that [REDACTED] was partially blind, had "percussion of puberty" (meaning puberty was stopped), and was wheelchair bound. Ms. [REDACTED] reported that [REDACTED] had some bowel issues, so she wore diapers. Ms. [REDACTED] reported that [REDACTED] was also septic.

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

CPS received the autopsy on this case and the Cause of Death and Manner of Death are listed as "Could Not Be Determined". There is no evidence that anyone cause the child's death as she had significant medical concerns and was with home health. This case was presented to [REDACTED] CPIT on 01/18/2023 and the team agreed to classify the allegation as AUPU against AP Unknown. An AP was unable to be identified; therefore, an AP interview could not be completed.

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

On February 15, 2022, [REDACTED] was interviewed. She reported that she did not have [REDACTED] Desmopressin medication over the weekend, so she gave her a double dose on February 14, 2022. Ms. [REDACTED] reported that [REDACTED] has been delayed throughout her life, starting when she was 2yo. [REDACTED] had a seizure at 2years old, which hindered her brain development. At 5 years of age, [REDACTED] started hurting herself by hitting/scratching on herself. [REDACTED] has had to have 24/7 care throughout her life and she has had a nurse come in daily, who doesn't leave until approximately 8:00pm-10:00pm. Ms. [REDACTED] reported that the nurse did not leave the home until approximately 10:00pm on February 14, 2022. She reported that [REDACTED] sleeps in the room with [REDACTED] and she was asleep by approximately 9:00pm. Ms. [REDACTED] reported that she woke up around 8:00am on February 15, 2022 and laid in bed for approximately 15 minutes before going to check on [REDACTED]. The nurse was running late that morning due to staying late the night before. Ms. [REDACTED] went to change [REDACTED] diaper and noticed that her feet were cold and legs were stiff. She had her oldest daughter call EMS and Mr. [REDACTED] started CPR. Ms. [REDACTED] reported that [REDACTED] has had a plethora of health problems throughout her life and has never been developmentally on task.

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

On February 17, 2022, an autopsy was completed on [REDACTED] by Dr. [REDACTED], Regional Forensics Center, [REDACTED] TN. The autopsy reported clinical history of Cerebral Palsy, seizure disorder, and Panhypopituitarism per medical records as well as microcephaly, polymicrogyria, scoliosis, and underweight. The Cause of Death is Could Not Be Determined, and Manner of Death is Could Not Be Determined. On January 18, 2023, CM [REDACTED] presented this case to the [REDACTED] County Child Protective Investigative Team (CPIT). Those in attendance were TL [REDACTED] Detective [REDACTED], ADA [REDACTED], Child Advocacy Center (CAC) Director [REDACTED], CAC Therapist [REDACTED], Medical Staff [REDACTED], and CAC Victim Advocate [REDACTED]. The team was in agreement that there was not a preponderance of evidence to support the allegation of Abuse Death.

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: 02/16/2022
Assessment Type: FAST	CPS Case ID: [REDACTED]

OVERVIEW

Safety Level: Immediate Intervention Not Recommended	Assessed at Location: In the Home
Risk Level: No Need/Risk	
Event Start Date: 07/31/2023	Last Assessed Date:
Assessment Status: Approved	Assessor: [REDACTED] / [REDACTED]
Date Approved: 02/24/2022	Approver: [REDACTED] / [REDACTED]

PARTICIPANTS

Name	Age	Role	Gender	Person ID	Trauma Score	CSEM Risk
[REDACTED] A	31 Yrs	Caregiver	M	[REDACTED]	N/A	N/A
[REDACTED]	9 Yrs	Youth	F	[REDACTED]	0	Low
[REDACTED]	34 Yrs	Primary Caregiver	F	[REDACTED]	N/A	N/A
[REDACTED]	4 Yrs (Est)	Youth	M	[REDACTED]	0	Low
[REDACTED] (ACV)	Deceased	Youth	F	[REDACTED]	0	Low

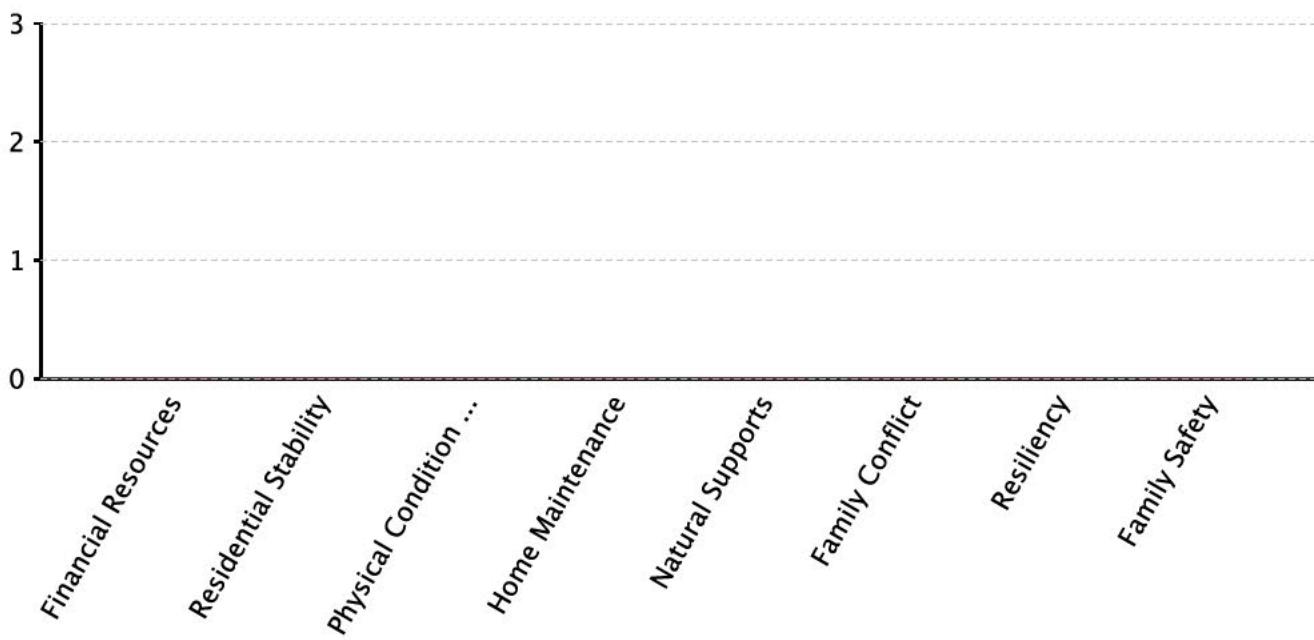


Tennessee Department of Children's Services
FAST 2.0 Assessment Detail Report

Event Type: CPS Case	Assessment Date: 02/16/2022
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	0	
Natural Supports	0	
Family Conflict	0	
Resiliency	0	
Family Safety	0	



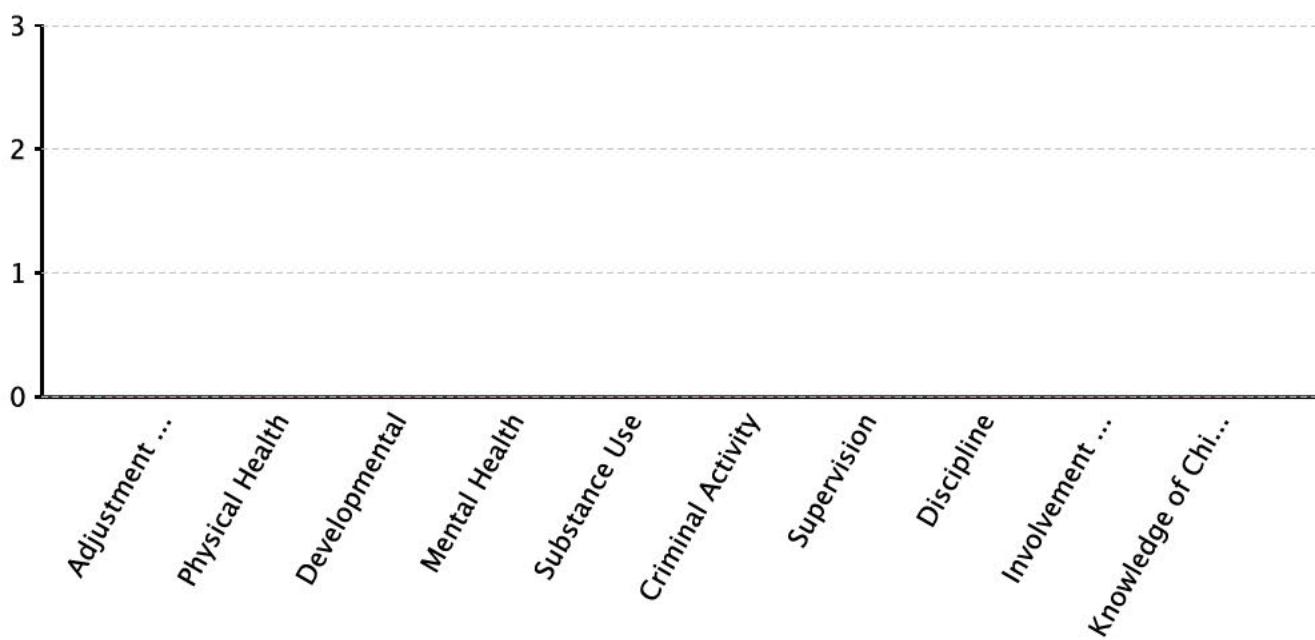
Tennessee Department of Children's Services
FAST 2.0 Assessment Detail Report

Event Type: CPS Case	Assessment Date: 02/16/2022
Assessment Type: FAST	CPS Case ID: [REDACTED]

CAREGIVERS

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

Participant: [REDACTED]	Person ID: [REDACTED]	Role: Caregiver
-------------------------	-----------------------	-----------------



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



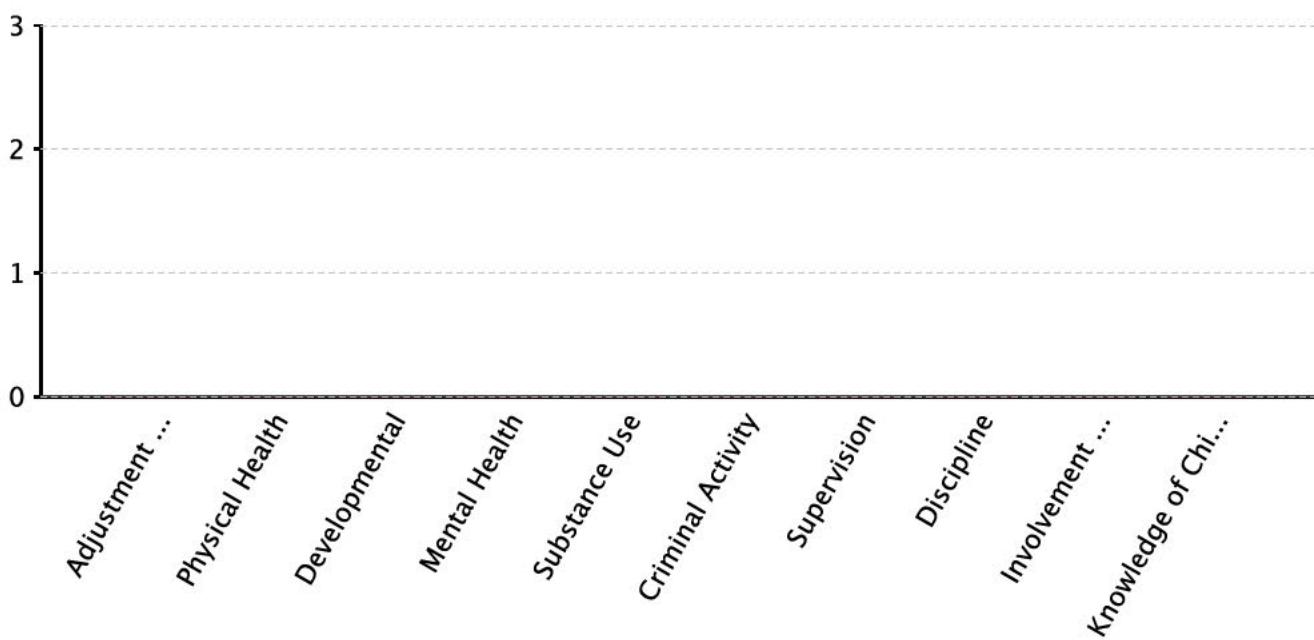
Tennessee Department of Children's Services
FAST 2.0 Assessment Detail Report

Event Type: CPS Case	Assessment Date: 02/16/2022
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	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	



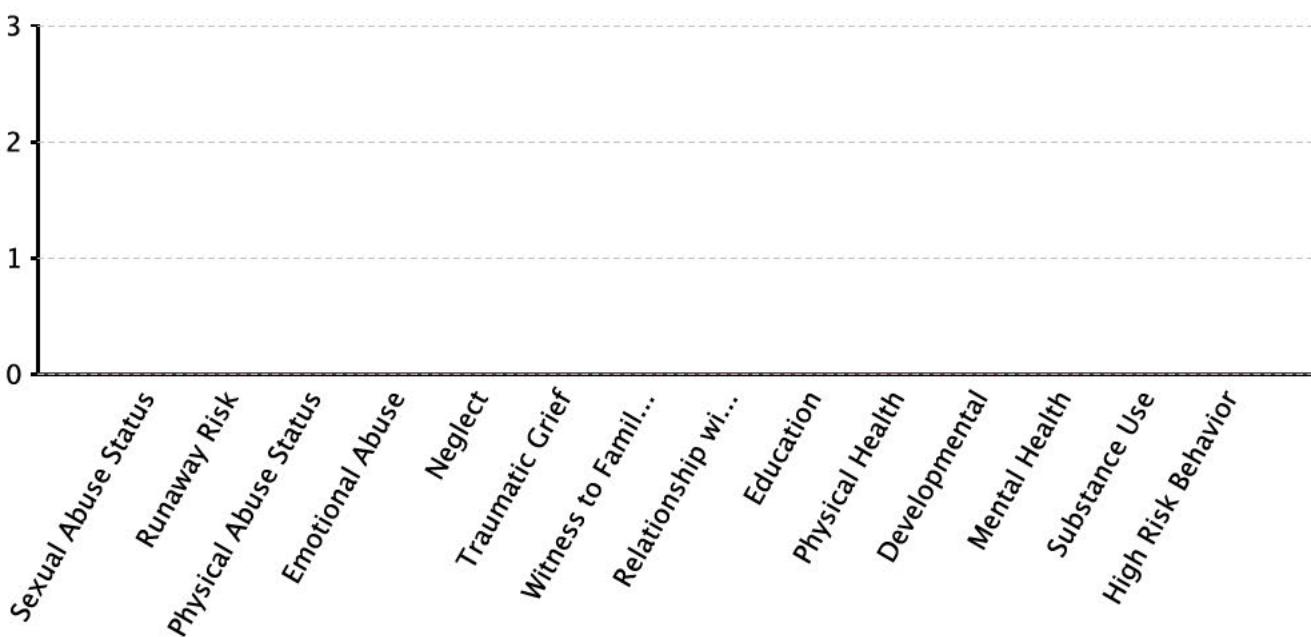
Tennessee Department of Children's Services
FAST 2.0 Assessment Detail Report

Event Type: CPS Case	Assessment Date: 02/16/2022
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] (CSEM)	Person ID: [REDACTED]	Age: Deceased
--------------------------------	-----------------------	---------------



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



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

Event Type: CPS Case	Assessment Date: 02/16/2022
Assessment Type: FAST	CPS Case ID: [REDACTED]

Mental Health	0	
Substance Use	0	
High Risk Behavior	0	



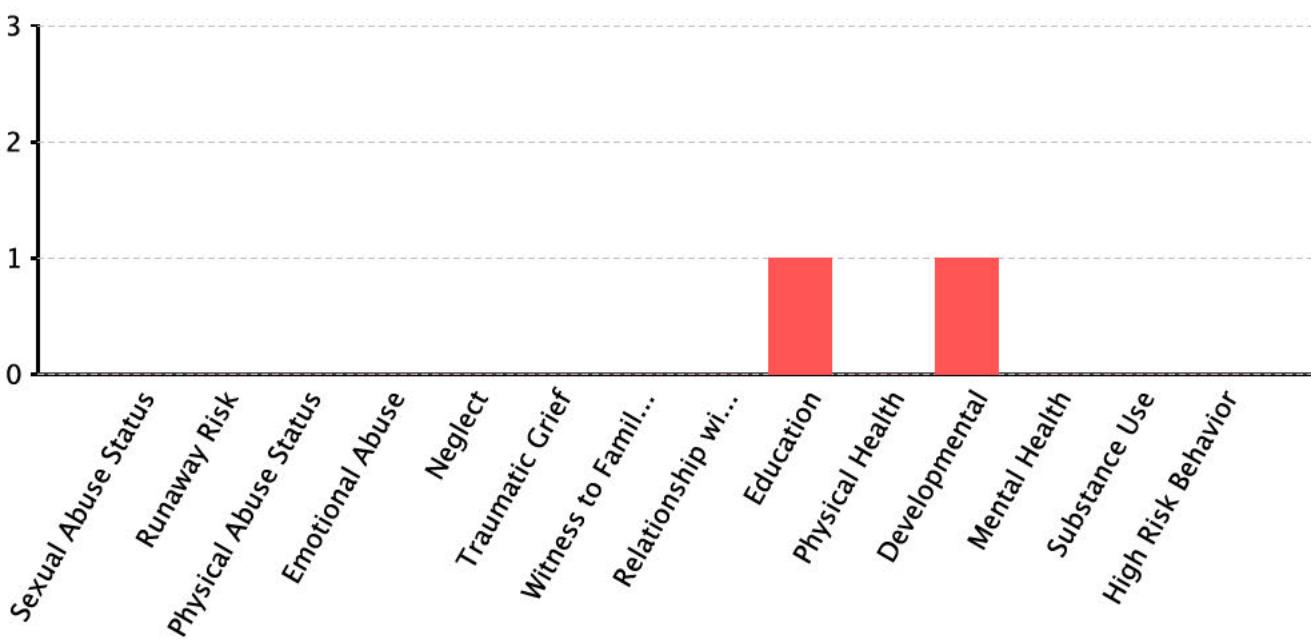
Tennessee Department of Children's Services
FAST 2.0 Assessment Detail Report

Event Type: CPS Case	Assessment Date: 02/16/2022
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] (CSEM)	Person ID: [REDACTED]	Age: 9 Yrs
--------------------------------	-----------------------	------------



Item	Score	Justification/Narrative
Sexual Abuse Status	0	
Runaway Risk	0	
Physical Abuse Status	0	
Emotional Abuse	0	
Neglect	0	
Traumatic Grief	0	
Witness to Family, School or Community Violence	0	
Relationship with Primary Caregiver	0	
Education	1	[REDACTED] received speech therapy in the past and has previously had an IEP; however, she does not have any current concerns.
Physical Health	0	
Developmental	1	It is reported that [REDACTED] was a premie and states that she received disability for this in the past. There are no current concerns.



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

Event Type: CPS Case	Assessment Date: 02/16/2022
Assessment Type: FAST	CPS Case ID: [REDACTED]

Mental Health	0	
Substance Use	0	
High Risk Behavior	0	



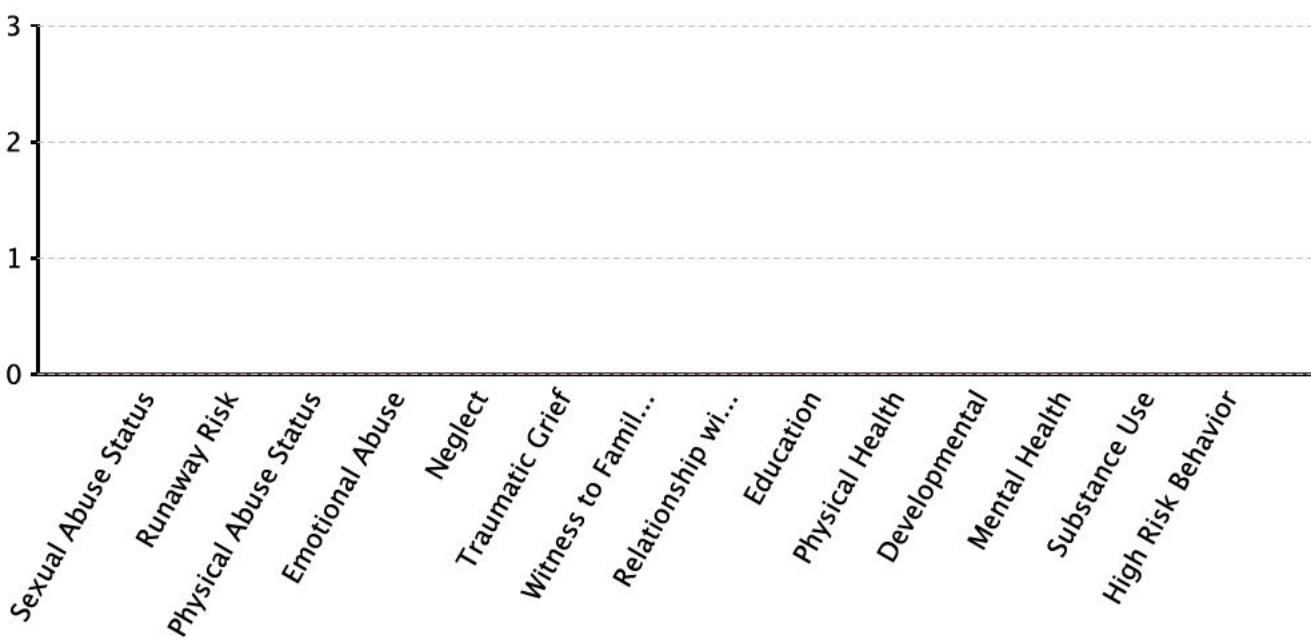
Tennessee Department of Children's Services
FAST 2.0 Assessment Detail Report

Event Type: CPS Case	Assessment Date: 02/16/2022
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] (CSEM)	Person ID: [REDACTED]	Age: 4 Yrs (Est)
--------------------------------	-----------------------	------------------



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



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

Event Type: CPS Case	Assessment Date: 02/16/2022
Assessment Type: FAST	CPS Case ID: [REDACTED]

Mental Health	0	
Substance Use	0	
High Risk Behavior	0	