

Wyoming Alliance for Drug Endangered Children (WYADEC) Protocol for Law Enforcement

I. Law Enforcement response

- A) **Identify a Drug Endangered Child.** This is done any time Law Enforcement comes into contact with a child that has been treated or determined to be:
- In a residence, vehicle, or other area where a site of a Methamphetamine Laboratory is or has been located, and the child is in danger due to the environment.
 - In a residence, a vehicle or other area where there is evidence of methamphetamine being used, or other hazards associated with methamphetamine use, including but not limited to laboratory equipment, one or more chemicals commonly associated with methamphetamine use or production, or other hazards associated with methamphetamine use in the same general area as the child.
- B) **Contact Child Protective Services, and transport Child in conjunction with WYADEC protocol.** Once a child is identified as a Drug Endangered Child (DEC), that child will be removed from further contact with family or friends and custody shall be with/through the Department of Family Services (DFS) for further treatment and placement.
- If a child is found in a methamphetamine laboratory environment, the Law Enforcement Officer shall contact the appropriate WYADEC discipline, i.e. a certified Clandestine Laboratory Processing Team, Fire Department, appropriate medical personnel, DFS, etc.
 - On site decontamination must take place at a laboratory site, and may take place with any other decontamination based on the officer's discretion and medical personnel's evaluation. ***For proper decontamination, see Attachment A to this protocol.***
 - Law Enforcement shall assist DFS or Child Protective services in identifying any immediate safety concerns. Annotate same and make hospital staff, in situation where DEC is transported for evaluation, aware of potential contamination issues.

- The Law enforcement Officer, who takes the DEC into protective custody, shall be responsible for making sure that all appropriate needs of the child are arranged for, pursuant to Wyoming State Statute WS 14-3-208(a)(v) in lieu of parental consent, Law Enforcement may authorize medical intervention for child.

C) **Notification of applicable WYADEC discipline.** This is done anytime a Drug Endangered Child has been identified by a Law Enforcement Officer.

NOTE: An evaluation packet that will follow the child through the completion of the investigation will be initiated at the time of initial contact with child.

- During pre-planned narcotics seizures, and whenever possible/practical, prior to placement of the DEC, the Law Enforcement Officer/Agency shall make every attempt to contact the Prosecutor of jurisdiction, Child Protective services, and any other applicable WYADEC discipline as soon as possible in conjunction with WYADEC protocol.
- When a DEC has been placed into protective custody, the Law Enforcement Officer and/or physician shall be mindful of the 72 hour rule (see attachment B)

D) **Build case for Child Endangerment or Abuse charges.** This is done any time a Law Enforcement officer has made a determination that a Child has been identified as a Drug Endangered Child. The Law Enforcement officer shall document all pertinent evidence in order to aid the child endangerment prosecution and assist medical personnel and DVS with evaluation and treatment. Aside from the regular investigative criteria, Law Enforcement will recognize that there are special information needs when looking at a Drug Endangered Child case. Those special information needs, that should be documented would include, but not be limited to, photographs and/or written reports on:

- ✓ Physical status of child, emotional state, hygienic state, etc. This should be done whenever possible in conjunction with proper DFS personnel.

- ✓ Quantity and types of chemicals present and how they were found (uncapped, in bottles or tin cans, etc.) drug paraphernalia, needles, pornography, etc., so that the exposure to the children can be determined.
- ✓ Odors and state of the Lab (actively cooking, decanting stage, drying stage, etc.)
- ✓ People at the scene and those who also reside at the home, (run criminal histories on all people identified at scene). Level of outside adult traffic.
- ✓ Adult employment.
- ✓ Adult behavioral description (paranoid, sleeping patterns, aggression, tweaking).
- ✓ Adult drug abuse, witnessed by whom, exposure to Child.
- ✓ Evidence of surveillance equipment.
- ✓ Height of child in comparison to the height of any potential hazard (chemicals, needles, Controlled Substances, firearms, weapons, pornography, etc.) present at the lab site.
- ✓ Condition of home i.e., living conditions (amount of food in storage and refrigerator, state of cleanliness of home, squalor like conditions).

E) **Submitting case to Prosecutor.** This is done when the Law Enforcement Officer has gathered all the facts concerning the Drug Endangered Child case.

- When the Law Enforcement Officer meets with the prosecutor on the original case, the Law Enforcement Officer shall inquire if, along with other charges, that a Drug Endangered Child related charge is also appropriate.

ATTACHMENT A

DECONTAMINATION PROTOCOL FOR CHILDREN

1. Where an asymptomatic child has been removed from a clandestine methamphetamine laboratory and there is no sign of obvious chemical contamination on the child (odor, visible chemical, etc), significant danger to individuals coming in contact with the child is less. However, the following recommendations are made:
 - a. Although full and immediate decontamination is not necessary, the clothes that the child is wearing should be removed as soon as reasonably safe and a shower provided when conditions enable a shower. It is unlikely that significant amounts of methamphetamine or other chemicals will be transferred from clothing but a cloth draped over vehicle seats will provide further protection if desired.
 - b. Showering the child with warm water in an expedient manner in an area where privacy is provided, and also protects the child from unreasonable trauma. This may be conducted at the scene, if adequate facilities are present, i.e. a hospital, a fire station, or any other location that is identified as local protocol.
 - c. After the child has showered, or if the clothes are removed at the scene, the responsible agency should retain all of the clothes for disposal or retention for evidence. Although further testing may show that washing the clothes in hot water may be adequate, it is strongly recommend that clothes be discarded.
 - d. Before, during and after decontamination, care should be taken to assure children are kept warm during transports to prevent hypothermia.
2. In the instance where a clandestine methamphetamine laboratory has been identified and the children that are associated with that laboratory are in a school, daycare center, foster home, etc at the time of the investigation, the children should be visited by the appropriate agency personnel (law enforcement, child protective services, school nurse, etc), and the following actions taken:
 - a. Children that appear to be ill or chemically contaminated should be immediately transported to a medical facility for full decontamination and/or treatment. Basic life support must take precedence over decontamination. Although decontamination

should be conducted as soon as is possible, it must not delay the transportation of a potentially contaminated child. Follow up interviews should be conducted by investigators to determine observations by care givers not only of the DEC but of suspect parent or guardian

- b. Where an asymptomatic child has been located at a school or daycare center, etc. and there is no sign of obvious chemical contamination on the child (odor, visible chemical, etc), the child is not likely to present a significant danger to other children or facility personnel coming into contact with the child. However, the following recommendations are made:
 - i. Although full and immediate decontamination is not necessary, the clothes that the child is wearing should be removed as soon as is reasonably safe and a shower provided when conditions enable a shower. It is unlikely that significant amounts of methamphetamine or other chemicals will be transferred from clothing but a cloth draped over vehicle seats during transport will provide further protection if desired.
 - ii. Showering of the child with warm water in an expedient manner that also protects the child against unreasonable trauma in an area where privacy is available i.e., a school, daycare center, hospital, or fire station.
 - iii. The responsible agency should retain all the clothes for disposal or evidence as deemed necessary. Although further testing may show that washing the clothes in hot water may be adequate, it is strongly recommended that the clothes be discarded.
 - iv. Unless there is evidence that the involved children have significant chemical contamination (chemical odors, illness, etc), other children present at the school or daycare center need not be involved with the cleaning process or subjected to any other cleaning activities. The extraordinary cleaning of school property associated with methamphetamine-associated children is also unnecessary under these conditions. School personnel and parents/guardians of other children present at schools or daycare providers should be advised of potential contamination so that they may make a decision for decontamination.

3. It is recommended that baby wipes **not be** used as a substitute for a warm shower since there is little added efficacy that has been demonstrated. In fact, wipes have been found to **spread** contamination rather than remove it.

4. Children should be provided a medical and developmental assessment prior to or after showering. This assessment should be in accordance with the protocols presented in the National Protocol for Medical Evaluation of Children Found in Drug Labs, available at no charge from the National Alliance for Drug Endangered Children (www.nationaldec.org).

ATTACHMENT B

7-3-508. Temporary order of protection; setting hearing.

(a) Upon the filing of a petition for an order of protection, the court shall schedule a hearing on the petition to be conducted within seventy-two (72) hours after the filing of the petition, and shall cause each party to be served with an order to appear, a copy of the petition and a copy of the supporting affidavits. Service shall be made upon each party at least twenty-four (24) hours before the hearing. The failure to hold or complete the hearing within seventy-two (72) hours shall not affect the validity of the hearing or any order issued thereon.