



KANSAS ALLIANCE
FOR DRUG ENDANGERED CHILDREN

Rescue. Defend. Shelter. Support.

Harper County

DEC Protocol & MOU

A Project of Harper County Agencies
Drug Endangered Children Task Force

11/13/2006



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1. Definition

A drug-endangered child (DEC) is a child who has been exposed to an environment with conditions of contamination or hazardous life style that result in abuse, life or health endangerment, or neglect perpetrated on the child as a result of illicit drug use, sales, or manufacturing. A criminal violation threshold is met when elements of the contamination or hazardous life style meet the criteria of Kansas Statutes. A child is defined as a person under the age of 18 years.

2. Introduction

Clandestine methamphetamine manufacturing and distribution has created a public health and safety crisis for the residents of Kansas. Despite increased law enforcement efforts, methamphetamine manufacturing continues to grow at an alarming rate. Chemicals used in the manufacture of methamphetamine and other illegal drugs can be poisonous, corrosive, carcinogenic, flammable, and/or explosive. The drugs and chemicals present in methamphetamine and other drug labs are often easily absorbed by the body and/or breathed in as vapors. These chemicals often contaminate items in their vicinity, which can result in the need for disposal of contaminated items such as carpeting and furniture to ensure the remediation of a hazardous environment. The risk to children at these locations is extremely high. Steps have been taken in Harper County to address the needs of these children who have been found in meth labs in Harper County. The following protocol sets down in writing the Harper County Agency-by-Agency approach to addressing this problem.

3. Mission

The mission of the Drug Endangered Children Task Force is to identify and protect drug endangered children and to identify, provide, and continue services to them utilizing the criminal justice system, law enforcement, child welfare, and other community agencies with the goal of continuing to improve outcomes for these children. The program also seeks to deter methamphetamine production in the presence of children by arresting and



prosecuting all manufacturers and their accomplices who manufacture methamphetamine in a manner that endangers children.

4. Purpose

In the interest of protecting children found in or near methamphetamine laboratories, the Drug Endangered Children Task Force project has developed a multi-agency cooperative effort involving the Kansas Bureau of Investigation, the Drug Enforcement Task Force, the Kansas Attorney General's Office, the Harper County Attorney's Office, Social and Rehabilitation Services, Restorative Justice Authority, The Harper Police Department, the Harper County Sheriffs Office, Anthony Police Department, Attica Police Department, the Harper County Mental Health, Harper County Emergency Medical Services, Juvenile Justice Authority, Horizon's Mental Health, Harper Hospital, and Anthony Medical Center to address drug-endangered children's issues. These agencies will continue to work in a collaborative effort to facilitate a coordinated response to promote the health and safety of children found in methamphetamine laboratories or places where drugs are kept or sold.

5. Project Goal

The primary goal of the DEC Task Force is to establish a multi-agency methodology for the appropriate diagnosis and treatment of children who have been exposed to the chemicals used to manufacture methamphetamine or other illegal drugs in a clandestine laboratory setting, and to prosecute all individuals responsible for endangering children. Appropriate diagnosis and early treatment are imperative so that the psychosocial and physical needs of these children are effectively addressed.

DEC member agencies will work closely together to improve the relationship and cooperation between organizations and to train local law enforcement agencies in the successful DEC case investigations and response. Statistical information is kept by both the Harper County Attorney's Office and SRS in order to establish a data base for tracking these children, the services provided, and case outcomes.



The Harper County DEC Task Force will utilize a multi-disciplinary approach to best meet the needs of drug endangered children and enhance cooperation through a collaborative, effort involving all agencies who participate as needed: law enforcement, SRS, emergency medical services, mental health, and prosecution. If any of the children become dependants of the Juvenile Court through C.I.N.C. proceedings, SRS will recommend an appropriate treatment plan and suitable placement of the children as required.

6. Exchange of Information Between Agencies

All law enforcement agencies, within Harper County, will exchange verbal and written reports, with SRS, as deemed necessary for the completion of assuring the safety of drug affected children. For law enforcement, the reports will include the Standard Offense Report and the accompanying narrative report.

SRS will provide law enforcement with any appropriate, relevant information received during the course of their Family Based Assessment.

These forms will include the CFS (Children and Family Services) 1000, 1001, 1002, and the CFS 1010, which contains all narrative information.

Information gathered by Juvenile Intake and Assessment will be faxed to the SRS office as soon as the documents are completed. Any exchange of information shall be subject to the HIPAA Privacy Rules & Regulations per 42 C.F.R. Parts 160 & 164.

All interviews, by all agencies, will be documented and provided to each other in an expedited manner.

The same reports will be provided to the Harper County Attorney's Office.



7. Reimbursement/Expense

In the event of potential contamination of clothing, charity organizations will be sought out for donations to the identified children in need. It is the expectation that children be properly clothed before being transported to designated emergency placement.

The designated point of contact for these agencies will be 911 as they have a listing for after hour's numbers and contacts.

As is dictated by SRS policy, all law enforcement protective custody placements of children are funded by SRS.

8. Agency-by-Agency Protocol Approach

a. Law Enforcement

If law enforcement personnel at the scene determine that the child(ren) has been exposed to any level of contamination, they shall make arrangements for transport of the child(ren) to the nearest medical facility for further examination. The investigating agency will assign an officer to take charge of the child(ren). Law enforcement, along with Fire/EMS, will decontaminate the child(ren) at the scene prior to transporting the child(ren). If it is determined at the scene that the child(ren) has not been exposed to any level of contamination, the child(ren) will be transported to the investigating agency for intake and assessment. The investigating officer will work with SRS in interviewing the child(ren) and getting them the help needed. Reports will be made by officers to support a C.I.N.C. case. Evidence shall be documented, photos taken and reports made in reference to the condition of the home, any exposures etc. This should be sufficient to show endangerment of a child.



b. Emergency Medical Services

If necessary, the appropriate EMS agency in Harper County will respond to methamphetamine or other drug laboratories where children are present. If suspected exposure, contact the appropriate fire service and law enforcement agency as soon as possible. If children are contaminated, the fire service, prior to assessment by EMS personnel will decontaminate them. The appropriate field treatment will be provided by EMS and if indicated, transport made to the nearest appropriate hospital for further assessment and treatment. At the request of law enforcement, the hospital medical records department will make available EMS and ED records for trail purposes. When applicable, law enforcement will provide a statement of services from the responding emergency medical service to the prosecutor for consideration of financial restitution.

c. Fire Departments

“The Anthony/Harper/Attica Fire Department has a Hazardous Materials Response Team that is available to all Fire / EMS/ and Law Enforcement Agencies in Harper County. When requested, the Haz-Mat Team will respond to the scene of an incident, or to a treatment facility to decontaminate affected children and adults. Also when requested, the Haz-mat. Team will evaluate the structure(s) where the children are living to determine if decontamination of the structure is needed. The Haz-mat Team will work with local and state health officials to determine if the structure is safe to rein habit. The Haz-Mat Team or local fire department is not responsible for the cleanup of a contaminated site but may assist in the cleanup under certain conditions and can charge the responsible party for costs associated with mitigating the hazards under federal law.

Depending upon the location of the incident, the volunteer Fire Departments located in Harper County may be requested to respond to the scene and provide gross decontamination (washing the victim down with a small fire hose).



However, it is recommended to contact the Haz-Mat Team for most decontamination needs, (gross and secondary washes, decon solutions, on site personal showering, changes of clothing, collection of contaminated clothing, etc.).

In the event that the Fire Departments in Harper County are the first agency to identify the drug endangered child, the Incident Commander will immediately notify local law enforcement and EMS. If necessary and if requested by law enforcement Fire Department will notify local SRS authorities and initiate the decontamination process.”

d. Health Agencies

Scene Triage by EMS:

⇒ No need for immediate care → Protective Custody → Baseline exam in Physician’s Office within 24-48 hours (See ‘e’ below).

⇒ Need for immediate care → Transport to nearest Hospital Emergency Department:

- Anthony Medical Center: (620) 842-5111 or (866) 842-5111
- Harper Hospital District No. 5: (620) 896-7324

Upon arrival to the hospital, Emergency Department staff will determine the appropriate treatment and testing as indicated by the individual patient evaluation. Medical records will be maintained by the hospital providing care.

e. Physician Offices for non-immediate care:

1. Anthony Primary Care Clinic
1101 E. Spring
Anthony, KS 67003
Phone: 620-842-5144
2. Attica Rural Health Clinic



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302 Botkin
Attica, KS 67009
Phone: 620-254-7272

3. Harper Hospital Medical Clinic
1204 Maple Street
Harper, KS 67058
Phone: 620-896-7306 or 1-800-896-7306
4. Harper Medical Center (Dr. Bellar's office)
1019 Central
Harper, KS 67058
Phone: 620-896-7313

The Physician Offices will follow Kansas Statute KSA 38-1522 et seq. in dealing with suspected cases of abuse or neglect.

When making appointments for children, the caller will identify the need for the visit, including that this is a Drug Endangered Child, and state if it is an emergency or suspected abuse/neglect. All reasonable efforts will be made to schedule the baseline exam on the day of the call, keeping within the 24-48 hour time frame identified by the DEC protocol.

If the incident occurs after clinic hours, the caller will be directed to the nearest medical facility's Emergency Department.

f. Horizons Mental Health Center

In connection with the initial investigation phase by the Social and Rehabilitation Services (SRS), and/or the local law enforcement child(ren) will be interviewed. Horizons Mental Health Center will schedule a forensic interview for all alleged victims of sexual abuse. The interview questions will be comprised of questions consistent with the principles of (RATAC) a standardized evaluation protocol



from the national program Finding Words. Horizons Mental Health Center will schedule an appointment with the alleged victim in a timely manner, usually within 7-10 working days. A forensic interviewer will conduct the interview.

g. Juvenile Intake

An intake interview will be completed by an intake officer for each child transported into the local law enforcement center or Sheriff's office and placement will be determined at this time. Law enforcement will provide transportation to the designated placement. The intake interview will be sent to SRS, the County Attorney, and the Judge.

h. Social and Rehabilitation Services (SRS)

SRS will provide law enforcement with any appropriate, relevant information received during the course of the Family Based Assessment.

These forms will include the CFS (Children and Family Services) 1000, 1001, 1002, 1010, and 2030A-F, which contains all narrative information.

All interviews, by both agencies, will be documented and provided to each other in an expedited manner. Any exchange of information shall be subject to the HIPAA Privacy Rules & Regulations per 42 C.F.R. Parts 160 & 164.

The same reports will be provided to the Harper County Attorney's Office.

In the event that children are in need of supplies and clothing such as when their clothes are potentially contaminated, and clothing needs to be replaced before they are transported to homes of relatives or protective custody, charity organizations will be sought for donations.



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The designated point of contact for these agencies will be 911 dispatchers as they have a listing of after hour's numbers.

As is dictated by SRS policy, all law enforcement protective custody placements of children are funded by SRS.

Exams related to assessments of abuse and neglect is typically funded by SRS/Medicaid or family service funds.

i. Harper County Attorney

The Harper County Attorney's Office agrees to take all reasonable steps to:

1. Aggressively prosecute drug-endangered children cases.
2. Provide training for the Harper County Law Enforcement Agencies on strategies and court preparation for drug-endangered children cases.
3. Provide child victim advocacy throughout the criminal legal process.
4. The Harper County Attorney will be given the opportunity to develop an expertise in drug-endangered children prosecutions through training and experience. The Harper County Attorney will, when possible, respond to the scene of the most serious cases of drug-endangered children.
5. Attempt to recover lab costs and other identifiable costs incurred by the arresting agency, emergency medical services, fire department, and/or SRS for medical evaluations, decontamination and therapy of drug-endangered children when a suspect(s) is convicted of a DEC charge.

The Harper County Attorney's office will review, prosecute, and file each of the DEC cases in the Harper County area, which are determined to demonstrate sufficient evidence for prosecution. The SEKDETF Prosecutor will be available to assist upon request. The prosecutor will handle all pre-trial motions when possible depending on the demands of the judicial system on the Attorney's Office. The Attorney's office will convene periodic meetings of the first



responders and will assist in the preparation of a countywide prosecution protocol for DEC cases. When appropriate, the Attorney's Office will hold training for law enforcement, SRS, and other agencies.

9. Supporting Forms and Documents

Each supporting agency will share documents according to current agency protocols and procedures. Forms and documents will be filled out and submitted at appropriate times to appropriate agencies as current policy dictates.

10. Conclusion

The Harper County DEC Task Force has established the protocols in this document to cover the respective needs of Drug Endangered Children in Harper County.



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MEMORANDUM OF UNDERSTANDING
Between the
KANSAS ATTORNEY GENERAL'S OFFICE
the
KANSAS BUREAU OF INVESTIGATION
the
HARPER COUNTY SHERIFF'S OFFICE
the
ANTHONY POLICE DEPARTMENT
the
ATTICA POLICE DEPARTMENT
the
HARPER POLICE DEPARTMENT
the
HARPER COUNTY ATTORNEY'S OFFICE
the
SOCIAL AND REHABILITATION SERVICES
the
ANTHONY MEDICAL CENTER
the
HARPER HOSPITAL
the
HORIZONS MENTAL HEALTH CENTER
the
HARPER COUNTY YOUTH SERVICES - JUVINLE INTAKE
the
HARPER COUNTY EMERGENCY SERVICES / EMS
the
ANTHONY FIRE DEPARTMENT
the
HARPER FIRE DEPARTMENT
the
ATTICA FIRE DEPARTMENT
the
HARPER COUNTY HEALTH DEPARTMENT
and the
HARPER MEDICAL CENTER

Whereas, Harper County law Enforcement Agencies are the primary responders to, or discoverers of, drug-endangered children environments;



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Whereas, drug-endangered children environments are defined as conditions of contamination or hazardous life style that results in abuse, life or health endangerment, or neglect perpetrated on a child as a result of illicit drug use, sales or manufacturing;

Whereas, Harper County Law Enforcement Agencies must grapple with an investigatory role dichotomy when encountering both illegal drugs and drug-endangered children (DEC);

Whereas, the Harper County Attorney's Office will prosecute cases involving clandestine drug labs and/or large-scale drug trafficking;

Whereas, drug-endangered children require the specific and immediate attention of an SRS Child Welfare Social Worker to ensure the child's safety and to mitigate the environmental trauma;

Whereas, sustainment of a safe and healthy environment for a drug-endangered child is achieved in part by the periodic and unannounced legal inspections of that environment;

Whereas, it is recognized that each law enforcement agency subscribing to this Agreement has varying levels of staffing and other resources available;

Now, Therefore, each subscribing agency retains the sole discretion to determine the ability of that agency to comply with the terms of this Agreement to the circumstances and resources existing at any given time.

Now therefore, in consideration of the mutual promises and agreements herein contained, the parties do mutually promise and agree as follows:

The Harper County Law Enforcement Agencies agree to take all reasonable steps to:

1. Assign an officer (or other personnel assigned to the drug-endangered children cases) to work in conjunction with drug investigators and/or patrol officers when a drug-endangered environment is suspected or discovered. The officer will be dispatched to the scene of a drug endangered child discovery when the endangerment involves a clandestine lab or significant drug trafficking crime in which a child endangerment violation is suspected.
2. In illegal drug related cases, ensure that the investigator interviews the victimized child(ren) and the investigator located and collects all drug-related evidence.
3. When necessary, request an SRS caseworker to respond to the scene of a drug-endangered child investigation.



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4. Brief the SRS caseworker assigned to the drug-endangered child investigation about all relevant matters pertaining to the endangerment allegations. When possible and as appropriate, the SRS case worker should be involved in pre-service search warrant briefings in which drug-endangered children have been alleged. The SRS caseworker, however, will not be asked to enter the dwelling or other structure in which there is a clandestine drug laboratory.
5. Place any children found in a drug-endangered environment into protective custody and turn the child over to Juveniles Intake for a safe placement. An emergency protective order may be issued to ensure immediate, court-ordered protection of the child(ren), when a child is in immediate danger of abuse or abduction by a parent, relative, or someone known to them.
6. Have children who are taken into protective custody for drug exposure transported by EMS or Law Enforcement to the nearest local hospital for a medical examination and drug exposure analysis as appropriate and practicable. Ideally, a medical assessment (wellness check) should be done on exposed children within two hours of discovery at a methamphetamine lab site.
7. Utilize medical personnel to collect blood and urine when immediate and single exposure analysis is paramount.
8. If necessary, obtain copies of medical history documents of children in SRS custody, from the assigned SRS caseworker.
9. Require the case investigator, or someone assigned by law enforcement, to contact the designated child "service facilitator" or counselor at the child's school of attendance and notify him/her that the drug-endangered child unwittingly experienced a traumatic event, which may affect the child's behavior or performance at school. An agency may choose to negotiate this requirement with SRS by requesting the assigned caseworker to make the service facilitator notification.
10. Be responsive to all investigative follow-up requests by the Harper County Attorney's Office within 72 hours of the request.
11. Promote educational endeavors within the agency and the community to enhance the successful identification and prosecution of all drug-endangered children cases.



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12. Assist other Harper County Law Enforcement Agencies in critical and/or severe DEC investigations.
13. Require officers to attend all Child In Need of Care (C.I.N.C.) and SRS Fair Hearings when their testimony is deemed necessary by the Harper County Attorney's Office and /or SRS to support permanent or long-term child placement other than with the child's legal guardian.
14. Require the investigative officer for each drug-endangered child case to complete the DEC Evaluation Form (attached) and submit the original with the crime report to the Harper County Attorney's Office and a copy to the case file. This form will be used for statistical data collection and made readily available to the agencies listed on this agreement upon their request.

The Harper County Attorney's Office agrees to take all reasonable steps to:

1. Aggressively prosecute drug-endangered children cases.
2. Provide training for the Harper County Law Enforcement Agencies on strategies and court preparation for drug-endangered children cases.
3. Provide child victim advocacy throughout the criminal legal process.
4. The Attorney will handle drug-endangered children cases. The Attorney will be given the opportunity to develop an expertise in drug-endangered children prosecutions through training and experience. The Attorney will, when possible, respond to the scene of the most serious cases of drug-endangered children.
5. Maintain statistical data on the number of drug-endangered child cases referred by law enforcement, filed, and prosecuted, including disposition. The data will be readily accessible to the agencies listed on this agreement upon their request.
6. Attempt to recover lab costs incurred by the arresting agency, emergency medical services, and/or SRS for blood and urine analysis and medical evaluations of drug-endangered children when a suspect(s) is convicted of a DEC charge.

The Social and Rehabilitation Services (SRS) agrees to take all reasonable steps to:

1. Coordinate services to drug-endangered children, including the sharing of information with law enforcement, after a search warrant service or DEC arrest has been made and law



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enforcement has established probable cause to suspect that a child has been abused or neglected

2. Work with law enforcement to ensure that a drug-endangered child is given a medical exam (wellness check) as soon as possible.
3. Attend training, when available, in the provision of services to substance-addicted parents and their children.
4. Attend joint drug-endangered children training sessions with law enforcement personnel when available.
5. There is a difference between children living in dangerous conditions that include clandestine labs and those living with parents who are addicted to a substance, including alcohol. For clandestine drug labs and illegal drug sales. SRS will, to the best of their ability:
6. Make every effort to have a SRS caseworkers attend law enforcement's pre-search warrant service briefing in suspected drug-endangered children cases, when requested.
7. Obtain the drug-endangered child's medical history, if available, and provide relevant information to law enforcement (or other assigned personnel) after a drug-endangered child has been taken into police protective custody.
8. Help the child understand why he/she is being separated from his/her parents. The social worker assist the child in understanding the actions being taken on his/her behalf and what actions will be taken to help his/her parents.
9. Upon release of the parents or caretakers, will work with other agency professional, including substance abuse and Probation/Parole, to ensure that the parents are mandated to attend and work meaningfully on their substance abuse issues.
10. SRS will provide services to drug-endangered children, and their families, who remain in the custody of SRS.
11. Any follow-up medical procedures, as ordered by a physician or other health care provider, of drug-endangered children in SRS custody will be included on SRS case plans.
12. Recommend that drug-endangered children in SRS custody remain in SRS custody when parents are unwilling to work toward a meaningful recovery and when they place their



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children at a high risk of abuse, molestation, or deprivation, whether intentional or unintentional.

- 13. As a last resort and in the DEC cases where private or Medicaid insurance is not available, SRS will be responsible for medical costs incurred by drug-endangered children eligible for SRS services during a DEC investigation as outlined in the DEC Protocol. Anthony Medical Center and Harper Hospital will accept in full what Medicaid allows.

I agree with the above listed provisions and fully support the Harper County Drug-Endangered Children Program.

A representative of the office of the
Kansas Attorney General

Date

Jeff Newsum, KBI Representative
Kansas Bureau of Investigation

Date

Laurel McClellan, County Attorney
Harper County, Kansas

Date

Kirk Rogers, Sheriff
Harper County Sheriff's Office, Kansas

Date

John Blevins, Chief of Police
Anthony Police Department

Date

Bill Smith, Chief of Police
Harper Police Department

Date

Cyrilla Petracek, Director
Social and Rehabilitation Services

Date



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Bryant Anderson, CEO
Anthony Medical Center

Date

Michael Truman, CEO
Horizons Mental Health Center

Date

Brian Jaeger, Director
Harper County Youth Services - Juvenile Intake

Date

Kim Cinelli, CEO
Harper Hospital

Date

Mike A. Loreg II, Director
Harper County Emergency Medical Services

Date

Gary Smith, Chief
Attica Fire Department

Date

Kenny Hodson Sr., Chief
Anthony Fire Department

Date

Ken Leu, Chief
Harper Fire Department

Date

Sherry Houston, LBSW, Administrator
Harper County Health Department

Date