

**DRUG ENDANGERED,
ABUSED & AT-RISK CHILDREN'S TEAM**

INTERAGENCY OPERATING AGREEMENT

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DRUG ENDANGERED, ABUSED & AT-RISK CHILDREN'S TEAM

INTERAGENCY OPERATING AGREEMENT

September 27, 2006

WHEREAS: The increasing number of child abuse cases, related or un-related to the growth of illegal methamphetamine labs and/or other illegal drugs is a major safety issue for children of Cumberland County; and

WHEREAS: The Children are the innocent victims of abuse and/or exposure to methamphetamine labs and other illegal drugs; and

WHEREAS: The emerging needs of these children who are negatively affected by the epidemic of child abuse, methamphetamine and/or other illegal drugs must be addressed; and

WHEREAS: The mission of the Drug Endangered, Abused & At-Risk Children's Team is to bring together appropriate agencies and organizations to present a process and method of information sharing, cooperation, and coordination leading to improved public policy for these children in need;

We, the members of the Drug Endangered, Abused & At-Risk Children's Team, are vested with the responsibility of ensuring the safety and well-being of our children and our youth, agree to adopt this Interagency Operation Agreement in order to:

1. Promote information sharing strategies that support comprehensive, proactive partnerships between juvenile court, law enforcement, schools, government agencies, social services, and organizations.
2. Share information for planning and research purposes in a manner that is legal and appropriate.
3. Establish an interagency working group to identify and address the victimization of children as related to abuse, illegal drugs and/or the illegal operation of methamphetamine labs.
4. Maintain a comprehensive strategy that coordinates, assesses, plans, and acts upon identified implementation phases.
5. Develop organizational processes and policies to coordinate information and services in a collaborative manner to improve systemic responses to youth related issues.

6. Share information between participating agencies with the justice system regarding any form of child abuse, methamphetamine and/or other illegal drugs in related crimes against children.
7. Utilize all services to reduce trauma of child abuse victims and to promote the healing process.

METHAMPHETAMINE PROTOCOL

DCS

RECEIVE AND REVIEW LAW ENFORCEMENT REPORTS OF POSSIBLE CHILD ABUSE/NEGLECT

1. Respond expeditiously and appropriately.
 - a. If contacted by law enforcement or Fire/EMS, respond immediately to the location where the child is present.
 - b. If the first report of a suspected methamphetamine lab site is received by DCS, contact law enforcement for assistance and respond as instructed.
2. Evaluate family composition and identify all available relative resources.
 - a. Interview individuals with information about the child and the child's circumstances.
 - b. Obtain information collected by law enforcement regarding family members and other caretakers including names, addresses, telephone numbers, and availability of alternative placement options.
 - c. Attempt to locate and coordinate removal of children who were not on the premises (e.g. children at school).

ASSUME CUSTODY

3. Assume physical custody of child once decontamination has been completed by Fire/EMS or hospital personnel.
 - a. Ensure that the child has no toys or others personal belongings from the site.
 - b. Ensure that no food or drink (including baby bottles) from the site accompanies the child.

ENSURE LEGAL DETERMINATION

4. Follow established DCS policy for obtaining legal custody of the child.
 - a. Contact immediate supervisor and other as appropriate.
 - b. Contact DCS legal for permission to remove the child and to evaluate the appropriate placement options.

RESPOND TO MEDICAL FACILITY

5. Fire/EMS will be responsible for transportation of the child to the appropriate medical facility and notifying DCS.
 - a. Respond expeditiously to the designated medical facility.

- b. Ensure that appropriate decontamination (to be performed either by Fire/EMS or hospital personnel) has been completed.
6. Ensure that appropriate medical care is provided.
- a. Ensure that medical evaluations and testing completed as necessary.
 - b. Obtain all medical records available including emergency room records then follow up with additional requests as further medical records are identified.
 - b. Notify the Health Department of methamphetamine exposure when requesting EPSD&T evaluation or when scheduling other medical evaluations.
 - d. Review emergency room records to determine if further medical evaluation is recommended.

FOSTER CARE/RELATIVE CARE

7. Contact resource management and evaluate placement options.
- a. Identify appropriate relative resources if possible.
 - b. Facilitate foster care or relative kinship care as appropriate.

CONDUCT INTERVIEWS, GATHER INFORMATION AND COLLECT EVIDENCE

8. Ensure the urine sample is collected from child at medical facility within two (2) hours of custody unless exigent circumstances exist.
9. Obtain evidence from law enforcement and independently.
- a. Photograph physical condition of child if possible.
 - b. Interview child and any other available witnesses to determine.
 - primary caregiver
 - child's knowledge of drug manufacturing process
 - child's living area in relation to the actual meth lab
 - medical problems
 - school attendance
 - b. Coordinate further interviews with law enforcement.

PARTICIPATE IN ALL LEGAL PROCEEDINGS

10. Follow up with DCS legal to complete necessary legal proceedings.
- a. Contact DCS legal next working day to complete legal documents.
 - b. Participate in all hearings scheduled.
 - c. Assist with identifying and contacting witnesses and gathering evidence.

MEDICAL

MEDICAL FACILITY SHALL COMPLETE DECONTAMINATION PROCEDURES AS DETERMINED TO BE APPROPRIATE

1. Complete decontamination as consistent with unknown chemical exposure.
 - a. For a symptomatic child (as determined by Fire/EMS at the scene).
Fire/EMS will decontaminate at the scene and transport immediately to the appropriate medical facility for decontamination
 - b. For an asymptomatic child
 - i. If the child can be wrapped in a Tyvex or other appropriate blanket, the child will be wrapped and transported by Fire/EMS to the appropriate medical facility for decontamination
 - ii. If the child cannot be wrapped, Fire/EMS will decontaminate on site and transport to the appropriate medical facility.

MEDICAL PERSONNEL WILL PERFORM NECESSARY MEDICAL EMERGENCY MEDICAL CARE

2. Once the child has been decontaminated, conduct emergency evaluation including
 - a. CBC, CMP, UA, UDS
 - b. CXR
 - c. O2 Sat
 - d. Notify Sheriff's Dept & Dept of Children's Service
Follow Decontamination Policy for those exposed to Meth Labs
Report possible abuse per policies and complete Abuse Report Form
3. Collect urine sample for evidentiary purposes.
 - a. Ideally, should be collected within two (2) hours of child's removal from a meth site.
 - b. Urine sample shall be maintained by hospital personnel and sent to lab for processing

CHILD SHALL REMAIN AT MEDICAL FACILITY PENDING DCS CUSTODY

4. Hospital security shall ensure that the child remains at the hospital and is released to no one other than identified DCS personnel or law enforcement.
 - a. DCS or law enforcement shall respond promptly to the medical facility for transport to House of Hope if necessary for further evaluation of custody options.

MEDICAL RECORDS SHALL BE RELEASED TO DCS ALONG WITH THE CHILD

5. Emergency medical records shall be recorded, copied and made available to DCS before the child is released.
 - a. A HIPAA exception exists for endangered children.
 - b. Any ongoing medical problems should be documented and brought to the attention of DCS personnel
 - c. Follow up with appropriate DCS personnel to ensure that medical problems are identified and appropriate referrals are made.

LAW ENFORCEMENT

CUMBERLAND COUNTY SHERIFF'S DEPARTMENT

RESPOND TO CALL – REPORT TO DCS IF CHILD IS INVOLVED

1. Secure the scene of suspected methamphetamine lab – ensure the safety of initial responders, children and others at the scene.
 - a. Contact EMS/Fire for evaluation and decontamination of child and others at the scene or at the appropriate medical facility as indicated.
 - b. Notify clandestine lab certified officers who will start the investigation

ASSESS CONDITION OF CHILD

2. Take child into protective custody and notify DCS to respond.
 - a. Leave all toys and other personal belongings at the site.
 - b. Leave all food and drink (including baby bottles) at site.

PLACE CHILD IN PROTECTIVE CUSTODY PENDING TRANSFER TO DCS

3. Transfer custody of child to DCS once Fire/ EMS or appropriate medical facility completes decontamination.
 - a. Do not release child to family members or neighbors.
 - b. The child remains in the protective custody of law enforcement until DCS arrives and takes physical custody – all placement decisions are made by DCS.

COLLECT PHYSICAL EVIDENCE FOR COURT PROCEEDINGS

4. Examine scene for evidence that indicates the presence of a child.
 - a. Document the scene by videoing or photographing the scene giving particular attention to the following:
 - Child's accessibility to drugs, chemicals, syringes and drug paraphernalia (measurements of height, depth of shelves, tables, etc. for comparison with height and reach of child)
 - Proximity of hazards to child's play and sleep areas
 - Non-drug hazards and other indications of neglect
 - Access to pornography
 - Food quantity and quality
 - Sleeping conditions
 - Sanitary conditions

- b. Photograph the child at the scene if possible and document the following:
 - i. Get addresses, phone numbers and other identifying information of parents.
 - ii. Determine family composition and the existence of siblings (ensure to the extent possible that a sibling is not temporarily absent – e.g. at school or staying with a friend or family member).
 - iii. Identify other caregivers if appropriate.
5. Obtain samples from medical facility and submit to forensic laboratory
6. Surveillance equipment, weapons and explosives will be noted, photographed, and measured. Document whether or not the weapons were loaded or the explosives were live.

FACILITATE CLEAN UP AND DATA COLLECTION

7. Contact local Drug Enforcement Administration (DEA) office to coordinate clean up of hazardous material on site.
8. Submit data to EPIC and other appropriate databases.

LAW ENFORCEMENT

CROSSVILLE POLICE DEPARTMENT

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FIRE

CUMBERLAND COUNTY FIRE DEPARTMENT

RESPOND TO CALL – IF CHILD INVOLVED CONTACT LAW ENFORCEMENT

1. Secure the scene and ensure the safety of initial responders and others found at the site.
2. Ensure that any child at the scene is appropriately decontaminated, allow law enforcement to photograph prior to decontamination if possible.
 - document injuries
 - state cleanliness and clothing
 - signs of neglect or abuse
 - a. For a symptomatic child, decontaminate at the scene and transport immediately to the appropriate medical facility.
 - b. For an asymptomatic child
 - i. If the child can be wrapped in a Tyvex or other appropriate blanket, the child and transport to the appropriate medical facility for decontamination.
 - ii. If the child cannot be wrapped, decontaminate on site and transport to the appropriate medical facility
3. Leave all personal belonging (toys, books, etc.) and all food items (baby bottles, snacks, etc.) at the lab site.

ASSESS CONDITION OF CHILD – PROVIDE MEDICAL CARE AS INDICATED

4. Perform a field assessment to see if emergency medical care is necessary.
 - b. For a child with obvious injuries or illness, call for assistance or transport immediately and notify DCS to meet the child at the hospital
 - c. For child not obviously critical perform field medical assessment consisting of vital signs (temperature, blood pressure, pulse, respirations) pediatric triangle of assessment (airway, breathing, circulation)

COORDINATE TRANSPORTATION OF CHILD TO HOSPITAL

5. Transport the child to the hospital for further medical evaluation after decontamination as set out above.

FIRE

CROSSVILLE FIRE DEPARTMENT

RESPOND TO CALL IF CHILD INVOLVED, CONTACT LAW ENFORCEMENT

1. Secure the scene and ensure the safety of initial responders and others found at the site.
2. Set up appropriate field decontamination measures. Ensure that all individuals exposed to toxic chemicals are properly decontaminated.
3. Ensure that any child at the scene is appropriately decontaminated.
 - a. Photograph the child prior to decontamination if possible
 - i. document injuries
 - ii. state of cleanliness and clothing
 - iii. signs of neglect or abuse
 - b. For a symptomatic child, decontaminate at the scene and transport immediately to the appropriate medical facility.
 - c. For an asymptomatic child
 - i. If child can be wrapped in a Tyvex or other appropriate blanket, wrap the child and transport to the appropriate medical facility for decontamination.
 - ii. If the child cannot be wrapped, decontaminate on site and transport to the appropriate medical facility.
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 - a. For a child with obvious injuries or illness, call for assistance or transport immediately and notify DCS to meet the child at the hospital.
 - b. For child not obviously critical, perform field medical assessment consisting of vitals signs (temperature, blood pressure, pulse, respirations) and pediatric triangle of assessment (airway, breathing, circulation).

COORDINATE TRANSPORTATION OF CHILD TO HOSPITAL

6. Transport the child to the hospital for further medical evaluation after decontamination as set out above.

CUMBERLAND CHILDREN'S CENTER

HOUSE OF HOPE

RESPOND TO CALL THROUGH DISPATCH, DCS OR LAW ENFORCEMENT

1. Provide contact information to dispatch for a 24/7 coverage during removal of children by DCS or law enforcement.
 - a. House of Hope will be accessible during the process of removal investigations and interviews by DCS and/or law enforcement.
 - b. House of Hope staff/volunteers will seek out resources to provide for the immediate needs of the child.
 - c. Office space will be provided for DCS and law enforcement during removals, investigations and interviews.

IMMEDIATE CARE

2. House of Hope staff/volunteers will provide and promote a child friendly atmosphere in order to alleviate trauma during removals, interviews, and investigations.
 - a. House of Hope staff/volunteers will be available for the care of a child at the request of DCS or law enforcement.
 - b. All children on the premises shall be in the physical custody of DCS or law enforcement.

ADDITIONAL SERVICES

3. Upon referral by DCS, the House of Hope staff and volunteers will seek resources for children from relative caregivers, foster families, and other families with children.

PROSECUTION

1. PROSECUTION OF THE PERPETRATOR

- a. Be available for initial contact when law enforcement feels it is necessary to report alleged crime to the District Attorney's Office.
- b. Work hand in hand with law enforcement to advise them on how the case is proceeding.
- c. Review all evidence and make the final decision on the appropriate criminal charge for the alleged crime.
- d. Help navigate the case through the court system from initial charge to plea/trial.

2. PROTECTING THE RIGHTS AND INTERESTS OF THE VICTIMS AND THEIR FAMILIES

- a. Successfully shield the victim from any unnecessary trauma that may arise from exposure to the court system.
- b. Work closely with the staff at the House of Hope to bring all agencies of interest together to a victim-friendly environment to proceed with interview/investigation.
- c. Minimize number of interviews of victim by utilizing the House of Hope.
- d. Take into consideration the feelings of the victim and victim's family when making decisions regarding the prosecution of the perpetrator.
- e. Help guide victim and victim's family through the court system maze.
- f. Take into consideration wishes of victim and victim's family when making final decision of disposition of case (ie. trial or plea).

EMS

RESPOND TO CALL – IF CHILD INVOLVED, CONTACT LAW ENFORCEMENT

1. Secure the scene and ensure the safety of initial responders and others found at the site.
2. Ensure that any child at the scene is appropriately decontaminated. If possible, allow law enforcement to photograph prior to decontamination.
 - document injuries
 - state cleanliness and clothing
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