

PROTOCOL FOR DRUG ENDANGERED CHILDREN

PREPARED BY

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(Note: This DEC Protocol is the current revision with input from multiple agencies involved in the process of meeting the needs of children at risk. It will be updated periodically as deemed necessary by all respective parties indicated therein).

1. PURPOSE

To provide guidelines to enhance the safety of officers and the public from the dangers presented by clandestine drug laboratory operations and the chemicals used in illegal drug manufacturing.

2. DEFINITION

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

3. AGENCIES INVOLVED

The following agencies will play significant roles in implementing the DEC Protocol: Children's Mercy Hospital, Wyandotte County Juvenile Intake Assessment Center; Kansas Bureau of Investigation; Kansas Department of Social and Rehabilitation Services (SRS); University of Kansas Hospital; Law Enforcement Divisions of Bonner Springs, Edwardsville and Kansas City, Kansas; Providence Medical Center; Children's Mercy Hospital; Sunflower House; Kansas City, Kansas Fire Department; Bonner Springs Fire Department; Bonner Springs Emergency Medical Services; Unified Government Public Health Department (input); Wyandotte County Sheriff's Department, Regional Prevention Center of Wyandotte County (input) and the Wyandotte County District Attorney's Office.

4. OUTLINE OF PROCEDURE

Upon discovering children in an illegal drug house producing, and/or selling methamphetamine, cocaine, or other illegal substances:

- a. Children will be placed in police protective custody when the law enforcement officer reasonably believes that the children would be harmed when not immediately removed from the place of residency where the child has been found.
- b. Law enforcement officer will contact the Wyandotte County Juvenile Intake and Assessment Center when the child has been placed in protective custody.
- c. For children with no complaints or symptoms, the law enforcement officer will release the child to the care of the Wyandotte County Juvenile Intake and Assessment Center directly. Determination will be made on site as to which agency will be responsible for transportation.

- d. For children with complaints or symptoms, Emergency Medical Services will be called for further assessment of the children. EMS will transport the child to the nearest Emergency Department for evaluation.
- e. Law Enforcement will be responsible for providing an officer or authorized personnel to accompany the child until such time as to be placed with the Wyandotte County Juvenile Intake and Assessment Center.
- f. Emergency room personnel will contact the sergeant in charge to obtain information for the purpose of determining the appropriate medical tests.
- g. Law Enforcement will take the child once released to the Juvenile Intake and Assessment Center. Then protective custody will be sought for the child. Law Enforcement will provide the application for care by the law enforcement officer to the Juvenile Intake and Assessment Center personnel. The child will be placed in emergency foster care or with a relative.
- h. Juvenile Intake and Assessment Center will fax their interview report to The Kansas Department of Social and Rehabilitation Services (SRS) to initiate SRS intake for further assessment of the family.
- i. Children's Mercy Hospital, University of Kansas Hospital and Providence Medical Center will schedule a CARE team meeting within 72 hours of seeing the child.
- j. SRS social worker will work in conjunction with the law enforcement officer to obtain law enforcement officer reports, photos and video (if taken) in order to facilitate decision-making regarding the child's future placement. The SRS social worker will interview all relevant parties and obtain valuable medical information.
- k. The case will be processed by the District Attorney's office before releasing children from protective police custody.

Points To Remember:

1. If a child has serious burns, then he/she will be transported to the appropriate medical facility by ambulance.
2. If a child needs to be admitted to the hospital, then he/she will be admitted to Providence Medical Center, Children's Mercy Hospital, or Kansas University Hospital.
3. Social workers will not go to the home as part of the investigation; they will rely on information obtained from the law enforcement officer.

5. AGENCY – BY – AGENCY APPROACH

A. Law Enforcement

If law enforcement personnel at the scene of a methamphetamine or other kind of drug lab (e.g. house, car, package, etc.) determine that there is reasonable belief that the child will be harmed if not immediately removed from the place of residence where the child was found, the child will be placed in protective custody.

If law enforcement personnel at the scene of a methamphetamine or other kind of drug lab (e.g. house, car, package, etc.) determine that the child is symptomatic from having been exposed to any level of contamination and or other illness is apparent, they shall call the Emergency Medical Services for evaluation and transportation for medical care. (*Payment of the child's medical bills is not mandated by Kansas Law, nor is this term agreed upon by the Kansas City, Kansas Police Department.*)

If it is determined at the scene that the child is not symptomatic or exhibiting any illness, then the child will be transported to the Juvenile Intake and Assessment Center for emergency foster care placement. Reports made by officers may be used to support a CINC (child in need of care) case. Evidence deemed relevant by law enforcement officers should be documented, photos taken and reports are made in reference to the condition of the home, any exposures to parents or children, etc.

1. Kansas City, Kansas Police Department's Policy

- a. The Kansas City, Kansas Police Department has adopted the following policy regarding drug endangered children:
 - i. If law enforcement personnel at the scene of a clandestine drug laboratory determine that there is reasonable belief that the child will be harmed if not immediately removed from the place of residence where the child was found, the child will be placed in protective custody.
 - 1) If law enforcement personnel at the scene of a clandestine drug laboratory (e.g. house, car, package, etc.) determine that the child is symptomatic from having been exposed to any level of contamination and or other illness is apparent, they shall call the Emergency Medical Services for evaluation and transportation for medical care.
 - 2) If it is determined at the scene that the child is not symptomatic or exhibiting any illness, then the child will be transported to the Juvenile Intake and Assessment Center as a CINC (child in need of care). Evidence deemed relevant by law enforcement officers should be documented, photos taken and reports are made in reference to the condition of the home, any exposures to parents or children, etc.

B. Emergency Medical Services

If necessary, the appropriate EMS agency in Wyandotte County will respond to methamphetamine or other drug laboratories where children are present. If there is suspected exposure, contact with the appropriate fire service and law enforcement agency will be carried out as soon as possible. The emergency medical service personnel will determine the appropriate field treatment, and if indicated, transport made to the appropriate hospital for further assessment and treatment.

At the request of law enforcement, the hospital medical records department of medical services will make available emergency medical services and emergency department records for trial purposes. A statement of medical services from the responding emergency medical service should be provided to the prosecutor for consideration of financial restitution.

C. Fire Departments

When requested, the Haz-Mat Team will respond to the scene of an incident, to decontaminate the affected children and adults. Also when requested, the Haz-Mat team will evaluate the structure(s) for life hazards and will work with local and state health officials to determine if the structure is safe to re-inhabit. The Haz-Mat or local fire department is not responsible for the cleanup of a contaminated site.

D. Health Agencies

If there is a need for immediate care, the child would be taken into protective police custody. If the child is symptomatic and requires emergent care, the child is transported by ambulance to the nearest or most appropriate hospital.

Upon arrival to the closest medical facility, the emergency department staff will evaluate the child. This staff, as indicated by the individual patient's needs, will determine the appropriate treatment and testing. Medical records will be maintained by the hospital.

When evaluation and treatment is completed, the child will be admitted to the hospital or discharged to protective custody, depending on the child's condition. If discharged to protective custody, a baseline evaluation will be arranged in a physician's office within 72 hours and any further follow-up that is needed.

E. Juvenile Intake

The child will be taken to the Juvenile Intake and Assessment Center by law enforcement for processing. An intake interview will be completed for each child transported into the intake and assessment office, and placement will be determined at that time. The intake and assessment worker will provide transportation to the designated placement. The intake interview will be sent to SRS and the District Attorney.

F. Kansas Department of Social and Rehabilitation Services (SRS)

SRS will interview all children found in methamphetamine and other drug houses. Depending on the age and the abuse/neglect concerns, the children may be taken to Sunflower House, a child abuse prevention center for forensic interview. Sunflower House will send their reports to SRS and law enforcement. These forms will include Children and Family Services (CFS) 1000, 1001, 1002 and 1010, which contains all medical records regarding the affected children. All interviews, by both agencies, will be documented and provided to each other in an expedited manner.

In the event that children are in need of personal supplies or clothing due to the fact that clothing is potentially contaminated and needs to be replaced, this will need to be accomplished before they are transported to homes of relatives or protective custody.

As indicated by SRS policy, all law enforcement protective custody placements of children are funded by SRS. Exams related to assessments of abuse and neglect are typically funded by SRS/Medicaid or Family Service funds.

ORGANIZATIONS INVOLVED (for participation and/or input)

Fire Department (EMS and/or Hazmat) of Kansas City, Kansas
Fire Department (EMS and/or Hazmat) of Bonner Springs, Kansas
Sheriff's Office of Wyandotte County
Police Departments of Bonner Springs, Edwardsville and KCK
Kansas Bureau of Investigation
Kansas Department of Social and Rehabilitation Services (Division of
Children and Family Services)
Juvenile Intake Assessment Center of Wyandotte County
Sunflower House
University of Kansas Hospital
Children's Mercy Hospital
Providence Medical Center
District Attorney's Office of Wyandotte County
Regional Prevention Center of Wyandotte County
U.G. Public Health Department of Wyandotte County