

LINN COUNTY DRUG ENDANGERED CHILDREN PROTOCOL

Draft

	Location	Team Member	Procedure	Timeline	Reporting Form
1.	Law Enforcement Offices	Law Enforcement Officer	Notify DHS if children are involved 892-6700 1-800-362-2178	When determined appropriate by Law Enforcement	Not Applicable
2.	Law Enforcement Offices: Initial stages of a drug lab investigation where there are indications of suspected child abuse.	Law Enforcement Officer(s)	L E Investigator may want to contact a DEC Officer or other Officer who has specialized expertise in child crimes.	When appropriate to make the Officer a part of the investigation.	Law Enforcement forms
3	On-site at the suspected Drug Scene	Law Enforcement Officer(s)	Contact DHS. In Linn County, contact can be made through the pager number established for CPS (<i>number here</i>). In other jurisdictions, utilize local procedure that has been established between law enforcement and DHS.	When determined appropriate by law enforcement	Law Enforcement forms
4	DHS Staff Location	DHS Assessment Worker	DHS will respond to the request for involvement in Linn County. If DHS is notified by pager, the DHS Hotline is called and the report made as soon as appropriate	Immediate	Standard Intake Reporting Requirements

			information is obtained. DHS may check for prior reports on the family in the DHS registry.		
5	On-site at the suspected Drug Scene	Law Enforcement Officer(s) and DHS	<p>Locate the child victim and assess the child’s immediate need for medical attention. This may be done in concert with medically trained personnel (EMT, paramedics etc) who are on site. If child’s needs are emergent, call 911. Assess child for exposure:</p> <ol style="list-style-type: none"> 1. Unresponsive – altered breathing (rate, sound), altered gait (staggering, falling)lack of color, diaphoresis (sweating) slurred speech, psychologically at risk of harm to self or others – Involve medical staff immediately 2. Physical signs of previous trauma (bruising, burns etc) Psychological –admits to sexual activity (or if this is suspected) verbalizes they feel unsafe in the environment - - should be seen at CPC or other medical facility within 12 	As soon as possible but not later than four hours after the child is identified at the drug scene	Medical Assessment Form

			hours Error on the side of caution – bring the child to an Emergency Department if in doubt		
6.	On-site at the suspected Drug Scene	Law Enforcement Officer(s)	Separate the victim(s) from the suspects at the location and safeguard the child(ren) out of view of the suspects if possible.	As soon as possible within the investigation process	Not applicable
7.	On-site at the suspected Drug Scene	Law Enforcement Officer(s)	Ensure photographs are taken, prior to searching or removal of any evidence. Copy to DHS as needed	As soon as possible within the investigation process	Not applicable
8.	On-site at the suspected Drug Scene	Law Enforcement Officer(s) & DHS	Identify the parents and obtain biographical information on suspects, caregivers and witnesses	As soon as possible within the investigation process	Not applicable
9.	At the DEC Trailer	Law Enforcement Officer(s), Haz Mat Team, DHS or persons assigned	The child’s clothing should be removed and bagged and sealed and given to LE. Child should be bathed and clothed in new clothing. Children should be handled with gloves until the child has been bathed and decontaminated.	As soon as possible.	Instructions for Care Givers of Children Exposed to Methamphetamine Laboratories.
10.	On-site at suspected Drug Scene	DHS	Protective suit or other protective clothing such as shoe covers, gloves and masks should be worn	As appropriate	Not applicable

			at the site. All protective covering should be disposed of at the site. Check with the Lead officers for disposal method		
11.	On-site at the suspected Drug Scene	Law Enforcement Officer(s) DHS	Clothing, toys, baby bottles, food or drink shall not be removed from the scene as these items are likely contaminated	Not applicable	Not applicable
12.	On-site at the suspected Drug Scene	Law Enforcement Officer(s)	Conduct a preliminary forensic interview (if possible) of the child that may include determination of the following: primary caregiver, child's knowledge of the drug manufacturing process, child victim's living area in relation to the drug scene, medical problems and school attendance. The child's height and reach should be measured. (This may also be conducted later at CPC with law enforcement and DHS)	As soon as appropriate within the investigative process	DEC form
13.	On site at the suspected Drug Scene	Law Enforcement Officer(s) DHS	Take protective custody of child(ren). Fill out Emergency Custody Form. DHS obtain court order within 24 hours.	Juvenile Prosecutor to file CINA within 72 hours. [Code Sections 232.2 ©(2), 232.2 (n), 232.2 (0) (if child tests positive for meth via urine or hair stat)]*	Emergency Custody Form Court Order Emergency Removal Hearing before Juvenile Judge no later than 10 days after

					removal
14.	On site at the Drug Scene Zone	Law Enforcement DHS	DHS staff should coordinate their presence at the suspected Drug Scene with the lead Law Enforcement officer(s) to ensure no disruption or contamination of evidence. Obtain birth and medical information from caregivers if possible. Serve emergency custody notice to caregivers.	As soon as is appropriate	DEC Form
15.	On site at an Active Lab	DHS Assessment worker or designee	Transport child to hospital emergency department for medical assessment and emergency treatment	Initial exam should be conducted as soon as possible after discovery of a child in an active lab.	Not applicable
16.	On site at the suspected Drug Scene	DHS Assessment Worker or designee	Transport child to Child Protection Center for interviews and medical assessment. DHS will make arrangements with the CPC for medical appointments	Initial exam should be set up within 12 hours of contact with child if possible.	Not applicable
17.	At CPC or Emergency Department	DHS Assessment Worker	Ensure that child receives an initial medical examination	As soon as possible after identification	Not applicable
	At CPC or Emergency Department	Medical Personnel	Obtain child's medical history from DHS or caregiver.	Upon arrival	Medical records if available
	At CPC or Emergency Department	Medical Personnel	Administer tests and procedures. Perform complete pediatric exam and include as much of the Early Periodic Screening, Detection and Treatment (EPSDT) Protocol as	As soon as appropriate	EPSDT Form

			<p>possible. Particular emphasis should be placed on neurological screen, respiratory status and cardiovascular status. Required clinical evaluations include: vital signs, height and weight. Head circumference should be measured for children less than two years old and arm span and reach for all children less than five years old. Urine screen. Optional tests deemed medically necessary should be performed, including CBC, Liver Function, Electrolytes, Kidney Function, Complete Metabolic Panel, Pulmonary Function Tests, Chest X-Ray, Skeletal Survey, Colposcopy, Oxygen Saturation and Heavy Metals Screen</p>		
18.	On site at the suspected drug scene.	Law Enforcement Officer(s)	<p>Process scene for evidence of Child Endangerment including:</p> <ul style="list-style-type: none"> • Diagram and measure all the rooms at the site – noting if child had access to the lab • Identify hazards to the child • Measure and photograph the child’s belongings in proximity to the hazards 	As soon as practical	Law Enforcement forms.

			<ul style="list-style-type: none"> • Toys, food, and any other items found in proximity to the chemicals should be included in the items to be tested by the crime lab • Surveillance equipment, weapons and explosive should be noted, photographed and measured. Document if weapons were loaded or the explosives were live. 		
19.	DHS Office	DHS	Complete child abuse report including notes, medical records, diagrams and photographs and submit to the appropriate law enforcement offices.	Within 20 business days.	DHS Forms
20.	Child Protection Center	Forensic Interviewer	Forensic Interview of child(ren)	As soon as appropriate	Interviewer Reports
21.	Child Protection Center	MDT	Behavioral Health referral if appropriate	Following forensic interview	Referral Form
22.	DHS Office	DHS Assessment Worker	Transfer case to ongoing worker – notify MDT	Upon completion of the Assessment	DHS forms
23.	Child Protection Center	Medical Personnel & DHS worker	Re-evaluation of the comprehensive health status of the child. Formal developmental assessment of child(ren). Administer laboratory tests as indicated	2 – 4 weeks after initial medical visit	Developmental screening tools.

24.	School District	DHS or designee	Notify School where records need to be transferred		

***Code Section 232.2 © (2) – Failure to provide adequate supervision of child**

***Code Section 232.2 (n) Parents’ substance abuse impacts ability to care for child**

***Code Section 232.2 (o) Presence of illegal drugs in a child’s system due to acts that could be reasonably foreseen by the person responsible for the child**