Health and Human Services
Sherri Z. Heller, Ed.D., Director

County of Sacramento

Divisions
Behavioral Health Services
Child Protective Services
Departmental Administration
Primary Health Services
Public Health
Senior and Adult Services

September 23, 2015

Mr. Will Lightbourne
Director
California Department of Social Services
Child Welfare Policy & Program Development Bureau
CSEC Program
744 P Street, MS 8-11-87
Sacramento, California 95814

RE: CSEC Program Memorandum of Understanding (MOU)

Dear Mr. Lightbourne:

Sacramento County Child Protective Services (CPS) is committed to addressing the needs of children and youth who are commercially sexually exploited (CSEC) and earlier this year opted-in as a CSEC participating county. Our County Plan has also been submitted per ACL-15-48.

Sacramento County CPS, as well as system and community partners, formed the CSEC Interagency Steering Committee and hired WestCoast Children's Clinic to provide consultation, technical assistance and project management. Over the course of several months, the Steering Committee developed a comprehensive interagency CSEC protocol and Memorandum of Understanding (MOU), which is enclosed for your review. Additionally, on September 15, Sacramento County Board of Supervisors approved the MOU and adopted the enclosed Resolution No. 2015-0682 regarding CSEC in Sacramento.

We are very excited to launch these efforts to address the needs of the CSEC youth in our county and look forward to learning from our partner agencies and from other counties as we move forward. If you need any additional information, please contact Michelle Callejas at (916) 875-0123 or at CallejasM@saccounty.net.

Sincerely,

Sherri Z. Heller

Enclosures: (2)
1) Memorandum of Understanding Sacramento County Commercially Sexually Exploited Children (CSEC) Program Interagency Protocol
2) Board Approved Resolution No. 2015-0682

c: Michelle Callejas-Deputy Director, Child Protective Services

Attachment 1

Memorandum of Understanding Sacramento County Commercially Sexually Exploited Children (CSEC) Program Interagency Protocol

September 7, 2015

MEMORANDUM OF UNDERSTANDING AMONG

Juvenile Court of Sacramento County, Sacramento County Child Protective Services, Sacramento County Probation Department, Sacramento County Behavioral Health Services, Sacramento County Public Health, Sacramento County Counsel, Sacramento County Public Defender, Sacramento County District Attorney, Sacramento County Sherriff's Department, Sacramento Police Department, Sacramento City Unified School District, Sacramento County Office of Education, Children's Law Center of California – Sacramento, Children's Receiving Home, University of California, Davis CAARE Center and Another Choice, Another Chance

As to Sacramento County's Commercially Sexually Exploited Children (CSEC) Program

WHEREAS, the parties to this Memorandum of Understanding (MOU), Juvenile Court of Sacramento County, Sacramento County Child Protective Services, Sacramento County Probation Department, Sacramento County Behavioral Health Services, Sacramento County Public Health, Sacramento County Counsel, Sacramento County Public Defender, Sacramento County District Attorney, Sacramento County Sherriff's Department, Sacramento Police Department, Sacramento City Unified School District, Sacramento County Office of Education, Children's Law Center of California – Sacramento, Children's Receiving Home, University of California, Davis CAARE Center, Another Choice, Another Chance, have developed the following Memorandum of Understanding (MOU) to guide Sacramento County's approach to serving CSEC; and

WHEREAS, the MOU reflects the commitment of Sacramento County and the parties to the following guiding principles:

A. Commercial Sexual Exploitation of Children:
   a. Must be understood as child abuse and reported as such, and
   b. Children should not be criminalized for their sexual exploitation.
B. Responses to CSEC should be:
   a. Victim-centered,
   b. Trauma-informed,
   c. Strengths-based,
   d. Developmentally appropriate,
   e. Culturally, linguistically, and LGBTQ competent and affirming,
   f. Committed to active efforts that engage CSEC early and often,
   g. Multidisciplinary, individualized, flexible, and timely, and
   h. Data and outcome driven.
   i. Delinquent behavior by commercially sexually exploited children will be responded to with the best interest of the child as the priority.
C. Agency Policies & Procedures should:
   a. Ensure and track cross-system collaboration at the system and individual case level,
   b. Incorporate mechanisms to identify and assess CSEC at key decision points,

c. Address the unique physical and emotional safety considerations of CSEC, and
d. Address unique physical and emotional safety considerations, including vicarious trauma of staff, caregivers, and other relevant support persons.

WHEREAS, the parties agree to form a CSEC Steering Committee to provide ongoing oversight and support to ensure the County agencies and partners effectively collaborate to better identify and serve victims of commercial sexual exploitation and children at risk of becoming exploited; and

WHEREAS, the parties agree to form a multidisciplinary team (MDT), pursuant to California Welfare and Institutions Code Section 16524.7(d)(2) for CSEC, to build on a youth's strengths and respond to his/her needs in a coordinated manner; and

WHEREAS, California Welfare and Institutions Code Sections 18960-18964 states a county may establish a child abuse multidisciplinary personnel team (MDT) within the county to allow provider agencies to share confidential information in order for provider agencies to investigate reports of suspected child abuse or neglect pursuant to California Penal Code Section 11160, 11166, or 11166.05, or for the purposes of child welfare agencies making a detention determination; and

WHEREAS, the parties agree that the information they receive from other parties concerning a child that is obtained during the identification and assessment process or during a multidisciplinary team meeting shall be used solely for prevention, identification, and treatment purposes and shall otherwise be confidential and retained in the files of the entity performing the screening or assessment. Such information shall not be subject to subpoena or other court process for use in any other proceeding or for any other purpose pursuant to California Welfare and Institutions Code Section 18961.7(c); and

WHEREAS, the parties, as defined by law, must comply with mandatory reporting guidelines as defined by California Penal Code Sections 11164 – 11174.3 and report known or suspected child abuse and neglect, which includes sexual exploitation; and

WHEREAS, this MOU defines the mutually agreed upon responsibilities of each of the parties under the CSEC Program, pursuant to California Welfare and Institutions Code Section 16524.7. This MOU is not intended to establish legal duties or otherwise alter the respective responsibilities of the parties;

NOW, THEREFORE, the parties of this MOU set forth the following as the terms and conditions of their understanding:

I. Steering Committee

A. Purpose. In order to ensure Sacramento County effectively implements the CSEC Program, the parties agree to form a Steering Committee. The purpose of the Steering

Committee is to provide ongoing oversight and leadership and to ensure that the Interagency Protocol is operating effectively. The Steering Committee's multi-disciplinary composition facilitates the cross-system collaboration needed to better identify and serve youth who are at risk of or have been commercially sexually exploited.

The steering committee is responsible for:

a. Developing the Interagency CSEC MOU (hereinafter MOU),
b. Implementing the MOU,
c. Overseeing implementation of the MOU,
d. Collecting and analyzing aggregate data related to the MOU,
e. Recommending revisions to the MOU as needed on an ongoing basis,
f. Assessing the sufficiency of CSEC-specific resources in the County,
g. Identifying necessary training and ensuring such training occurs, and
h. Providing an annual report to the State in compliance with State and Federal requirements.

B. Steering Committee Membership. The following parties agree to participate in the Steering Committee and fulfill the responsibilities defined in this MOU:

a. Child Welfare – Lead
b. Probation
c. Behavioral Health (Mental Health and Substance Abuse)
d. Public Health
e. Juvenile Court
f. Children's Law Center
g. District Attorney
h. Public Defender
i. Victim advocate organization
j. County Counsel
k. Direct legal and service providers
l. Sacramento City Unified School District
m. Sacramento Sherriff's Department
n. Sacramento Police Department
o. UC Davis CAARE Center
p. Children's Receiving Home
q. Another Choice Another Chance
r. Sacramento County Office of Education
s. Staff/administrative support from parties to the MOU

C. Steering Committee member responsibilities. Each party will fulfill the following responsibilities as part of its work on the Steering Committee under this MOU:

a. Appoint director or designee empowered to make decisions on behalf of the party to participate,
b. Attend regularly scheduled meetings and participate collaboratively in committee,

c. Report on successes, barriers to providing services, and areas for improvement, including recommendations for adapting the MOU and training needs/gaps, and
d. Provide aggregate data on identified CSEC including the numbers identified and the services accessed by those youth.

D. Steering Committee Child Protective Services responsibilities.
Child Protective Services will be responsible for:
a. Convening and serving as lead agency of the Steering Committee,
b. Providing staff to coordinate the Steering Committee, and
c. Gathering aggregate data from the MDTs to present and analyze with Steering Committee.

E. Executive Committee. An Executive Committee shall be formed of representatives from Child Protective Services, Probation, Behavioral Health Services, the Juvenile Court, County Counsel, and Public Health.

The role of the Executive Committee is to:
a. Report to the State information required by California Welfare and Institutions Code Section 16524.7 and the California Department of Social Services.
b. Resolve issues raised by the Steering Committee.
c. Determine appropriate resource allocation of CSEC Program and other funds dedicated to serving CSEC. Final decision-making on use of specific funding sources shall reside with the individual agency that is empowered to access it (e.g. CSEC Program Funding will be accessed by Child Protective Services).
d. After presenting to and consulting with the Steering Committee any proposed changes, amend the MOU as necessary. A majority of the Executive Committee members must agree to an amendment.
e. Report to the Board of Supervisors.

II. Process for Screening for and Identifying Commercial Sexual Exploitation

A. Phase 1: The following parties are participating in the WestCoast Children's Clinic Commercial Sexual Exploitation Identification Tool (CSE-IT) pilot project. These parties are responsible for screening youth over the age of 10 to identify whether they have been commercially sexually exploited, are being commercially sexually exploited, or are at risk of becoming commercially sexually exploited. The parties responsible for conducting the screening include:
a. Child Welfare Department
i. Child abuse hotline staff
ii. Emergency response investigators
iii. Case carrying social workers
iv. Centralized Placement Services Unit
v. Extended Foster Care Unit
b. Probation Department
i. Youth Detention Facility Officers

ii. Candidacy Assessment Unit
iii. Juvenile Probation supervision
1. Education based supervision
2. CSEC court supervision
iv. Juvenile Court Intake Officers

c. Public Health
i. Public Health is working with WestCoast Children's Clinic to determine how to use the CSE-IT.
d. UC Davis CAARE Center
i. Mental health clinicians
e. Sacramento City Unified School District
i. Mentor advocates
ii. Youth Development Support Program
iii. Prevention and Intervention school-based counselors and social workers
iv. Foster Youth Services
f. Children's Law Center of California
i. Dependency attorneys
ii. Investigators
iii. Peer advocates
g. Children's Receiving Home
i. Shelter staff
ii. Residential program clinicians

B. Phase II: Upon completion of the pilot/validation phase, the parties named above, as well as additional Sacramento County organizations serving CSEC, will develop a plan to expand the screening protocol system-wide.

C. Screening Tool:
a. All parties participating in the pilot have received and reviewed a copy of the CSE-IT, including an overview of the tool, and understand the training required for use.
b. A copy of the tool and overview are attached as an appendix to this MOU.

III. First Responder Protocol

In addition to routine screening, CSEC may be identified through contact with public safety and other mandated reporters. The parties agree that children who are suspected or identified victims of sexual exploitation and where an imminent risk to safety is present, require an immediate crisis response including initial engagement within 2 hours, a child abuse investigation, and intensive services through the first 72 hours to stabilize them. Services may take place at Child Protective Services' Centralized Placement Services Unit, co-located at Children's Receiving Home. As described in Section V. Immediate Consult MDT, public safety, Child Protective Services, and Probation will immediately consult on the appropriate responding agency for individual youth.

The purpose of the First Responder Protocol is to immediately engage and stabilize the child and develop a safety plan that meets his/her needs in a coordinated manner, including:

a. Responding to the child's location within 2 hours,
b. Providing individual case-by-case collaboration with multiple child-serving agencies as needed,
c. Engaging with youth and family/caregiver(s), if appropriate,
d. Ensuring basic needs are met, such as food, shelter, and clothing,
e. Assessing and addressing immediate medical needs,
f. Advising on appropriate placement, and
g. Transporting the child to designated placement.
h. Contacting law enforcement as soon as possible if you believe a crime has been committed.

Roles and Responsibilities: Each party will fulfill the following responsibilities as part of its First Responder role:

A. Public Safety:

Public Safety Agencies in Sacramento County, including Sacramento County Sheriff's Department and City of Sacramento Police Department, will identify youth suspected or known to be commercially sexually exploited in a variety of circumstances, including patrol, conducting planned operations, or in the course of making an arrest.

As mandated reporters, public safety officers must report suspected child abuse, including commercial sexual exploitation, to the Child Protective Services Child Abuse Hotline (Welf. & Inst. Code § 300(b)(2).

Roles and responsibilities:

a. Be familiar with signs and symptoms of commercial sexual exploitation.
b. Follow internal protocols for initial investigation.
c. Assess the urgency of medical needs. If the situation warrants, follow policies for temporary involuntary commitment under the Lanterman-Petris Short Act. (Cal Welf. & Inst. Code § 5150 et. Seq.).
d. If there is evidence of a sexual assault or the child appears to need immediate treatment for any other reason, follow Department protocols, including determining the responsibility for transporting the youth to the emergency room or Sutter Children's Center B.E.A.R. Clinic and requesting a forensic exam.
e. File an Emergency Protective Order against the suspect if the youth would like added protection (Cal. Family Code §6250).
f. Ascertain the child's true identity, including real age, using Department protocols if the child reports that he or she is above 18, but there is some indication that the youth is a minor.
g. Decide whether to detain child if the investigation uncovers potential crimes/offenses and follow standard protocols accordingly.

h. Contact child's parent, guardian, or caregiver and notify that child was stopped.
i. Contact the Child Protective Services Child Abuse Hotline to report suspected child abuse.
    i. Notify the Child Abuse Hotline if the officer is charging and detaining the youth based on their discretion.
    ii. Inform hotline staff that a youth identified as commercially sexually exploited has been taken into custody.
    iii. Request child's jurisdictional status from hotline (child welfare, probation, or unknown - see Child Protective Services responsibilities below).
    iv. Participate in Immediate MDT consultation (in person or by phone) with CPS and/or Probation to determine whether youth will be transported to CPS Intake (co-located at Children's Receiving Home), or Youth Detention Facility.
    v. Complete PC 11166 Suspected Child Abuse Report (SCAR), following the Public Safety procedure for other child abuse investigations.
j. Transport youth to designated location based on determination of MDT consultation or decision to charge the youth:
    i. Transport to CPS Intake, co-located at the Children's Receiving Home if the child: a) has no prior system involvement, or b) is a dependent, or c) has 654.2 or 725(a) status and there are no additional criminal violations ***and*** has no open or pending delinquency petitions.
    ii. Transport to the Youth Detention Facility if the child: a) has 602 or 725(b) status or pending juvenile justice petition; or b) if under Law Enforcement's discretion, a charge is to be filed.
    iii. Notify the responding agency if the child will be transported to the hospital.
k. Follow internal protocols to provide all pertinent information to the responding agency to aid in the development of a safety plan and determination of best placement.
l. Notify parents of child's location, if appropriate (Cal Welf. & Inst. Code § 3074(a)).
m. Take the child into temporary custody, without a warrant, following internal protocols, including conducting Immediate Consult MDT described in line j.
n. Following internal protocols, take the child into temporary custody if:
    i. The child is missing from another jurisdiction and there is a missing child report on file with the National Crime Information Center (NCIC); or
    ii. There is an active warrant from another county or state.
o. Follow internal protocols if the child is under the jurisdiction of Sacramento County and there is an active Warrant.

B. Child Protective Services Hotline:

Roles and responsibilities:

a. Receive calls regarding suspected abuse and neglect and follow internal protocols.
b. Discern whether an allegation may involve commercial sexual exploitation,
c. If suspected or confirmed commercially sexually exploited child:
    i. Initiate an immediate ER response.
    ii. Flag the referral as CSEC and enter a Special Projects Code in CWS Screener Alert.
d. Determine jurisdiction (child welfare, probation, or unknown):
    i. Determine whether the child has an open dependency or delinquency case, and
    ii. Contact Probation to determine if child has a pending delinquency petition.
    iii. Request that Probation provide or create the x-reference number and include the number on the CPS screener alert page of the referral.
e. Based on determination of jurisdiction and whether or not Law Enforcement is involved, the referral will be processed as follows:
    i. **Unknown to CWS and Probation/no Law Enforcement involvement**: initiate internal protocol for Immediate 2 hour Emergency Response.
    ii. **Open dependency case/no Probation involvement**: Flag the referral as open to the child's existing social worker. Assign the CSEC referral to an ER CSEC social worker.
        i. Notify child's existing social worker of the CSEC allegation following internal protocol.
        ii. Notify CPS CSEC Coordinator.
        iii. Notify CLC Office Administrator that there has been a contact and provide location of the child.
    iii. **Probation involvement and/or Public Safety is involved**:
        i. The Hotline social worker will elevate the referral to the Hotline supervisor.
        ii. Hotline supervisor will conference call the appropriate staff from Probation and the reporting Public Safety officer (if any).
            i. Between 11am and 11 pm, conference Watch Commander.
            ii. After hours, conference the Supervising Probation Officer.
        iii. The purpose of this call is to provide relevant information to Public Safety officer about child and family background and safety needs. Through the immediate consult MDT a determination will be made about which designated location the child should be taken to (CRH or YDF).

iv. **If the reporting Public Safety officer indicates the child will be charged and taken to the Youth Detention Facility,** open the referral and flag as CSEC and indicate an open Probation investigation.
   i. Notify child's existing social worker of the CSEC allegation following internal protocol.
   ii. Notify CPS CSEC Coordinator.
   iii. Notify CLC Office Administrator that there has been a contact and where the child is.

C. Child Protective Services Emergency Response:

Roles and responsibilities:

a. Respond to the child's location/designated area within 2 hours when:
   i. The youth is not currently under the jurisdiction of any agency, but is alleged to be the victim of abuse, neglect, or exploitation.
   ii. The youth is a dependent pursuant to WIC 300.
   iii. Determined necessary by Immediate Consult MDT (Public Safety, CPS, Probation).
   iv. Safety concerns for child welfare worker have been addressed.
b. Conduct child abuse investigation based on internal protocols.
c. Participate in the Immediate Consult MDT (by phone or at designated area) to:
   i. Decide on a temporary placement,
   ii. Transport the child to the placement,
   iii. Develop a safety plan,
   iv. Schedule a comprehensive medical evaluation and mental health evaluation within 72 hours, and
   v. Determine who will take the youth to the appointment.
d. For youth transported to CPS Intake (co-located at CRH) by Public Safety after hours, initiate investigation and coordinate Initial MDT the following morning.

D. Probation Department

Roles and responsibilities:

a. Interface with the CPS Child Abuse Hotline to provide probation status information.
b. Create x-reference number upon request from Hotline staff.
c. Participate in crisis MDT/consultation with Public Safety officer and Hotline to determine immediate response for youth active to Probation or newly charged.
   a. A Supervising Probation Officer will be available to be conferenced in to Hotline for consultation on immediate safety and placement needs.

IV. Multi-Disciplinary Team Structure

A. The parties agree to provide staff to participate in MDT meetings who have been trained in the prevention, identification or treatment of child abuse and neglect cases, and who are qualified to provide a broad range of services related to child abuse and

commercially sexually exploited children and those at risk for such exploitation. In order to sufficiently address a commercially sexually exploited child's needs from identification through ongoing stabilization, a four-tiered multidisciplinary response, as described below, may be employed. This approach includes:

i. **Immediate Consult MDT**: Rapid response within 2 hours or 23 hours as delineated in section V.
ii. **Initial MDT**: Convening a team within 7 days to address the youth's needs where immediate safety risks may not be present.
iii. **Ongoing MDT**: Ongoing case planning and coordination.
iv. **Multi-agency review committee**: Case review to identify trends, gaps in the services, resolve issues raised by the individual MDTs, and serve as a consultant to case carrying staff as needed. The Steering Committee shall serve as the Multi-Agency Review Committee.

B. The following parties agree to participate in the MDTs pursuant to California Welfare and Institutions Code Section 16524.7 and fulfill their responsibilities as defined in this MOU:

a. Required
   i. Child Protective Services – Lead
   ii. Probation
   iii. Behavioral Health Services
   iv. Public Health
b. The Executive Committee is responsible for identifying non-required parties, as appropriate, to serve on the four tiers of MDTs. Together, the agencies represented on the Steering Committee will determine whether to include additional parties and which to include in the MDTs in order to most effectively meet the unique needs of the child. As the lead agency, Child Protective Services will be responsible for extending invitations to optional parties who may include, but are not limited to, the following:
   i. Youth
   ii. Caregiver/placement provider
   iii. Children's Law Center
   iv. District Attorney
   v. Public Defender
   vi. Public Safety
   vii. Education
   viii. Mental health provider
   ix. Survivor advocate or mentor
   x. Legal service providers
   xi. Victim advocate.

V. Immediate Consult MDT

The purpose of the Immediate Consult MDT is to address immediate placement and safety issues. The following circumstances require an Immediate Consult MDT by the parties below:

a. An Immediate Consult MDT shall be convened by phone or in person within 2 hours when a public safety officer is the first responder or the CPS Child Abuse Hotline receives an allegation for a youth who is active to Probation and needs to determine if the youth should be transported to CPS Intake (co-located at CRH) or YDF. The roles and responsibilities of Public Safety, CPS, and Probation relative to this process are described in the First Responder Protocol.

b. An Immediate Consult MDT shall be convened by phone or in person within 23 hours when there is an immediate placement issue but no safety issue.

A. The following agencies will participate in the Immediate Consult MDT

a. Public Safety

b. Child Protective Services

c. Probation

d. The responsibilities for Child Protective Services, Probation and Public Safety participation in the Immediate Consult MDT are described in the First Responder Protocol.

e. Other parties included in this MOU will be called to the Immediate Consult MDT on an as-needed basis, based on the responding agency's judgment and the needs of the youth. These parties include but are not limited to:

i. Public Health: The appropriate Public Health staff will be included when there is a medical need (which did not need immediate attention at the emergency room or BEAR Center).

ii. Children's Law Center Attorney: When the youth has an open dependency case, the child's CLC Attorney should be contacted and included if available.

iii. Public Defender: When the youth is to be charged, the Public Defender should be contacted and included if available.

iv. District Attorney: When the youth is to be charged, the District Attorney should be contacted and included if available.

v. Behavioral Health or provider designee: When the youth is experiencing a mental health crisis and immediate consult or intervention is needed, contact Behavioral Health to determine the appropriate response to mental health needs:

a. Between the hours of 8:00 am and 5:00 pm, call the Behavioral Health CSEC Liaison.

b. After hours, contact the Behavioral Health 24-hour response team at the Mental Health Treatment Center.

vi. Caregiver/placement provider: When the youth will be returning to placement or an emergency placement is needed.

vii. Victim advocate
viii. Youth: Meaningfully involve the youth in decision-making about placement options.

VI. Initial Multidisciplinary Team

Not all children who are suspected or identified victims of sexual exploitation or trafficking will be in imminent danger, and therefore will not require an Immediate response. For these non-urgent situations, the parties agree to coordinate and participate in an Initial MDT.

A. The Initial MDT is a team of individuals connected to the child's life. The MDT will meaningfully involve youth in planning and decision-making. The purpose of the MDT is to plan for the child's placement, safety, and ongoing service needs. The initial MDT will:

a. Assemble within 7 days,
b. Orient the youth and family to the multidisciplinary teaming approach,
c. Assess and address the child's immediate and long-term needs,
d. Develop and coordinate the service plan.
e. Develop a safety plan with parent/guardian/caregiver that addresses the following:
   i. Potential safety risks for the youth, the family, and/or providers,
   ii. Identifying triggers that may cause a youth to engage in unsafe behavior,
   iii. Identifying coping skills the youth can use to de-escalate,
   iv. Actions team members will take to prevent triggers from occurring,
   v. Documenting responsibilities of team members in the event a youth exhibits unsafe behavior (e.g., if a youth is missing from placement, the parent/guardian will notify law enforcement, the social worker, and the child's dependency attorney, and the social worker will text the youth to maintain communication).

B. An Initial MDT is an appropriate response when there is not an immediate safety risk, but when an adult suspects or identifies that a youth is commercially sexually exploited.

C. The following parties will participate in the Initial MDT as appropriate to meet the needs of the youth:

a. Child Protective Services
b. Probation Department
c. Victim Advocate
d. Public Health
e. Behavioral Health Services
f. Educational Services
g. Youth

h. Parents/Guardians, if appropriate
i. Children's Law Center
j. Public Defender
k. District Attorney
l. Mental Health Provider, including ICC Provider
m. Other persons important to the child
n. BEAR Clinic
o. Court Appointed Special Advocate

D. The responsibilities of each party participating in the **Initial MDT** are as follows:

a. Child Protective Services

i. Hotline:

1. Follow internal protocols and First Responder Protocol when receiving an allegation of commercial sexual exploitation.
2. Inform ER CSEC worker that there is no immediate safety or placement concern when making referral.

ii. Emergency Response

1. ER CSEC field social worker will follow child welfare investigations protocol and set up the Initial MDT in the same way an ER Team Decision Making (TDM) meeting is initiated.

iii. Case-carrying Social Worker:

1. Upon assignment of CSEC case, conduct Katie A. Screening if youth is not connected to mental health services and refer to Child and Family Access Team for mental health assessment and treatment. If youth is already receiving mental health services, contact the mental health provider. For CSEC cases, CPS will request an Intensive Care Coordination - Child and Family Team (ICC-CFT) meeting, which will serve as the Initial MDT.
2. If an ICC Provider has not been assigned by Behavioral Health Services, CPS will convene an Initial MDT, to include the BHS CSEC Liaison.
3. Lead the Initial MDT.

b. Participate in Initial MDTs convened by Probation Department

i. The Probation Department shall hold the Initial MDT during the scheduled weekly MDT meeting.

ii. Refer newly identified CSEC cases to the weekly MDT agenda.

iii. Lead the Initial MDT.

iv. Individual Probation Officers will participate in CPS-led MDTs for youth on informal probation supervision (654.2 or 725(a)).

c. Behavioral Health Services or provider designee

i. Behavioral Health CSEC Liaison will ensure completion of authorization of Katie A. assignment and appropriate mental health services.

ii. Assigned provider will facilitate the ICC-CFT as the Initial MDT and include Child Protective Services.
iii. Participate in the Probation-led weekly MDT.

d. **Public Health:**
i. Participate in the CPS-led Initial MDT when needed.
ii. Participate in the Probation-led weekly MDT.
iii. Provide information and resource packets on reproductive and sexual health.

e. **All Other Parties:**
i. Participate in Initial MDTs as needed and appropriate.

VII. Ongoing Multidisciplinary Team

The parties agree that children who are identified victims of sexual exploitation or trafficking require ongoing multidisciplinary team support to monitor the youth and ensure his/her needs are adequately addressed. Child Protective Services will consult with the youth as to whether he/she wants to participate, or ensure that the ICC Coordinator has consulted with the youth.

A. Hold Ongoing MDT meetings every 90 days with each youth identified as commercially sexually exploited to monitor and support the youth and his/her family as the youth stabilizes. During the Ongoing MDT, members will review the case plan and safety plan, and amend as needed.

B. In addition to regularly scheduled Ongoing MDTs, a meeting should be called when any of the following circumstances or events occur:
a. Youth leaves, is missing, runs away, or is otherwise absent from placement/home/shelter,
b. Youth's placement changes,
c. A new issue emerges in child's life,
d. Child's service needs change, including preparation for step-down to a lower level of care,
e. Youth prepares to testify in court case against exploiter/purchaser,
f. Youth's behavioral health services needs change, including improvement or need for hospitalization,
g. Contact with Public Safety,
h. Violation of probation,
i. Change in court disposition,
j. 90 days prior to dismissal of dependency or completion of probation terms,
k. A member of the MDT identifies a need requiring case plan review or other response.

C. Child Protective Services-led Ongoing MDTs shall be convened during CFT Meetings which occur at least every 90 days. The case-carrying social worker will convene a CFT in the circumstances listed above.

D. Probation-led Ongoing MDTs shall be held at the Wednesday Dedicated Court Calendar Pre-Meeting. Additional participants will be called in as needed to discuss the cases of individual youth.

E. The following parties will participate in the Ongoing MDTs as determined by the convening party:
   a. Child Protective Services
   b. Probation Department
   c. Public Health
   d. Behavioral Health Services-Mental Health Services or mental health provider designee
   e. Behavioral Health Services-Alcohol and Drug Services or ADS provider designee
   f. Educational Services
   g. Victim Advocate
   h. Youth
   i. Parents/Guardians
   j. Children's Law Center
   k. Public Defender
   District Attorney

VIII. Governing Laws and Jurisdiction

This MOU shall be deemed to have been executed and to be performed within the State of California and shall be construed and governed by the internal laws of the State of California. Any legal proceedings arising out of or relating to this MOU shall be brought in Sacramento County, California.

IX. Duplicate Counterparts

This MOU may be executed in duplicate counterparts.

X. Amendment to Add Parties to the MOU

The Executive Committee may invite other parties, agencies or entities to participate in this MOU. Such new parties, agencies or entities shall execute a signature page to this MOU in the same manner as original signatories.

XI. Withdrawal

Any party may withdraw from this MOU. All parties understand that it is preferable that no less than thirty (30) days' notice be given by any party wishing to withdraw from this MOU. Notice shall be deemed served on the date of mailing to the following address:

Michelle Callejas
Deputy Director
Child Protective Services
P.O. Box 269057
Sacramento, CA 95826

XII. Term and Termination

This MOU will be effective immediately upon execution of all parties beginning on the _____ day of _____ 2015 with a phased implementation approach to fully go into effect January 1, 2016. The MOU shall be continuous until terminated by the Sacramento County CSEC Steering Committee.

Sherri Z. Heller, Director
Sacramento County Department of Health and Human Services
Date: 8-31-15

Lee Seale, Chief Probation Officer
Sacramento County Probation Department
Date: 8/28/15

Stacy Boulware Eurie, Presiding Judge
Sacramento County Juvenile Court
Date: 9/2/15

Anne Marie Schubert, District Attorney
Sacramento County District Attorney's Office
Date: 9/2/15

Scott R. Jones, Sheriff
Sacramento County Sherriff's Department
Date: 9/1/15

Samuel D. Somers Jr., Chief
Sacramento Police Department
Date: 9/1/15

Dave Gordon, Superintendent
Sacramento County Office of Education

9/4/15
Date

John Whisenhunt, County Counsel
Sacramento County Department of Counsel

8/28/15
Date

Leslie Starr Heimov, Executive Director
Children's Law Center of California

9-2-15
Date

Michelle Callejas, Deputy Director
Sacramento County Department of Health and Human Services
Division of Child Protective Services

8-31-15
Date

Uma Zykofsky, Deputy Director
Sacramento County Department of Health and Human Services
Division of Behavioral Health Services (Mental Health and Substance Abuse)

8/28/15
Date

Dr. Olivia Kasirye, Public Health Officer
Sacramento County Department of Health and Human Services
Division of Public Health

8/30/15
Date

Mike Shores, Assistant Chief Probation Officer
Sacramento County Probation Department

9/3/15
Date

Traci Lee, Assistant County Counsel
Sacramento County Department of Counsel

9/3/15
Date

Rick Heyer, Supervising County Counsel
Sacramento County Department of Counsel

9-3-15
Date

David Ballard, Chief Executive Officer
Children's Receiving Home

8/31/15
Date

Anthony J. Urquiza, Director
UC Davis CAARE Center

8.28.15
Date

Lesli Lewis, Executive Director
Another Choice Another Chance

9/4/2015
Date

Carol L. Noreen, Executive Director
CASA Sacramento

8/28/15
Date

Paulino G. Durán, Chief Public Defender
Sacramento County Public Defender's Office

8/28/15
Date

José L. Banda, Superintendent
Sacramento City Unified School District

9-1-15
Date

CSE-IT Pilot Data Entry

Today's Date _____ **Location:** _____

Youth code __ __ __ __ __ __ __ __
The client's four-digit birth year + last four of internal case id or XREF#

Service provider code _____(employee id or name)

What is the youth's gender identity?
- ○ Male
- ○ Female
- ○ Other

What best describes the youth's race/ethnicity? **Please check all that apply.**
- ☐ African American or Black
- ☐ Asian
- ☐ American Indian or Alaska Native
- ☐ Hispanic or Latino
- ☐ White or Caucasian
- ☐ Do not know
- ☐ Other (please specify) _____

What is the youth's age? _____

What is the youth's sexual orientation?
- ○ Heterosexual
- ○ Gay
- ○ Bisexual
- ○ Lesbian
- ○ Unknown

Does the youth identify as transgender or transexual?
- ○ Yes
- ○ No
- ○ Unknown

Does the youth have any of the following? **Please check all that apply.**
- ☐ Physical disability or impairment
- ☐ Intellectual disability or impairment
- ☐ Unknown
- ☐ None

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WestCoast Children's Clinic
Commercial Sexual Exploitation Identification Tool (CSE-IT) – Pilot Version

	No Concern 0	Possible Concern 1	Clear Concern 2
1. Instability in Life Functioning. The youth lacks access to basic needs, including stable shelter and is unable to engage in activities expected of her/his age (e.g., school).			
Note: Item ratings ≥ [illegible] indicate *Possible Concern*. Item ratings ≥ [illegible] indicate *Clear Concern*.			
a. Does the youth have a history of running away from home, AWOL, being thrown out of the home?	0	1	2
b. Does the youth experience unstable housing, including multiple foster care placements?	0	1	2
c. Does the youth experience periods of homelessness, including living on the street or couch surfing?	0	1	2
d. Does the youth access social services or community resources to meet basic needs (e.g., hygiene, shelter, food, medical care)?	0	1	2
e. Does the youth miss a lot of school?	0	1	2
f. Has the youth had involvement (currently or in the past) with law enforcement, juvenile justice, or child welfare?	0	1	2
2. Relationships. The youth's relationships are concerning, placing him/her at risk or in danger.	No Concern 0	Possible Concern 1	Clear Concern 2
Note: Item ratings ≥ 2 indicate *Possible Concern*. Item ratings ≥ 4 indicate *Clear Concern*.			
a. Does the youth spend time with people (including family members or peers) known to be involved in the sex trade?	0	1	2
b. Is the youth's parent/caregiver unable to provide adequate supervision?	0	1	2
c. Does the youth have unhealthy or inappropriate relationships (including inappropriate boundaries) with someone much older/an adult?	0	1	2
d. Is the youth in a romantic relationship with someone much older/an adult?	0	1	2
3. Finances and Belongings. The youth has money or materials goods that are incongruent with his/her life circumstances.	No Concern 0	Possible Concern 1	Clear Concern 2
Note: Item ratings ≥ 1 indicate *Possible Concern*. Item ratings ≥ 2 indicate *Clear Concern*.			
a. Does the youth receive or have access to large amounts of cash, credit cards, pre-paid cash cards, hotel keys, gifts, cars?	0	1	2
b. Is the youth's dress or appearance atypical of his/her age or peer group?	0	1	2
c. Is the youth's dress or appearance inconsistent with the weather or situation?	0	1	2
4. Use of Technology. The youth's use of internet, cell phone, or social media involves social or sexual behavior that is atypical for his/her age.	No Concern 0	Possible Concern 1	Clear Concern 2
Note: Item ratings ≥ 3 indicate *Possible Concern*. Item ratings ≥ 5 indicate *Clear Concern*			
a. Does the youth use online sites or apps to find sex partners?	0	1	2
b. Does the youth describe meeting his/her long-term, adult boy/girlfriend on the internet?	0	1	2
c. Does the youth describe meeting in person with a contact developed over the internet?	0	1	2
d. Are there explicit photos of the youth posted on the internet?	0	1	2
e. Does the youth have explicit photos of him/herself on his/her phone?	0	1	2
f. Does the youth have several cell phones, and/or does the youth's cell phone number change frequently?	0	1	2
5. Physical Health. The youth has significant health problems related to sexual activity and lack of access to basic needs	No Concern 0	Possible Concern 1	Clear Concern 2
Note: Item ratings ≥ 3 indicate *Possible Concern*. Item ratings ≥ 5 indicate *Clear Concern*.			
a. Has the youth had repeated testing for pregnancy and/or STIs?	0	1	2

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b. Has the youth been treated repeatedly for STIs?	0	1	2
c. Does the youth describe health problems or complaints that are related to sleep problems or not getting enough sleep (e.g., sleep deprived, unable to get a full night's sleep, sleep is often disrupted)?	0	1	2
d. Does the youth describe health problems or complaints related to poor nutrition or not having access to regular meals?	0	1	2
e. Does the youth have scarring, bruises, burns, etc. that indicate physical trauma?	0	1	2
6. Risk Behaviors. The youth engages in dangerous or risky behaviors.	**No Concern 0**	**Possible Concern 1**	**Clear Concern 2**

Note: Item ratings ≥ 1 indicate *Possible Concern*. Item ratings ≥ 3 indicate *Clear Concern*.

a. Does the youth engage in a dangerous level of risky sexual behaviors, or with partners who are abusive or otherwise physically dangerous?	0	1	2
b. Does the youth spend time where exploitation is known to occur?	0	1	2
c. Does the youth have a history of running away from home, staying away at least overnight?	0	1	2
d. Does the youth's use of substances interfere with his/her ability to function in any area of life?	0	1	2
7. Trauma Exposure. The youth has been exposed to traumatic experiences.	**No Concern 0**	**Possible Concern 1**	**Clear Concern 2**

Note: Item ratings ≥ 1 indicate *Possible Concern*. Item ratings ≥ 2 indicate *Clear Concern and require a mandated report*.

a. Has the youth been sexually abused/assaulted?	0	1	2
b. Has the youth been physically abused/assaulted?	0	1	2
c. Has the youth been emotionally abused?	0	1	2
8. Trauma Signs and Symptoms. The youth exhibits physical signs and emotional symptoms that can result from his/her exposure to trauma.	**No Concern 0**	**Possible Concern 1**	**Clear Concern 2**

Note: Item ratings ≥ 1 indicate *Possible Concern*. Item ratings ≥ 3 indicate *Clear Concern*.

a. Does the youth have bruises, black eyes, cigarette burns, broken bones, or other signs of physical trauma?	0	1	2
b. Does the youth appear constantly on edge and/or wound up, easily startled, or hypervigilant?	0	1	2
c. Does the youth have difficulty detecting and/or responding to danger cues?	0	1	2
d. Does the youth engage in self-destructive or reckless behaviors, beyond what is expected from youth his/her age?	0	1	2

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9. **Coercion and Grooming.** The youth exhibits behaviors or otherwise indicates that she/he is being controlled or coerced by another person.	No Concern 0	Possible Concern 1	Clear Concern 2

Note: Item ratings ≥ 1 indicate *Possible Concern*. Item ratings ≥ 7 indicate *Clear Concern*.

a. Does an adult the youth doesn't know well offer the youth housing, a place to stay, gifts, money, cell phones, transportation, alcohol or drugs?	0	1	2
b. Do adults (not caregiver) take the youth on travels or places she/he is not familiar with?	0	1	2
c. Does the youth use language, terminology or statements that suggest involvement in exploitation?	0	1	2
d. Is the youth's communication/contact with family or friends controlled by someone else to the point of social isolation?	0	1	2
e. Does the youth have to earn a quota and/or is forced to give the money they earn to another person?	0	1	2
f. Is the youth coerced (by someone other than caregiver) to get pregnant, have an abortion, or use contraception?	0	1	2
g. Does the youth have tattoos or scarring that suggest they are someone's property; or is the tattoo/scar common among other youth known to be sexually exploited?	0	1	2
h. Is someone not allowing the youth to sleep or to sleep in a safe place, to go to school, to eat, and/or meet other basic needs?	0	1	2
i. Does the youth report receiving threats to him/herself or to friends, family, or other acquaintances?	0	1	2
j. Is the youth asked to lie about his/her age, whereabouts, residence, or relationships?	0	1	2

10. **Exploitation.** The youth has been exposed to sexual exploitation or victimization.	No Concern 0	Possible Concern 1	Clear Concern 2

This includes any situation, context or relationship where the youth receives something (e.g., food, accommodation, drugs and alcohol, cigarettes, affection, gifts, money, etc.) as a result of performing, and/or others performing sexual activities on them. If there is an individual who is selling/profiting from or coercing the youth's exchange, this should be rated *Clear Concern (2)*.

Note: Item ratings ≥ 1 indicate *Possible Concern*.
Item ratings ≥ 2 indicate *Clear Concern and require a mandated report*.

a. Does the youth have a prior history of sexual exploitation?	0	1	2
b. Has the youth been watched, filmed or photographed in sexually explicit activities?	0	1	2
c. Has the youth or someone beside the youth stated that he/she is considering or currently exchanging sex for money and/or material items including food, shelter and care for his/her family?	0	1	2

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	Rating Summary
1. Stability in Residential Status & Life Functioning	_____
2. Relationships	_____
3. Finances & Belongings	_____
4. Use of Technology	_____
5. Physical Health	_____
6. Risk Behaviors	_____
7. Trauma Exposures	_____
8. Trauma Signs & Symptoms	_____
9. Coercion and Grooming	_____
10. Exploitation*	_____

******If this item is Clear Concern*, then total is automatically 20 points.

******If this item is Possible Concern* and *no other item has a rating*, then total is automatically 10 points.

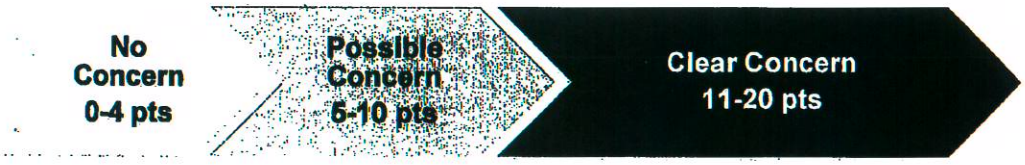
******If this item is Possible Concern* and *other items are rated*, add the rating ('1') to other rated items for a total score.

Total Score [ ]

Other Considerations:

Appraisal of Youth's Risk for Exploitation

(draw a line indicating level of risk)



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Has the child ever been involved with the child welfare system (e.g. in foster care or supervised by Child Protective Services)?

- O Yes
- O No
- O Unknown

Is the youth performing labor or services (not including sex) induced by force, fraud, or coercion? This question addresses the possibility that a child is being labor trafficked.

- O Yes
- O No
- O Unknown

Regardless of the outcome of the CSE-IT, **based on your professional judgment**, do you believe the youth is being commercially sexually exploited?

- O Yes
- O No
- O Unknown

If NO, why do you believe the youth is not being commercially sexually exploited?

END HERE. Thank you for completing the form.

If YES or UNKNOWN, please continue.

Please describe when the exploitation began.

- O Exploitation began in the last three months.
- O Exploitation began in the past year.
- O Exploitation has been intermittent for more than two years.
- O Exploitation has been ongoing for more than two years.
- O Unknown.

What age was the onset of the exploitation?

- O After the age of 16.
- O Between ages 14 and 16.
- O Between ages 12 and 14.
- O Prior to the age of 12.
- O Unknown.

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Please describe the youth's perception of the dangerousness of his/her situation.

- O Youth is fully aware of the dangerousness of his/her situation and behavior. Youth may take precautions to reduce dangerousness, such as using protection for intercourse or avoiding conflicts.
- O Youth is partially aware of the dangerousness of his/her situation and behavior. Youth generally fails to take precautions.
- O Youth is unaware of the dangerousness of his/her situation and behavior.
- O Youth actively minimizes the dangerousness of his/her situation and behavior.
- O Unknown.

Please describe the youth's understanding of the situation.

- O Youth understands he/she is currently being exploited.
- O Youth has some understanding that he/she might currently be exploited, however, he/she is unsure.
- O Youth is unaware of his/her exploitation.
- O Youth actively denies and/or rationalizes his/her exploitation.
- O Unknown.

Is the youth's residence outside of your geographic region? This question is about whether the youth traveled or was coerced to travel for reasons related to their exploitation.

- O Yes
- O No
- O Unknown

Was the youth moved from another_____?

- O County
- O State
- O Country

How did you determine that this youth is being sexually exploited (as described in Penal Code 236.1 or 11165.1; Welfare and Institutions Code 300 (b)2? **Please check all that apply.**

- ❑ Child Protective Services (CPS) investigation
- ❑ Law enforcement investigation
- ❑ Other (please describe) _____

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RESOLUTION NO. 2015-0682

AUTHORIZATION TO RECEIVE FUNDS ALLOCATED BY THE STATE AND TO ENTER INTO A ZERO-DOLLAR MEMORANDUM OF UNDERSTANDING WITH PARTNER AGENCIES TO SERVE COMMERCIALLY SEXUALLY EXPLOITED CHILDREN

WHEREAS, the Sacramento County Board of Supervisors recognizes that the commercial sexual exploitation of children (CSEC) is a pressing national, State, and local issue, and

WHEREAS, the FBI estimates that 100,000 children in the United States are sold for sex each year, including child sex trafficking, child sex tourism, and child pornography, and

WHEREAS, three of the top 13 highest trafficking areas in the nation are located in California: San Francisco, Los Angeles, and the San Diego metropolitan areas, and

WHEREAS, county law enforcement, child welfare services, behavioral health, the courts, and community-based organizations report increasing numbers of exploited underage victims, and

WHEREAS, counties have led the effort to address the unique needs of CSEC youth, including working with law enforcement and the courts to divert suspected exploited children, and

WHEREAS, county law enforcement, child welfare services, behavioral health, the courts, and community-based organizations continue to grapple with identifying and assisting CSEC youth, but have also made significant gains in meeting the unique needs of these traumatized children, and

WHEREAS, the need for intensive services tailored to minors who have been ensnared in the illegal sex trafficking trade remains critical,

NOW, THEREFORE BE IT RESOLVED that the Board of Supervisors of Sacramento County affirms the County's commitment to developing and supporting strategies to prevent, reduce and serve the victims of commercial sexual exploitation; and

BE IT FURTHER RESOLVED that the Director of the Department of Health and Human Services, or her designee, be and hereby is authorized and directed to enter into a zero-dollar continuous Memorandum of Understanding until terminated by the CSEC Committee and beginning on the MOU execution date with partner agencies and to apply for additional State, Federal and/or private funding, as it becomes available, to serve this population and to further authorize the Director of DHHS, or her designee, to amend this MOU for non-monetary changes, to terminate, and to assign.

On a motion by Supervisor Nottoli, seconded by Supervisor Serna, the foregoing Resolution was passed and adopted by the Board of Supervisors of the County of Sacramento this 15th day of September 2015 by the following vote, to wit:

AYES: Supervisors, Kennedy, MacGlashan, Nottoli, Peters, Serna

NOES: Supervisors, None

ABSENT: Supervisors, None

ABSTAIN: Supervisors, None

RECUSAL: Supervisors, None
(PER POLITICAL REFORM ACT (§ 18702.5.)

Chair of the Board of Supervisors
of Sacramento County, California

(SEAL)

ATTEST: Cynde Lee
Clerk, Board of Supervisors

In accordance with Section 25103 of the Government Code of the State of California a copy of the document has been delivered to the Chair of the Board of Supervisors, County of Sacramento on 9-15-15

By: S Studdard
Deputy Clerk, Board of Supervisors

FILED
BOARD OF SUPERVISORS
SEP 15 2015
BY Cynde Lee
CLERK OF THE BOARD