

# **Drug Endangered Children Geary County Alliance Protocol**

DEC Geary County Alliance Overview

Law Enforcement Protocol

Junction City Fire Department/EMS Protocol

Geary Community Hospital Protocol

Juvenile Intake and Assessment Protocol

SRS Protocol

Geary County Drug Endangered Children Partners

Updated 02-04-08

## **Definition**

DEC – A drug endangered child is one that has been exposed to an environment with conditions of contamination or hazardous lifestyle that results in abuse, life or health endangerment, or neglect of the child as a result of illegal drug use, sales, or manufacturing.

## **Introduction**

Illegal drugs, the manufacturing of illegal drugs, and the sale of illegal drugs have endangered children for years. Clandestine methamphetamine manufacturing and distribution in Kansas has created a public health and safety concern that other drugs did not produce to this magnitude. Despite the increased law enforcement presence and efforts, methamphetamine manufacturing continues to exist, and in some places grows at alarming rates. The chemicals involved in the manufacturing process of methamphetamine and other drugs include poisons, corrosives, carcinogenic, flammables and explosives. The body often easily absorbs the drugs and chemicals present in the methamphetamine and other drug labs and the vapors can be easily ingested through normal breathing. The risk to children at these locations is extremely high. Prior to the implementation of this program, there had been no collaborative efforts to address the needs and problems relating to drug endangered children in and around Geary County.

## **Mission**

The mission of the Drug Endangered Children Geary County Alliance is to identify and protect drug endangered children and to identify, provide, and improve services to them utilizing the medical field, criminal justice system, law enforcement, child welfare and other community agencies with the goal of improving outcomes for these children. The program also seeks to prevent methamphetamine and other drug production, use, and selling in the presence of children, through arrest and prosecution of those directly and indirectly endangering children.

## **Purpose**

In the interest of protecting children found in or near methamphetamine laboratories or drug related environments, the Drug Endangered Children Geary County Alliance has developed a multi-agency cooperative effort involving Junction City Police Department, Geary County Sheriff's Department, Grandview Plaza Police Department, Junction City Fire Department/EMS, Geary Community Hospital, 8<sup>th</sup> Judicial District Juvenile Intake and Assessment, Geary County SRS and the Geary County Attorney's Office, to address drug endangered children's issues. Through this collaborative effort, these agencies will coordinate response to promote the health and safety of children found in methamphetamine laboratories or places where drugs are kept or sold.

**Drug Endangered Children Geary County Alliance**  
**Law Enforcement Protocol**

Junction City Police Department, Geary County Sheriffs Department and  
Grandview Plaza Police Department

Upon locating children in a clandestine laboratory or a drug endangered environment:

1. Notify EMS to respond if obvious injuries or illness to children are detected
2. Notify the Junction City/Geary County Drug Operations Group if not already at scene;
3. Take child/children into protective custody. Have dispatch notify Juvenile Intake and Geary Community Hospital that the children are being transported to GCH;
4. Photograph physical condition of children and/or injuries to preserve evidence;
5. Place child/children into Tyvek or other protective clothing. As little items of clothing as possible to be taken from scene. NO TOYS;
6. If child/children are not transported to GCH by EMS, law enforcement will transport children to GCH emergency room. Release to Juvenile Intake;
7. Law Enforcement is to provide the attending medical personnel with a list of chemical and contaminants observed at the scene;
8. A copy of all reports, photos, and/or video will be provided to Social Rehabilitation Services in order to facilitate decision making regarding the children's future placement;
  - a. SRS will not go to the home or location of the offense, and will rely on the testimony provided by LEO through reports, photographs and description
9. Cases involving placement and/or endangerment will be processed with the Geary County Attorney's office before releasing the children from protective custody.

**Drug Endangered Children Geary County Alliance**  
**Fire Department/EMS Protocol**  
Junction City Fire Department/EMS

1. At the time the child/children is/are taken out of a drug lab environment, the child/children will be assessed by EMS to determine what type of medical services the child/children need. If it is determined that the child did not have a chemical exposure and is not in need of emergency medical services, the child will be placed in Police Protective Custody by LEO and then transported to GCH by LEO;
2. If there are life threatening injuries, EMS will transport child/children to Geary Community Hospital emergency room or any other appropriate medical facility deemed appropriate by the EMS and/or hospital staff;
3. EMS will decontaminate the child/children via removal of clothing and dusting and then place the child/children in a Tyvek suit or wrapped in blankets for transportation to Geary Community Hospital or other appropriate medical facility.

**Drug Endangered Children Geary County Alliance**  
**Hospital Protocol**  
 Geary Community Hospital/Emergency Room

1. Upon arrival to Geary Community Hospital, an emergency room physician and/or technician will medically assess the child/children. All appropriate laboratory tests will be performed on the child to assess, on an individual basis, the medical needs of the child at that time. Tests to be performed will be determined by the medical staff at GCH;
2. Blood and urine samples will be taken at Geary Community Hospital and upon the completion of testing, will be transferred to the KBI Regional Laboratory to maintain appropriate chain of custody. The transportation of these samples will be the responsibility of the investigating officer or agent. The blood and urine analysis shall be done immediately after the child/children is taken into protective custody;
3. The estimated costs associated for testing through the Geary Community Hospital's Emergency Department for Drug Endangered Children are as follows:

Required

- |                         |                                      |
|-------------------------|--------------------------------------|
| 1. Liver Function Tests | \$115.50 *only on meth related cases |
| 2. Urine Drug Screen    | \$ 41.50                             |

Optional

- |                             |          |
|-----------------------------|----------|
| 1. Complete Metabolic Panel | \$135.25 |
| 2. Heavy Metal Screen       | \$287.00 |

- |                                       |          |
|---------------------------------------|----------|
| Emergency Department Charge           | \$133.00 |
| Emergency Department Physician Charge | \$127.00 |

**\*\* Prices are subject to change**

Initial follow-up Care Protocol:

1. Re-evaluation of the child/children within 30 days of the baseline assessment is necessary
2. Assess for latent symptoms, developmental and mental health issues

Long Term follow-up Protocol:

1. Long term follow-up, within 12 months of discovery, monitors physical, emotional and developmental health
2. Identifies late developing problems due to a meth environment
3. Provides appropriate intervention; and
4. DEC victims should be monitored for a minimum of 18 months after discovery

\*Discharge paperwork from the emergency room needs to specify follow-up dates, so SRS can be sure to have this information for their case plans.

**Drug Endangered Children Geary County Alliance**  
**Juvenile Intake and Assessment Protocol**  
8<sup>th</sup> Judicial District Juvenile Intake and Assessment

1. Law Enforcement Officer will contact JIAS to report the need for an intake once the youth has been found on scene of the meth lab and/or other drug related scene. LEOs will arrange for transportation to a medical facility for medical evaluation, whether that be with EMS or LEO. Youth must be placed in Police Protective Custody, PPC (K.S.A. 38-1527(b), before JIAS arrives. The three page PPC form, as well as police case number and any other supporting documentation, must be completed before JIAS responds;
2. JIAS Worker (JIAW) will contact Supervisor on call to report a DEC call has come in. Supervisor will be briefed on the information and be in contact with JIAS worker throughout the intake;
3. JIAW will respond to the Geary Community Hospital to sit with the youth during medical evaluation;
4. The PPC will allow JIAS staff to consent to medical testing agreed upon by collaborative partners. Said testing will be included in approved DEC protocols;
5. After youth found in the home have been medically cleared, JIAW will conduct assessment as required by K.S.A. 75-7023 and will locate appropriate placement for youth which could include but is not limited to: family, family friends, foster care, emergency youth shelter. JIAW will provide transportation to placement;
6. Placement will be given information on the child to include any medical needs or follow-up appointments, etc. JIAS will remain primary responsible party for youth until such time as a court hearing has been scheduled;
7. Court will be scheduled within the 72 hours required by K.S.A. 38-1258(e). JIAS will not transport youth back to court unless required by presiding judge. If youth are placed in SRS custody, SRS will become the full responsible party for the transport and care of the youth. If the Court orders placement back with the parent/guardian, JIAS will provide transportation of the youth back to the family.

**Drug Endangered Children Geary County Alliance**  
**Social and Rehabilitative Services Protocol**  
Junction City SRS

1. When SRS receives a report of a meth lab and/or other drug related case involving children, the report will be assessed by a social worker at NER Intake or PRC. Upon meeting SRS criteria for further assessment (i.e. children placed in police protective custody, etc), the report will be assigned to a social worker or special investigator.
2. If possible, the report will be assigned to a worker who has knowledge and/or had some training regarding meth labs, other illegal drug substances and the DEC protocol.
3. The worker will respond according to policy and will make contact with LEO working the case, obtain an update of the situation, and then respond to the location of the child/children, ex: hospital, school or other location. \* SRS will not respond to a home with a known meth lab. SRS does not have the authority to transport or place children not in SRS custody;
4. The worker will assist with interviewing the child/children and other involved parties as directed by LEO;
5. The worker will obtain DEC medical history, if available, and provide relevant information to LEO. If a medical exam is not immediately conducted, if the child is placed in SRS custody, SRS will assist in obtaining a medical exam for the child/children;
6. The worker will complete an assessment to determine what services, if any, are needed, regardless if the child/children is/are in SRS custody and will make referrals as appropriate as the case progresses per policy, ex: out of home placement, appropriate relative placements, Infant Toddler Services, Healthy Families, Parents as Teachers, medical, educational, dental, mental health, etc., to include subsequent follow up care upon reintegration into the home;
7. The worker will request background information from LEO regarding relatives to ensure child/children, if out of home placement is made, are not placed with relatives involved in the DEC case or other potential harmful situation. The court will be notified of placement;
8. SRS, in conjunction with community partners, will obtain appropriate releases to assist in open communications, between agencies involved with the DEC to assist

in the consistency of care, appropriate recommendations, services to parent(s) and follow-up, monitor case progress, etc;

9. Follow-up medical procedures, as ordered by a physician or other health care provider, of children in SRS custody, will be included in case plans; and
10. SRS will make an appropriate recommendation regarding custody when parents are unwilling to work toward a meaningful recovery and when they place their child/children at a high risk of abuse, molestation or deprivation, whether intentional or unintentional unless otherwise placed in the custody of an appropriate relative.

## Geary County Endangered Child(ren) Flow Chart

After youth is placed in Law Enforcement Protective Custody, Law Enforcement shall Transport Youth to Geary Community Hospital for medical evaluation. If possible, determine the type of medical care coverage available for the youth.

Page JIAS – Have dispatcher inform worker they will be responding to an Endangered Child(ren) Case. Have dispatch give as much information as possible (age, gender, race, and if medical attention/testing is needed). Inform JIAW to respond to hospital.

**Abuse / Neglect  
Case**

**Drug Endangered Child(ren)  
Non- Meth  
Related Drug**

**Drug Endangered Child(ren)  
Meth  
Related**

Information to be gathered  
at hospital:  
Child Abuse Physical  
Current Health Status  
Any Follow Up Needed?

Information to be gathered at  
hospital:  
Child Abuse Physical  
Current Health Status  
Urine / Blood Drug Screen  
Any Follow Up Needed?

Follow Pre-Established  
DEC Protocols

JIAS will stay with you while hospital is running tests and youth is being evaluated. Once released, JIAS will transport youth to the Junction City Police Department for the assessment and placement of youth.

All medical evaluations and reports shall be turned over to Law Enforcement to be included in reports for the County Attorney's Office. If any follow-up appointments are needed, if any special instructions for care are given or if medications are prescribed, copies of release paperwork shall be given to JIAS so that the information can be turned over to the placement for any follow-up needs.

On the next business day, JIAS will submit all necessary paperwork to the local SRS office to include placement information, copies of any law enforcement paperwork, any medical information. The temporary custody hearing will be scheduled within 72-hours, excluding weekends and holidays. If the child(ren) is less than 15 years old, JIAS WILL NOT transport youth

Youth placed in SRS Custody at hearing:

Youth released to parent/guardian at  
custody hearing:

SRS will be responsible for any placement  
changes and all follow-up needs for children.  
JIAS no longer involved.

JIAS will transport youth back to parents. The  
follow-up needs information will be released to  
the parent/guardian. JIAS no longer involved.

I agree with the above listed provisions and fully support the Drug Endangered Children Geary County Alliance protocol.

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Bob Story, Chief of Police  
Junction City Police Department

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Jim Jensen, Geary County Sheriff  
Geary County Sheriff's Department

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Brad Clark, Chief of Police  
Grandview Plaza Police Department

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Mike Ryan, Fire Chief  
Junction City Fire Department/EMS

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David Bradley, CEO  
Geary Community Hospital

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Dr. Marc Felts, ER Department Head  
Geary Community Hospital

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Meredith Butler, Director  
8<sup>th</sup> Judicial District Community Corrections/JIAS

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Betsy Thompson, Northeast Regional Director  
SRS

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Steve Opat, County Attorney  
Geary County Attorney's Office