Yavapai County
Drug Endangered Children
Multidisciplinary Protocol

MATForce
(Yavapai County Methamphetamine Advisory Task Force)
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This protocol, adapted with permission from the Pima County’s Drug-Endangered Children Multi-Disciplinary Protocol which was developed from the collaborative effort of Law Enforcement, Medical and Social Service Agencies, is presented as the model for handling cases involving Drug-endangered children (DEC) in Yavapai County. It provides guidelines to assist those who investigate and work with “drug-endangered children” (defined as children endangered as a result of a clandestine methamphetamine laboratory) and to reduce the secondary trauma often associated with such investigations.

While it is recognized that each partner/agency has its own mandate to fulfill, the Protocols also acknowledge that no one single agency or discipline can fully address the problem of drug-endangered children. Therefore, each agency must be cognizant of the needs of the victim, as well as sensitive to the needs of other agencies and professionals involved. Where any interagency conflict exists, the best interests of the child shall be the overriding concern. Tools have been provided herein to provide up-to-date information so that professionals and other individuals have access to resources to address this problem in our community.

The collaborative partners set the following goals for this document:

1. Recognition that children should be treated with dignity, compassion and respect.
2. Promotion of a system that recognizes the standards, requirements and authorities of the various disciplines involved.
3. Creation of workable guidelines for joint investigations of all cases involving drug-endangered children.
4. Provision of a consistent and efficient approach to the investigation, prosecution and management of drug-endangered children cases in Yavapai County.
5. Limitation on the number of interviews of the child victim or witness.
The purpose of the multidisciplinary protocol is to provide professionals from Child Protective Services, Law Enforcement, Medical Services and Prosecution a basis for the development of community specific procedures for situations where there drug-endangered children are found. As used herein, the term “drug-endangered children” refers to children who are placed in dangerous environments as a result of clandestine methamphetamine labs. Implementation of this protocol ensures that children who may be at risk for exposure to clandestine meth laboratories receive protection, advocacy and support through a multidisciplinary approach.

The production of methamphetamine in clandestine, home-based drug laboratories confronts Arizona with a unique set of problems that other illegal drugs have never before presented. The chemicals used to manufacture these illegal drugs, the production process, and the waste generated as a result of that process pose very real and serious dangers to the public and the environment. These dangers include toxic poisoning, chemical and thermal burns, fires, and explosions. The children who live in and around clandestine meth labs are at the greatest risk of harm due to their developmental nature, the abuse and neglect perpetrated on them by their caretakers and the many others who frequent their drug-laden homes, and their inability to protect themselves.

Responding to a suspected clandestine meth lab where children are present requires a carefully planned and coordinated approach involving multiple partners. Those who make illegal drugs, especially methamphetamine, often use the drugs themselves, making them prone to violent behavior. Additionally, illegal drug manufacturers often try to keep their illegal operations a secret through the use of weapons, explosive traps, and surveillance equipment. This protocol is intended to coordinate and improve the efforts of local Law Enforcement, Child Protective Services (CPS), Medical Professionals and the County Attorney’s Office to respond to investigations of clandestine meth labs where children are present, to protect those children and to prosecute those responsible. The DEC Program ensures timely access to qualified personnel who can respond to the immediate and longer-term medical and safety needs of drug-endangered children.

MISSION AND GUIDING VALUES

The following mission and guiding values were adapted from the National Steering Committee for the Advancement and Adoption of the Concept of Drug-endangered children and from the Arizona Statewide DEC Protocol, established in 2000 by former Arizona Attorney General Janet Napolitano.
Mission

We will be unrelenting in the pursuit of safety for children exposed to the extreme dangers of drug manufacturing environments in a manner that gives the child the best opportunity for a happy and productive future. These efforts will include government agencies, private organizations, and the general public working in collaboration to (1) prevent drug abuse; (2) provide resources to children when drug abuse prevention efforts fail; (3) break the cycle of drug abuse caused by those who manufacture, sell and use drugs; and (4) aggressively investigate violations and prosecute the offenders.

Guiding Values

Safety:

- We will relentlessly pursue the end of drug abuse to prevent children from experiencing the physical, emotional, and psychological damage that exposure to drug environments cause.
- We will enhance the safety of children by removing them from dangerous drug environments and providing them with appropriate follow-up care and services.
- We will place children in, or return them to, family environments that are completely free of dangerous drugs.

Collaboration:

- We will insist on the participation of Law Enforcement, Medical Providers, Service Agencies, Prosecutors and the general public to actively pursue the end of social tolerance to the abuse of dangerous drugs.
- We will form alliances, partnerships and organizations across all government and private services to ensure that the appropriate tools and resources exist to identify, remove and treat children in dangerous drug environments.
- We will identify and implement multidisciplinary services and strategies necessary to break the cycle of drug abuse.

Dedication:

- We will hold ourselves accountable to appropriately provide the services necessary to accomplish the mission of the Yavapai County DEC Protocol.
- We will vigorously pursue the institutionalization of the Yavapai County DEC Protocol.
- We will continually evaluate the effectiveness of our efforts to ensure the mission of the Yavapai County DEC Protocol is achieved.
There are several agencies and organizations that participate in the DEC protocol. The following provides an overview of the responsibilities of the primary responders as well as other partner agencies:

**Law Enforcement:**

Responsible for all investigative activities taking place at a clandestine meth lab scene. The agencies are encouraged, depending on agency size and resources, to include both an individual who specializes in child crimes investigation as well as a drug investigator. The focus of the drug investigator is to collect evidence for prosecution purposes. The child crimes investigator coordinates the forensic interview of the child victim with CPS and the Advocacy Center to establish the elements of child abuse, to conduct the child crimes investigation and to collect evidence for prosecution purposes. The DPS crime laboratory provides support to the criminal investigation including testing samples for forensic evidence. Law Enforcement and CPS cooperate at the scene to insure the child’s safety. The investigator should determine if there have been other children in the area of the investigation site who may have been exposed.

**Child Protective Services (CPS):**

Provides for the immediate protection and insures the safety of the child, addresses temporary custody and shelter needs, transports the child for medical evaluation, and coordinates placement of the child. CPS addresses the needs of the caregivers related to other community services. CPS also ensures that Law Enforcement knows where the child is being placed and coordinates arrangements for the medical evaluation either at the Yavapai Family Advocacy Center whenever possible, or at the appropriate medical facility. The focus of the CPS investigation is to gather factual information related to the potential dependency case, identify hazards to the child, ensure the welfare of the child and arrange for other needed services.

**Fire Department, Emergency Response, and HAZMAT Team:**

Provide assistance in assessment of environmental hazards that the clandestine meth lab presents and assist in facilitating access to the certified environmental remediation agencies that have expertise in clean-up and certifying that the home is again habitable. HAZMAT will test the air quality at the scene for both safety and evidentiary purposes.

**Medical Personnel:**

Conduct medical evaluations including an Early Periodic Screening, Diagnosis and Treatment (EPSDT) screen. The medical center or the Yavapai Family Advocacy Center may be the
location for medical evaluations and examinations. This is done to provide a specific physician, clinic or hospital that has expertise in medical examinations for suspected child abuse, including exposure to drug environments.

**Tribal Agencies:**

The respective Tribal Police Departments are responsible for all investigative activities taking place at a clandestine meth lab on Tribal lands. Those agencies are encouraged, depending on size and resources, to include both a child crimes investigator as well as a drug investigator to collect evidence for prosecution purposes. The DPS crime laboratory provides support to the Tribal agencies criminal investigations including testing samples for forensic evidence. Investigations of children residing on the reservation fall under the jurisdiction of the Tribal Law Enforcement Agency and Tribal Social Services.

**Prosecution:**

Responsible for the prosecution of criminal offenses involving child abuse and controlled substances violations, the Office of the Yavapai County Attorney interacts on a daily basis with Law Enforcement and Child Protective Services in the investigation and prosecution of cases in which children are victims of abuse and/or witnesses to felony offenses involving controlled substances. Cases are prosecuted with a goal of holding offenders as fully accountable for their crimes as is possible while being ever mindful of the needs of the child victim.

**Victim Services:**

The Yavapai County Attorney’s Office Victim Services Division provides advocacy and crisis intervention for child victims. Victim Services Court Advocates work with CPS and the legal guardian as appropriate to keep them apprised of criminal proceedings and the child’s rights as a victim of abuse. Crisis Advocates provide crisis response to drug-endangered children in the area. They provide emotional support, answer questions, assess needs, and provide referrals to other community resources.

**The Yavapai Family Advocacy Center:**

The Yavapai Family Advocacy Center has trained pediatric nurses under contract with the Yavapai County Attorney’s Office who may provide medical services concerning suspected child maltreatment cases for Law Enforcement and CPS, as well as physicians and other health care providers. These services include medical exams, consultations, review and interpretations of lab tests and other medical findings obtained by forensically trained professionals. Medical Personnel will provide witness testimony on findings and diagnosis reached during such evaluations and consultations. Law enforcement and/or CPS may refer cases to Medical Personnel in the community for specialized treatments and assessments.
As practical, all members of the response team should have specialized safety and hazards training related to the investigations of clandestine meth labs in order to protect against possible exposure to dangerous substances. Law Enforcement training and certification is available through the U.S. Drug Enforcement Administration (DEA) in connection with the MCSO/HIDTA Clandestine Lab Task Force. Cross training, particularly between Child Protective Services and Law Enforcement, is also critical to ensure that appropriate evidence and information is collected that is necessary for either the child abuse investigation or the drug investigation.

It is recommended that the DEC Officer be a specialized child crimes investigator with a suggested minimum requirement of a Clandestine Lab Certification through the DEA as well as participation in the following trainings:

- Basic Investigation Course
- 40 hours of Child Forensic Interview training

The Yavapai Family Advocacy Center coordinates training programs on drug-endangered children’s issues for Law Enforcement, Child Protective Services, Medical Personnel and Service Provider Agencies. The Center will also provide programs to educate the public about the drug-endangered children response.

The Arizona Attorney General’s Office in conjunction with COPS and HIDTA offers Responding to Drug-Endangered Children Training. This is a one-day training session regarding methamphetamine, its manufacture, volatility, and perilous effects on adults, children, and the environment. Emphasis is placed on all aspects of the multidisciplinary approach. The DEC training team usually consists of a drug detective, child crimes detective, CPS investigator, Assistant Attorney General, and a physician. Occasionally, a DPS crime lab chemist will also comprise the training agenda.

The website located at [http://www.azag.gov/DEC/](http://www.azag.gov/DEC/) has up-to-date information on available training. Specific requests for training in areas statewide can also be accommodated. The website includes:

- A more in-depth overview of the methamphetamine problem.
- Links to Arizona Revised Statutes related to the DEC program.
- Links to articles about the methamphetamine problem.
- Links to other resource websites that provide in-depth information about DEC programs in other states, recognition of methamphetamine use and manufacture, treatment resources, articles and other information.
- Information about upcoming training, conferences and other DEC events.
The following provides an overview of the DEC protocol:

**Initial Actions:**

When local Law Enforcement personnel receive a report of a suspected clandestine meth lab, they will first determine through a thorough investigation if a clandestine meth lab is likely operating. If children are present, their safety is a primary concern. The appropriate investigators, including the drug investigators, child crimes investigator and CPS, are notified as soon as possible and respond. The County Attorney’s prosecutor on call and the Yavapai Family Advocacy Center are also to be contacted whenever possible. Typically, drug investigators call out other first responders upon discovery of children.

If a clandestine meth lab scene:

- The lead Law Enforcement drug investigator is the individual in charge.
- CPS is in charge of the child(ren) found at any suspected scene.
- CPS works jointly with Law Enforcement at the scene to ensure that the child is protected from further chemical exposure and that information necessary for both the drug investigation and the potential child abuse case is collected.
- A minimal screening of the child may take place at the scene, but in-depth forensic interviews should be held in at the Yavapai Family Advocacy Center, if possible.
- After the child is removed, the crime scene is isolated. If it is determined that there is sufficient information to indicate child abuse, the CPS hotline is called.
- Concurrent investigations include drugs, child crimes, and Child Protective Services. Investigators share information with each other as is set forth in the Yavapai County Child Abuse Investigation Protocols, 2004 Revision, to facilitate their collaborative, multidisciplinary effort.

**Safeguarding Children:**

Children are not to be released to anyone prior to CPS approval. Only CPS will determine where a child is to be placed.

The DEC Program ensures that children receive an immediate and appropriate medical exam, including a test for exposure to toxic chemicals and developmental screening. Upon being removed from the crime scene, the children are showered or bathed to reduce chemical exposure, they are provided with new clothing, food, and if needed, crisis counseling. A forensic interview will be conducted with the child, most often at the Yavapai Family Advocacy Center. The medical exam and interview provide important evidence to be used in the drug and child abuse prosecutions and the dependency case.
**On-site Investigation:**

After the initial emergency response, the appropriate Law Enforcement unit will complete the investigation. In the case of a clandestine meth lab site, a police officer will initiate the appropriate notification and remediation protocol after the scene is cleared of the evidence needed for prosecution. When necessary, Law Enforcement will also further the investigation in order to determine if any children outside the home may have been exposed.

**Prosecution:**

The Yavapai County Attorney’s Office has primary responsibility in Yavapai County for prosecution of cases of child abuse and dangerous drug manufacturing.

The Arizona Attorney General’s Office has statewide jurisdiction over the dependency action. The Arizona Attorney General’s Office of Victim Services will work with CPS to identify the guardian of the child victim and will provide written notification of case status, including dates and times of all legal hearings to the guardian. A Victim Advocate is available to accompany the child and/or their legal guardian to court, as well as to detail victim’s rights and make needed social service referrals. In some instances, losses to the victim as a result of the crime may be reimbursable, and the Victim Advocate can provide information about victim compensation, including costs for such items as counseling.

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**CLANDESTEINE METH LABS: FIRST RESPONDERS**

A clandestine meth lab is any laboratory that manufactures methamphetamine. The primary dangers are the possibility of explosions due to volatile chemicals and the possibility of unknowingly inhaling airborne chemical substances. Do not underestimate these dangers.

**Note:** If you believe that you have found yourself in a residence or facility that houses a clandestine meth laboratory, the most important thing to do upon realization is to get out of the premises and to contact Law Enforcement immediately. There is great danger at any clandestine meth lab site and any investigation MUST be handled by trained personnel.

First responders to a clandestine meth lab investigation scene include Law Enforcement (both child crime investigators and drug investigators), CPS Investigators, Medical Personnel (generally the EMT/Paramedic responders), Fire Departments, HAZMAT Teams and sometimes prosecutors.

Many of the hazards associated with making illegal drugs are derived from the ingredients, many of which are hazardous substances. Some are raw products or pure chemicals but many ingredients come from over-the-counter products such as cold medicine, dietary supplements,
and even Draino. When these products are released, they can harm responders through inhalation or skin contact. It is possible to become contaminated through inhalation or skin contact and NOT be aware of the contamination until sometime later. **Remember, safety is a priority.**

Methamphetamine is a central nervous system stimulant. Meth users may become agitated and feel “wired.” Their behavior may be very unpredictable and they may not sleep for days at a time while on a meth binge.

**Note:** If you believe that you have found a clandestine meth lab, it is not your responsibility to attempt to identify what drug is being produced there. Your responsibility is to ensure your own safety by immediately leaving the site and contacting Law Enforcement. Law Enforcement has the primary responsibility for the identification of the nature of the clandestine meth lab and to warn and evacuate others from the site.

To ensure your own safety it is critical to know what the "**Exposure Routes of Entry**" are when dealing with a clandestine meth lab.

### THE EXPOSURE ROUTES OF ENTRY

1. **Inhalation** - Most Common
2. **Absorption** - No Warning
3. **Ingestion** - Poor Hygiene
4. **Contact** - Skin and Eyes
5. **Puncture** - Chemical Injection (either intentional or accidental)

Adapted from [http://www.health.state.mn.us/divs/eh/meth/training/workersafety.pdf](http://www.health.state.mn.us/divs/eh/meth/training/workersafety.pdf)

Once Law Enforcement has responded to a clandestine meth lab site, Law Enforcement (and no others) should immediately accomplish the following:

- Evacuate and secure the area. Insure that all persons in the immediate area (including other first responders) are removed to a safe location. Depending upon the size of the lab and the amount of toxic chemicals being emitted this may involve evacuation of the neighborhood.
- If necessary, medical aid should be given.
- Suspects should be detained or arrested if probable cause exists.
- Do not attempt to stop the chemical reaction.
- Do not turn any electrical devices/lights on or off. The simple act of turning on an electrical switch may cause an explosion. In an explosive atmosphere even turning on a flashlight might cause an explosion.
• Do not shut off the water supply to the house or the chemical reaction.
• Call for fire/hazmat to respond to the location.
• Establish an outer perimeter area and keep all unnecessary persons from entering.
• Call your nearest Clandestine Meth Lab Investigation Team.
• **SAFETY IS A PRIORITY IN ACCOMPLISHING THE MISSION OF THE PROTOCOL.**

Adapted from [http://www.stopdrugs.org](http://www.stopdrugs.org)

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**CHILD DECONTAMINATION**

It is important to recognize that children who have been exposed to the chemicals used to produce the methamphetamine in a lab may be in danger from their exposure to the chemicals. Children need to go through a decontamination process to assure their own safety as well as for the safety of the first responders and others with whom the children may come into contact. Once children at the site have been located and assessed for possible immediate need for medical attention by the Law Enforcement, EMT, paramedics, or CPS workers, the children are to be separated from other victims at the scene. When possible, dress the child victim in protective clothing (Tyvex suit) to prevent exposure to first responders at the scene and follow the appropriate protocol for gathering evidence off the child. No clothing, toys, baby bottles, food or drink should be removed from the site, as these items are likely contaminated.
OVERVIEW OF INVESTIGATION

Initial Actions

Report Received by Law Enforcement

☑ Confirm Report
☑ Establish whether children are present or have been otherwise exposed
☑ Notify drug investigators, child investigators, CPS investigators, and prosecutors

Safeguarding Children

At the Scene

☑ Protect children from further exposure
☑ Provide emergency medical treatment if needed

Remove the Children from the Scene

☑ Arrange for bathing and clean clothing
☑ Schedule medical exam
☑ Conduct interview at the Family Advocacy Center whenever possible
☑ Identify safe placement with relatives or within the foster care system

On Site Investigation

Law Enforcement

☑ Secure the scene
☑ Gather evidence for child abuse and drug charges
☑ Initiate the appropriate notification and remediation protocol

Prosecution

Law Enforcement coordinates gathering of all evidence and refers for prosecution

☑ Refer to the Yavapai County Attorney’s Office for criminal prosecution
☑ The Attorney General’s Office is responsible for the dependency action initiated by a CPS dependency petition
The following table of the Yavapai County DEC Protocol attempts to provide information in a chronological outline incorporating the activities of Law Enforcement, CPS and Medical Personnel. Although it follows a general chronological order, by the very nature of the process many activities will be taking place concurrently.

The protocol is intended to provide a general guideline for the procedures to be followed when there is an investigation involving a drug-endangered child. This protocol will be reviewed annually and updated as necessary.

**Note:** For the purposes of this protocol, Law Enforcement may include any combination of a DEC investigator, a drug investigator, a child crimes investigator, or an officer that performs multiple functions as may be the case in small jurisdictions and considering available resources.
<table>
<thead>
<tr>
<th>Location</th>
<th>Team Member</th>
<th>Procedure</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Law Enforcement Offices</td>
<td>Law Enforcement Investigator</td>
<td>Call a briefing about the upcoming investigation. Invite Child Protective Services, a prosecutor and the Yavapai Family Advocacy Center, time and circumstances permitting.</td>
<td>At a time determined appropriate by Law Enforcement</td>
</tr>
<tr>
<td>Law Enforcement Offices</td>
<td>Law Enforcement Investigator(s)</td>
<td>At the initial stages of a drug investigation where there are indications of suspected child abuse, the Investigator should contact a Child Crimes Supervisor, if available.</td>
<td>At a time appropriate to make the Officer a part of the investigation</td>
</tr>
<tr>
<td>On-site</td>
<td>Law Enforcement Investigator</td>
<td>Law Enforcement Investigator facilitates immediate contact with local CPS or contacts the CPS hotline.</td>
<td>Upon arrival</td>
</tr>
<tr>
<td>On-site</td>
<td>Law Enforcement Investigator(s)</td>
<td>CPS will respond to the request for involvement either when directly contacted by Law Enforcement or through the child abuse hotline. The CPS Hotline MUST be called and the report made as soon as appropriate information is obtained. CPS will check for prior reports in the CPS registry.</td>
<td>Within two working hours</td>
</tr>
<tr>
<td>On-site</td>
<td>Law Enforcement Investigator(s)</td>
<td>Locate the child victim and assess the child's immediate need for medical attention. This may be done in concert with the medically trained personnel (EMT/paramedics) who are on site. If child's needs are emergent, call 911.</td>
<td>Immediately</td>
</tr>
<tr>
<td>On-site</td>
<td>Law Enforcement Investigator(s)</td>
<td>Separate the victim from the suspects at the location and safeguard the child out of view of the suspects if possible. Ensure photographs are taken, prior to searching or removal of any evidence. Identify the parents and obtain biographical information on suspects, caregivers and witnesses. Dress the child victim in protective clothing (Tyvex suit) to prevent exposure to CPS staff, investigators and others.</td>
<td>As soon as appropriate within the investigation process</td>
</tr>
<tr>
<td>On-site</td>
<td>CPS Worker</td>
<td>Protective suit or other protective covering such as shoe covers, gloves, and masks should be worn at the site. All protective covering should be disposed of at the site. Check with the Lead Officer for disposal method.</td>
<td>As appropriate</td>
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<tr>
<td>On-site</td>
<td>Law Enforcement Officer(s)</td>
<td>Clothing, toys, baby bottles, food or drink shall not be removed from the scene, as these items are likely contaminated.</td>
<td>Not applicable</td>
</tr>
<tr>
<td>On-site</td>
<td>Law Enforcement Investigator and CPS Worker</td>
<td>Conduct a brief interview (if possible) of the child that includes determination of the following: primary caregiver, child's knowledge of the drug manufacturing process, victim's living area in relation to the lab, medical problems, and school attendance. The child's height and reach should be measured. The brief interview should be recorded. CPS may be present at the interview. If the child needs to be removed from the caregiver's care, serve a temporary custody notice. Transport the child to the Advocacy Center or medical facility, and later to placement.</td>
<td>As soon as appropriate within the investigation process</td>
</tr>
<tr>
<td>On-site</td>
<td>CPS Worker</td>
<td>CPS and/or Law Enforcement Investigator will transport the child to the Advocacy Center if possible, or to medical facilities for additional medical assessment. CPS will make arrangements with Medical Personnel for appointments. Following the medical assessment a complete forensic interview is to be conducted and recorded, if possible at the Advocacy Center.</td>
<td>Initial exam should be set up within 12 hours of contact with child if possible, ideally 3 hours after contact</td>
</tr>
<tr>
<td>On-site</td>
<td>CPS Worker</td>
<td>Work with the appropriate agencies to identify a placement for the child. Prior to transporting the child to the medical exam or placement, the CPS worker must notify the Law Enforcement Officer of the intent to leave with the child and provide information about where the child is being placed. Complete any other on-site investigation necessary with the assistance of Law Enforcement. (In general, the law enforcement officer that has initiated the investigation is the lead individual at the site.) CPS staff should coordinate entry into the lab site with this individual to ensure no disruption or contamination of evidence. If possible, obtain birth &amp; medical information from</td>
<td>As soon as is appropriate</td>
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<tr>
<td>Location</td>
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<tr>
<td>At the most appropriate location, when needed</td>
<td>CPS Worker and/or Law Enforcement Investigator</td>
<td>If possible, make arrangements for a urine sample to be obtained from the child or other means for testing the child for the presence of meth such as Cozart, which will be used by Law Enforcement or physicians. Urine samples should be labeled with date, time, child's name, and investigator's name and brought to the Medical Personnel who will be conducting the examination.</td>
<td>As soon as is practical, preferably within 12 hours from initial involvement, ideally within 3 hours of contact</td>
</tr>
<tr>
<td>At Family Advocacy Center, medical facility or child's point of placement</td>
<td>CPS Caseworker</td>
<td>Staff from Yavapai Family Advocacy Center is available to assist law enforcement to safeguard children until CPS arrives at scene.</td>
<td>As soon as is practical</td>
</tr>
<tr>
<td>On-site</td>
<td>Law Enforcement Investigator</td>
<td>Diagram and measure all the rooms at the site. Note if the child had access to the lab. Identify hazards to the child and inform medical personnel. Measure and photograph the child's belongings in proximity to the hazards. Handling of Evidence: The clandestine meth lab investigator will retain the evidence. Toys, food and any other items found in proximity to the chemicals should be included in the items to be tested by a crime lab (usually the DPS Lab). Surveillance equipment, weapons, explosives will be noted, photographed, and measured. Document if the weapons were loaded or the explosives were live. Complete Child Abuse report that includes CPS notes, medical records, autopsy reports, diagrams, and photographs and submit to the appropriate Law Enforcement offices.</td>
<td>Not Applicable</td>
</tr>
<tr>
<td>Law Enforcement Offices</td>
<td>Law Enforcement Investigator</td>
<td>Follow-up with Medical Personnel about findings and test results and with CPS concerning medical placement, and follow-up medical evaluations.</td>
<td>As soon as is practical</td>
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<tr>
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<tr>
<td>At Advocacy Center, medical clinic or child's point of placement</td>
<td>CPS Worker and/or Law Enforcement Investigator</td>
<td>Follow the appropriate protocol for evidence collection.</td>
<td>As soon as is practicable</td>
</tr>
<tr>
<td>At Advocacy Center, medical clinic or child's point of placement</td>
<td>CPS Worker and/or Law Enforcement Investigator and/or Victim Witness</td>
<td>The Instructions for Care Givers of Children Exposed to Methamphetamine Laboratories should be provided to the caregiver concerning how to bathe the child and how to handle clothing and the Tyvex suit.</td>
<td>As soon as is practicable</td>
</tr>
<tr>
<td>At Advocacy Center or medical clinic</td>
<td>CPS Worker and/or Law Enforcement Investigator</td>
<td>Ensure that the child receives an initial medical examination. Obtain child's medical history, either from CPS, Law Enforcement Investigator, or from caregiver.</td>
<td>Preferably within 12 hours of identification; ideally within 3 hours</td>
</tr>
<tr>
<td>At Advocacy Center or medical clinic</td>
<td>Medical Personnel</td>
<td>Administer tests &amp; procedures. Insure urine sample was gathered/ Request Urine Screen. Perform complete pediatric exam. Emphasis to be placed on neurological screen, respiratory status, &amp; cardiovascular status. Required evaluations include: vital signs, height, weight. Head circumference to be measured for children less than two years &amp; arm span and reach for those less than five years. Optional tests: CBC, Liver Function, Oxygen Saturation, Electrolytes &amp; Kidney Function, Complete Metabolic Panel, Pulmonary Function Tests, Chest X-Ray, Skeletal Survey for children less than three years when physical abuse is suspected, &amp; Heavy Metals Screen. Conduct Suspected Child Abuse and Neglect Screen. Provide a behavioral health referral if appropriate.</td>
<td>Preferably within 12 hours of identification</td>
</tr>
<tr>
<td>At Advocacy Center or medical clinic</td>
<td>CPS Worker and/or Law Enforcement Investigator</td>
<td>Secure release of the child's medical records to appropriate authorities (CPS, Law Enforcement)</td>
<td>Preferably within 12 hours of identification</td>
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<tr>
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<tr>
<td>CPS staff location</td>
<td>CPS Worker</td>
<td>Identify the ongoing CPS Worker to whom the case will be transferred and notify the Law Enforcement Investigator.</td>
<td>Within 30 days</td>
</tr>
<tr>
<td>CPS staff location</td>
<td>CPS Investigative or Ongoing Worker</td>
<td>The CPS Investigative or Ongoing Worker is responsible for ensuring that the child is seen for follow up examinations and informing the Law Enforcement Investigator of medical findings. (This is a CPS responsibility where &amp; when CPS is involved, but when the child is not in CPS custody it becomes a Law Enforcement responsibility).</td>
<td>2-4 weeks after initial medical visit</td>
</tr>
<tr>
<td>At Advocacy Center or medical clinic</td>
<td>CPS Worker</td>
<td>Insure that Medical Personnel conduct reevaluation of the comprehensive health status of the child. Insure that Medical Personnel conduct formal development assessment on child less than six years of age using the CPS required Developmental Screening Tool.</td>
<td>2-4 weeks after initial medical visit</td>
</tr>
<tr>
<td>At Advocacy Center or medical clinic</td>
<td>CPS Worker</td>
<td>Insure that Medical Personnel follow-up on any abnormal screening laboratory tests, or administer screening laboratory tests as indicated. Arrange for appropriate follow-up as indicated. Evaluate adequacy of placement with regard to medical needs.</td>
<td>2-4 weeks after initial medical visit</td>
</tr>
</tbody>
</table>
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Appendix A:
Resource Information

WEBSITES

American Council for Drug Education: http://www.acde.org

Arizona Revised Statutes: http://www.azleg.state.az.us/ars/ars.htm

Arizona Attorney General DEC Protocol Website: http://www.azag.gov/DEC/

California Department of Justice and the California Narcotic’s Officer Association: http://stopdrugs.org/

Child Help USA: http://www.childhelpusa.org


Clandestine Meth Lab Investigator’s Association: http://www.clialabs.com


Colorado’s Alliance for Drug-Endangered Children: http://www.nmtf.us/colodec/colodec.htm

Crystal Meth Anonymous: http://www.crystalmeth.org

Drug-Endangered Children Resource Center: www.decreresourcecenter.org

Koch Crime Institute (KCI): http://www.kci.org

MATForce (Yavapai County Methamphetamine Advisory Task Force): http://www.matforce.org

National Crime Prevention Council: http://ncpc.org

National Clearinghouse for Alcohol and Drug Abuse Information 1-800-729-6686: http://www.health.org


Riverside County California, Drug-Endangered Children Program: http://dec.co.riverside.ca.us/

U.S. Department of Justice, Office for Victims of Crime: http://www.ojp.usdoj.gov/ove


**MEDICAL SOURCES**

Center for Disease Control CDC: http://www.cdc.org


Illicit Methamphetamine and Amphetamine Laboratories: http://www.publichealth.arizona.edu/divisions/envirocom/meth_literature.htm

**MEDICAL RESPONSE**


**WRITTEN SOURCES**


Child Abuse and Training and Technical Assistance Centers, California Institute on Human Services, Sonoma State University, 1801 E. Cotati Ave., Rohnert Park, California 94928, 707.664.2416.

*Methamphetamine Laboratories, A Prosecutor’s Guide.* Los Angeles County District Attorney’s Office, Barbara Turner, Assistant Head Deputy, Major Narcotics Division.

*Child Abuse in Meth Labs.* Detective Tim Ahumada, Phoenix Police Department Crimes Against Children Detail.

Appendix B: Arizona Statutes

The following provides an overview of statutes relevant to the DEC program. The complete Arizona Revised Statutes can be found at [http://www.azleg.state.az.us/ars/ars.htm](http://www.azleg.state.az.us/ars/ars.htm).

There are several laws that apply to the operation of a clandestine meth lab (drug laws and environmental laws), and where children are involved, child abuse laws. Like many other states, Arizona law requires a mandatory prison sentence when there is a conviction for methamphetamine production. Manufacturing dangerous drugs in the presence of children, especially young children, can dramatically increase the penalties incurred from the drug charges.

In July 2000, Arizona’s child abuse law, A.R.S. §13-3623, was expanded to add a provision that provides a presumption of endangerment when children or vulnerable adults are discovered at clandestine meth lab scenes. This addition to Arizona law essentially creates strict liability when a person places a child in a location where a clandestine meth lab is present.

**Child Abuse:**

A.R.S. §13-3623, Child or vulnerable adult abuse; emotional abuse; classification; exception; definitions, (C) provides: For the purposes of subsections A and B of this section, the terms “endangered” and “abuse” include but are not limited to circumstances in which a child or vulnerable adult is permitted to enter or remain in any structure or vehicle in which volatile, toxic or flammable chemicals are found or equipment is possessed by any person for the purpose of manufacturing a dangerous drug in violation of A.R.S. § 13-3407, subsection A, paragraph 4.

**Drug Offenses:**

A.R.S. §13-3407, Possession, use, administration, acquisition, sale, manufacture or transportation of dangerous drugs; classification: defines the class of felony for a variety of drug related crimes.

A.R.S. §13-3401, Drug Offenses, definitions: provides definitions for drugs and substances and other related terminology, including the definition of manufacture.

A.R.S. §13-3404.01, Possession or sale of precursor chemicals, regulated chemicals, substances or equipment: exceptions and classifications: defines the class of felony related to precursor chemicals and related items. Pseudoephedrine is a precursor chemical to the manufacture of methamphetamine. Regulated chemicals include Iodine and Red Phosphorous.
A.R.S. Section 13-712, **Sentence for certain drug offenses:** provides for mandatory prison upon the conviction of manufacturing, transporting or trafficking methamphetamine.

**Environmental Laws:**

Effective July 1, 2003, A.R.S. §12-1000, **Clandestine drug laboratories; notice; cleanup; residual contamination; civil penalty; immunity; restitution; violation; classification:** indirectly supports the child abuse law. In summary, this law makes it unlawful for any person other than the owner, landlord or manager to enter the property where dangerous drugs were being manufactured until it is cleaned of residual contamination by a state approved drug laboratory site remediation firm. This law ensures that CPS will not be returning a child to a residence that operated as a drug lab, at least until it is determined safe by strict standards. This law also protects the public, who knowingly or otherwise would become residents of a former drug lab where residual contamination from the manufacturing of dangerous drugs remained.

Effective June 11, 2003, A.R.S. §12-1001, **Joint legislative oversight committee on residual contamination of drug properties:** was established to submit a report of findings and provide recommendations to the Governor, President of the Senate and the Speaker of the House of Representatives about the effectiveness of the program established by A.R.S. §12-1000.

A.R.S. §12-990, **Article 12, Abatement of crime property:** became effective June 2003, and defines clandestine drug laboratory, drug laboratory site remediation firm, various drugs, and criteria for contamination.
Appendix C: Exposing Children to Clandestine Meth Labs is Child Abuse

Exposure to clandestine meth lab manufacturing can harm anyone, but is particularly dangerous to children. This is why once discovered, children who live in clandestine meth labs need special and immediate attention from a variety of professionals including medical, legal, and child welfare. The dangers include contamination, fire and explosions, child abuse and neglect, hazardous living conditions, and other social problems.

Contamination: One of the greatest dangers of a clandestine meth lab is contamination. Contamination can occur in a number of ways; through the skin, soiled clothing, household items used in the lab, second hand smoke and ingestion. Children living in clandestine meth labs are more likely than adults to absorb more of the chemicals into their bodies because of their size and higher rates of metabolism and respiration.

The chemicals used to produce the illegal drugs are often stored in unlabeled food and drink containers on floors and countertops placing toddlers and infants at increased risk of harm due to normal child behaviors such as putting their hands and other objects into their mouths, crawling, and playing on floors. Poor ventilation due to attempts to seal in smells and add privacy increases the likelihood of inhaling toxic fumes. It is common for children living in and around clandestine meth labs to be exposed to waste byproducts dumped in outside play areas. While much remains to be learned about the long-term medical consequences of drug manufacturing exposure in childhood, potential damage from chemical exposure includes anemia, neurological symptoms, and ongoing respiratory problems.

Fires and Explosions:

Many clandestine meth labs are discovered as a result of fires or explosions. Even without a heat source, fires can start from chemical vapors and spread very quickly. For instance, plugging in an appliance near lab fumes presents a danger of fire. Young children are less likely than adults to escape from or survive a clandestine meth lab fire or explosion. This is not only because of their age and lack of mobility, but because their caretakers are often drug dependent and do not attempt to, or may not have the capacity to, save them.

Child Abuse and Neglect:

The presence of clandestine drug manufacturing is often accompanied by increased risk of other problems such as domestic violence; severe physical neglect (i.e., lack of food, medical, and dental care and appropriate supervision); emotional neglect; and physical and sexual abuse. Children who live in clandestine meth labs experience chaotic home environments, with poor supervision, and adult role models who are involved in criminal behaviors. The use of illicit drugs and heavy alcohol use affect caregiver judgment, putting children at increased risk of
abuse and neglect. Many children who live in clandestine meth labs are also exposed to pornographic material and overt sexual activity.

**Hazardous Living Conditions:**

Hazardous living conditions and filth are common in home-based clandestine meth labs. Play, sleep and eating areas may be infested with rodents and insects. Rotten food, used needles, dirty clothes and dishes, animal feces, and garbage piled on floors and counters, are commonly found by investigating officers. Drug paraphernalia such as razor blades, needles, and pipes are often within a child’s reach. Explosives and booby traps are used to protect the clandestine meth lab from discovery. Booby traps can include hidden sticks with exposed nails or spikes, and switches wired to explosives. Firearms have been found at some clandestine meth labs, loaded and in easy-to-reach locations. Children may be shocked or electrocuted from exposed wires or as a result of unsafe electrical practices used in the clandestine manufacturing process. Dangerous dogs used to protect the premises from intruders can also pose physical danger to the children.

**Social Problems:**

Children living in clandestine meth labs often experience stress and trauma that can affect their behavioral, emotional, and cognitive functioning. They often exhibit low self-esteem, a sense of shame, and poor social skills. Many have attachment problems and are not emotionally bonded to a parent or other caring adult. Symptoms of attachment disorder include an inability to trust, form healthy relationships, and adapt to change. Consequences may include mental health problems, delinquency, teen pregnancy, school failure, isolation and poor peer relations. The problems the children encounter may lead them to model their parents’ drug use, thus perpetuating the cycle.

*(Adapted from the following sources: the Arizona Statewide Protocol, 2003; Karen Swetlow, June 2003, Children at Clandestine Methamphetamine Labs: Helping Meth’s Youngest Victims, OVC Bulletin, pp. 1-10; Clair Keithley, Deputy District Attorney, Butte County, Theories of Child Endangerment)*
<table>
<thead>
<tr>
<th>Location</th>
<th>Procedure</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>At Advocacy Center or medical clinic</td>
<td>Obtain child's medical history, either from CPS or from caregiver.</td>
<td>Within 12 hours of identification, preferably within 3 hours</td>
</tr>
<tr>
<td>At Advocacy Center or medical clinic</td>
<td>Administer test and procedures. Ensure that urine sample was gathered. Request Urine Screen. Perform complete pediatric exam and include as much of the Early Periodic Screening, Detection and Treatment (EPSDT) Protocol as 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. Arm span and reach for all children less than five years old. Optional tests as medically necessary including CBC, Liver Function, Electrolytes and Kidney Function, Complete Metabolic Panel, Pulmonary Function Tests, Chest X-Ray, Skeletal Survey for children less than three years of age when physical abuse is suspected, Oxygen Saturation, and Heavy Metals Screen.</td>
<td>Within 12 hours of identification, preferably within 3 hours</td>
</tr>
<tr>
<td>At Advocacy Center or medical clinic</td>
<td>Conduct Suspected Child Abuse and Neglect Screen.</td>
<td>Within 12 hours of identification, preferably within 3 hours</td>
</tr>
<tr>
<td>At Advocacy Center or medical clinic</td>
<td>Provide a behavioral health referral if appropriate.</td>
<td>Within 12 hours of identification, preferably within 3 hours</td>
</tr>
<tr>
<td>At Advocacy Center or medical clinic</td>
<td>Secure release of the child's medical records to appropriate authorities (CPS, Law Enforcement)</td>
<td>Within 12 hours of identification, preferably within 3 hours</td>
</tr>
<tr>
<td>At Advocacy Center or medical clinic</td>
<td>Conduct reevaluation of the comprehensive health status of the child.</td>
<td>2-4 weeks after initial medical visit</td>
</tr>
<tr>
<td>Location</td>
<td>Procedure</td>
<td>Timeline</td>
</tr>
<tr>
<td>----------------------------</td>
<td>---------------------------------------------------------------------------</td>
<td>-----------------------------------------------</td>
</tr>
<tr>
<td>At Advocacy Center or medical clinic</td>
<td>Conduct formal development assessment on child less than six years of age using the Denver Developmental Screening Tool.</td>
<td>2-4 weeks after initial medical visit</td>
</tr>
<tr>
<td>At Advocacy Center or medical clinic</td>
<td>Follow-up on any abnormal screening laboratory tests, or administer screening laboratory tests as indicated.</td>
<td>2-4 weeks after initial medical visit</td>
</tr>
<tr>
<td>At Advocacy Center or medical clinic</td>
<td>Arrange for appropriate follow-up as indicated.</td>
<td>2-4 weeks after initial medical visit</td>
</tr>
<tr>
<td>At Advocacy Center or medical clinic</td>
<td>Evaluate adequacy of placement with regard to medical needs.</td>
<td>2-4 weeks after initial medical visit</td>
</tr>
</tbody>
</table>

From the Arizona Statewide DEC Protocol, 2003
Appendix E:
Clandestine Meth Lab Procedures
for P.A.N.T.

Drug detective is the case officer for the crime scene, working with the assigned Clandestine Lab Safety Officer. Safety is a priority in responding to a clandestine meth laboratory. To this end, law enforcement responding to a clandestine drug lab site shall adhere to the following guidelines:

1) Contact Department of Public Safety (DPS) at 928 773-3600
   - Contact the on call Duty Officer
   - Explain that you need a Clandestine Drug Lab clean up
     - The Duty Officer will either transfer you or give you contact information for the DPS Hazmat Team
     - The DPS Hazmat Team Leader will put together a team consisting of DPS Hazmat, DPS Crime Lab, and DPS EOD  *Crime lab will not enter without clearance of structure by EOD

   DPS Hazmat Team   Ken Morris  Cell phone: 602 320-2778
                      Jan Dover  Work phone: 602 644-5962

   DPS Crime Lab   928 773-3687
                   928 773-3646

2) Contact Drug Enforcement Agency (DEA) at 602 664-5600
   - Obtain clandestine drug lab authorization clean-up number. Contacts at DEA are Mike Capass (602 664-5741) or Donna Van Gury (602 664-5977)
   - DEA will contact a clean-up agency that will get the assigned clean-up number.
     - Obtain the assigned clean-up number by contacting the clean-up agency
     - Obtain copies of the Uniform Hazardous Waste Manifests from clean-up agency.
     - The clean-up agency will remove excess materials after investigator is completed and transport to their storage facility. Case officer will sign the agency’s form and maintain a copy.
     - DEA generally contracts with Kary Environmental Services, Inc., at 480 560-3085

3) Notify municipal or county zoning inspector of the location of the clandestine drug lab for posting as condemned building until property is cleaned up.

4) On-Scene Procedures:
   - Evacuate and secure the area and perimeter and keep all unnecessary persons from entering.
• A staging area for the Lab Trailer will be selected, and the trailer will be brought to the location, upwind of the lab.
  o Plastic sheeting will be placed inside the HOT zone for placement of Hazmat materials that are removed from the structure.
  o PANT will suit up one to two officers, with SCBA on and mask off, standing near entrance
  o Personnel protection suits, booties, gloves, etc will be staged for use by entry and processing teams
  o Self-contained breathing apparatus will be prepared for use
• DPS EOD and Hazmat
  o Hazmat will test the structure for air quality, 02 percent and Low Explosive Level.
  o If an explosive atmosphere is detected, the structure should be ventilated by opening windows and doors and officer should be advised of results.
  o EOD will search for any explosive devices or hazards
• DPS Crime Lab procedures
  o Crime lab personnel will set up tables to gather and secure evidence
    ▪ If Crime Lab estimated time of arrival is lengthy, material requiring testing may be brought outside and placed on the plastic, unless environmental factors such as weather counsel against this.
    ▪ Samples will be turned over to PANT detectives
    ▪ Surplus materials will be placed on plastic sheeting inside the Hot Zone for later disposal
  o Materials requiring crime lab testing will be removed from the structure to ensure safety to PANT personnel
    ▪ Personnel must wear protective clothing, booties, gloves and eye protection. A respirator of SCBA will be worn if the material being removed requires it.
• PANT Detective Procedures
  o Crime scene photos must be taken by PANT detectives prior to collection of evidence by DPS Crime lab
  o Non-lab evidence, drugs, paraphernalia, guns, etc., will be processed in accordance with PANT procedures after the clandestine meth lab has been cleaned up or items removed from structure.
  o Materials brought to the chemist table will be photographed by the chemist and by PANT detective with the item number and DR displayed.
  o Evidence samples taken by CPS crime lab will be impounded as evidence with notation that it was received from the crime lab. Samples must be sent to Phoenix crime lab for testing.

SAFETY PRECAUTIONS
• Do not hurry. Take your time removing materials from structure.
• Carry only one container at a time to prevent spilling and/or contaminating personnel or mixing reactives and explosives.
• Do not carry containers with one hand or by the top. Use both hands with a hand on the bottom and a hand on the top.