





Working with

Medical Professionals

in Drug Endangered Children (DEC) Efforts

Medical professionals, such as pediatricians, ER personnel, general physicians, and nurses, all play an important role in helping drug endangered children. Medical professionals can identify drug endangered children; treat children and families; and help gather information that may be helpful to other disciplines. Some medical professionals, such as Child Abuse Pediatricians and Sexual Assault Nurse Examiners

(SANE), are specialized medical professionals with experience and training in areas such as child abuse and neglect and child sexual abuse/assault. They often work closely with law enforcement and child welfare to ensure the child is safely examined and interviewed in a child-friendly environment in order to determine next steps in helping the child and the family.

Medical professionals may be able to provide other professionals:

- Information and evidence about child abuse and neglect
- Information on how the child(ren) and family acted and interacted
- Statements made by family and the child(ren)
- Ongoing or new medical concerns
- Results from drug tests, including through urine, hair follicle, meconium, and fingernails

In the DEC Approach, it is beneficial for professionals to share evidence and information with medical professionals regarding children and their living environment. This can include:

- Types and quantity of drugs and paraphernalia
- Chemicals and substances used in the cultivation or manufacturing of drugs
- Ways in which the drugs were stored or found, such as crushed, in syringes, uncapped bottles, tin cans, or baggies
- Condition of the home including whether feces, garbage, bugs, or rodents are present
- Other risks to the children, such as accessible fiberglass insulation, make-shift wiring, odd smells, _lead in the home, or unknown substances
- Photos or videos of the scene, home, or life of the child to assist in providing a better understanding
- Statements made by the children and others
- Observations of children and parents, such as abnormal behavior, developmental delays, possible intoxication, reaction to professional involvement, or possible medical or mental health conditions
- Medication at the scene or within the residence

With this additional information, medical professionals can then decide, for example, whether to test for infectious diseases because of needle exposure, whether to test for drugs in the child's system because drugs were found in the house and because of the child's behavior, and whether to look for further signs of abuse and neglect. Without this shared information, medical professionals may not have reason to look for or treat these things.

Data privacy laws such as personal health data protection under the Health Insurance Portability and Accountability Act (HIPAA) are complex and may impact the exchange of information between medical professionals and others. But HIPAA has exceptions, and there are circumstances under which medical and health information can be exchanged, particularly if there is an active investigation; the information is needed to prevent injury or harm to others; or when it pertains to child abuse or neglect.

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