

DEPARTMENT OF SOCIAL SERVICES

CHILDREN'S DIVISION  
P.O. BOX 88  
JEFFERSON CITY, MISSOURI

July 12, 2005

M E M O R A N D U M

**WHAT'S INSIDE:**

- Revision of Methamphetamine Policy and Procedure
- Development of Local Emergency Meth Protocols

TO: REGIONAL EXECUTIVE STAFF, CIRCUIT MANAGERS AND CHILDREN'S DIVISION STAFF

FROM: FREDERIC M. SIMMENS, DIRECTOR

SUBJECTS: POLICY AND PROCEDURE REGARDING REMOVAL OF CHILDREN FROM RESIDENCES WITH METHAMPHETAMINE LABS

ADDITIONAL CAN-1 CODING FOR METH UNDER  
*REPORTER'S DESCRIPTION/WORKER SPECIFIC FINDINGS*

REVISIONS: CAN-1 CODE SHEET AND INSTRUCTIONS

*CHILD WELFARE MANUAL* REVISIONS:  
Section 2, Chapter 4.1.6 and Chapter 4.2  
Section 2, Chapter 4, Attachment J  
Section 7, Chapter 27

DISCUSSION:

The purpose of this memorandum is to introduce revised *Child Welfare Manual* policy and procedure regarding the Division's response to child abuse/neglect reports that involve active methamphetamine labs. This policy was developed in response to growing concerns about the safety and well-being of children and families who are exposed to the dangers associated with methamphetamine use and production as well as the safety of staff, and other professionals who work with them. It is the result of valuable information and input from Children's Division field staff, existing protocols in other states, the National Alliance for Drug Endangered Children (DEC) and Missouri's Meth Initiative.

Methamphetamine laboratories that produce illicit drugs operate with little or no safety precautions and pose significant risk to families and children exposed to these conditions as well as to Children's Service Workers or other agencies who provide in-home services to families. Immediate dangers include:

- Fire
- Explosion
- Inhalation of harmful fumes
- Skin contact with dangerous chemicals

Exposure to chemicals found in Meth laboratories without proper protection can cause cumulative damaging effects to the body. Methamphetamine laboratory seizure requires specialized training, detection and safety precautions.

Many products and equipment used in the production of meth do have legitimate uses and separately would not cause concern, but when found in combination and close proximity should alert workers to the possibility of an operational meth lab. It is important for workers to familiarize themselves with the presence of chemicals, products, equipment or other evidence commonly used in the production of methamphetamines. Once the possibility of a meth lab is identified workers should know the appropriate steps to initiate an emergency response protocol.

### **Developing a Multi-Agency Emergency Response Protocol**

The first step to initiating an emergency response protocol is to have one in place. An emergency response protocol for the removal of children from a meth lab should be developed and implemented by a multi-disciplinary team within the local community. This policy is meant to guide workers in the development of a community-based partnership with all of the agencies involved in the initial response. Specific community resources, facilities and pre-existing protocols should be assessed and built upon to create unified multi-agency approach. Additionally, there are general guidelines for workers to address meth related issues when working with children and families during the investigation/family assessment process effectively, while maintaining a high standard of caution and safety.

### **CAN-1 Reporter's Description/Worker's Finding Code for Meth:**

An additional code: "P1---Meth Lab Exposure" has been added to the CAN-1 and CAN-1 code sheet under the heading *Reporter's Description/Worker's Specific Findings*. This should be used as a *Worker Finding* for investigations when by a preponderance of evidence a determination was made that an individual with care, custody or control of a child had an active lab at the child's residence or knowingly allowed the child to be exposed to the hazardous chemicals associated with meth production.

NECESSARY ACTIONS:

1. Please review this memorandum with all Children's Division Staff.
2. Review revised CAN-1 [Code sheet and Instructions](#).
3. All questions should be cleared through normal supervisory channels and directed to:

PDS CONTACT:  
Randy McDermit, PDS  
573-751-8932  
[Randall.D.Mcdermit@dss.gov.mo](mailto:Randall.D.Mcdermit@dss.gov.mo)

PROGRAM MANAGER:  
Kathryn Sapp  
573-522-5062  
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*CHILD WELFARE MANUAL* REVISIONS:

[Section 2, Chapter 4.1.6 and Chapter 4.2](#)  
[Section 2, Chapter 4, Attachment J](#)  
[Section 7, Chapter 27](#)

RELATED STATUTE:

[Chapter 210 RSMo](#)

ADMINISTRATIVE RULES:

N/A

COUNCIL ON ACCREDITATION (COA) STANDARDS:

N/A

PROGRAM IMPROVEMENT PLAN (PIP):

N/A

SACWIS REQUIREMENTS:

[http://dssweb/cs/priority\\_tracking/sacwis/status/20050316.xls](http://dssweb/cs/priority_tracking/sacwis/status/20050316.xls)

I. Intake Management

PRESENTATIONS:

[Methamphetamine Progression to Addiction](#)

[Drugs of Abuse Detection: Parents, Children, and Home](#)

[Initial Actions for Handling Contaminated Properties](#)

[Drug Endangered Children: Medical Effects](#)

[Drug Endangered Children's \(DEC\) Coordinator](#)

[Toxicity Levels in a Manufacturing Environment](#)

[Washington State Dep't. of Health Clandestine Drug Lab Program](#)

[National Working Group on Remediation of Methamphetamine Laboratories](#)

[The Neurobiology of Addiction](#)

[Clandestine Drug Issues Related to Decontamination of Properties](#)

[Illegal Drug Operations Site Reporting and Decontamination Act](#)

RELATED LINKS:

Missouri's Methamphetamine Initiative

<http://www.missourimeth.org>

Missouri Division of Alcohol and Drug Abuse 2004 Meth Policy Brief.

(<http://www.missourimeth.org/meth2004.pdf>)

Division of Alcohol and Drug Abuse Service Provider Directory

<http://www.dmh.missouri.gov/ada/help/provdir.pdf>

Colorado Alliance for Drug Endangered Children: DEC Papers

<http://www.colodec.org/decpapers/decpapers.htm>

FMS/RDM