

**RESOLUTION NO. 4066**

**A RESOLUTION OF THE CITY COUNCIL OF THE CITY OF SOLEDAD  
APPROVING THE MONTEREY COUNTY DRUG ENDANGERED CHILDREN (DEC)  
PROTOCOL**

**WHEREAS**, the Monterey County Sheriff's Office and the Monterey County Department of Social and Employment Services have developed the Monterey County Drug Endangered Children (DEC) Protocol, a document meant to provide guidance to law enforcement personnel when responding to incidents of illicit drug manufacturing, sales and use involving minor children under the age of eighteen; and

**WHEREAS** all cities within Monterey County, including Soledad, have been invited to join the County Sheriff's Office and County Department of Social and Employment Services in the implementation of the DEC Protocol; and

**WHEREAS**, Staff is of the belief that the use of the DEC Protocol will be of benefit to the citizens of the County and the City of Soledad and recommends adoption of the same.

**NOW THEREFORE, BE IT HEREBY RESOLVED** by the City Council of the City of Soledad that the Council approves the Monterey County Drug Endangered Children (DEC) Protocol and authorizes its use by the Soledad Police Department. The Chief of Police is hereby authorized to enter into an Agreement on behalf of the City with the Monterey County Sheriff's Office, the Monterey County Department of Social and Employment Services, and other Monterey County Law Enforcement Agencies, for the use of the DEC Protocol, a copy of which is attached hereto as Exhibit "A" and by this reference incorporated herein.

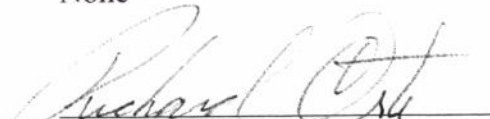
**PASSED AND ADOPTED** by the City Council of the City of Soledad at a regular meeting duly held on the 15th day of August 2007, by the following vote:

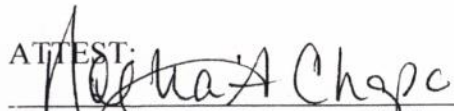
AYES, and in favor thereof, Councilmembers: Martha Camacho, Juan Saavedra, Patricia Stephens, Mayor Pro Tem Christopher Bourke, Mayor Richard Ortiz

NOES, Councilmembers: None

ABSTAIN, Councilmembers: None

ABSENT, Councilmembers: None

  
RICHARD V. ORTIZ, Mayor

ATTEST:  
  
NOELIA F. CHAPA, City Clerk

**PROTOCOL**  
**FOR**  
**DEALING**  
**WITH**  
**DRUG ENDANGERED CHILDREN**  
**IN**  
**MONTEREY COUNTY**



**THE MONTEREY COUNTY  
DRUG ENDANGERED CHILDREN (DEC) TEAM**

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**THE MONTEREY COUNTY  
DRUG ENDANGERED CHILDREN (DEC) TEAM**

**INTERAGENCY MEMORANDUM OF COOPERATION**

**I. MISSION STATEMENT**

The mission of the Drug Endangered Children (DEC) Team is to establish and promote a coordinated countywide multi-disciplinary approach to drug exposed children and abuse investigations.

**II. PURPOSE**

The purpose of establishing a DEC Team and this protocol is to protect drug exposed child victims from further harm and to enhance the investigation and prosecution of child abuse.

**III. GOALS**

The operational goals of the DEC Team and the creation of a countywide protocol for the handling of cases where children have been exposed to the making, sale or use of drugs are:

- A. Respond promptly, with coordination of appropriate agencies and resources, to incidents of known or suspected exposure of children to the manufacturing, use or sale of drugs.
- B. Lessen the risk of undue emotional trauma to child victims by reducing and limiting the number of victim interviews.
- C. Coordinate and improve procedures for the timely, thorough and professional gathering of physical evidence from child victims along with providing the correct medical treatment needed for these child victims.
- D. Enhance the ability of law enforcement agencies to obtain and preserve evidence and successfully prosecute cases without additional physical or mental harm to the child victims.
- E. Improve the investigation, documentation and prosecution of cases of child abuse and neglect, by establishing procedures to be followed in the collection of evidence and protection of child victims.
- F. Promote vertical investigation, prosecution, protective services and advocacy in child abuse investigations.

- G. Involved agencies agree upon standards, annual review and to commit to annual training for staff involved in the investigation of drug endangered child cases.
- H. Involved agencies adopt agreements, policies and review procedures that recognize and implement the aforementioned goals.

**IV. ONGOING TEAM REVIEW**

Designated and working team members from participating agencies will meet on a periodic basis to review cases and procedures. Involved agencies will also be expected to participate in an annual review of the protocol itself, examining its efficiency.

**V. ADMINISTRATION**

The Drug Endangered Children Team will be known locally as "DEC Team".

The agencies that participate in the investigation of child abuse comprise the members of the DEC Team who will function under their own departmental policies and regulations.

The Monterey County Sheriff's Office will function as the lead agency for the multi-disciplinary DEC Team, for the purposes of coordination of the team, organizing, and scheduling the annual review by the involved agencies.

**VI. APPLICATION OF THE DEC TEAM PROTOCOL**

The DEC Team will serve all children of Monterey County, under the chronological age of 18, regardless of race or disability, who are suspected victims of child abuse or neglect through the exposure to the manufacturing, sale or use of drugs, no matter what the circumstances are.

**VII. APPROVAL AND ADOPTION**

**WE RECOGNIZE AND SUPPORT** the purpose of the Drug Endangered Children Team of Monterey County to promote better investigation and prosecution of child endangered abuse and neglect cases.

**WE APPROVE AND ADOPT** the terms of the protocol, which we recognize as a living document subject to periodic review and modification by the members, and agree to comply with the terms of the protocol.

**WE AGREE** to participate and take an active role in the Drug Endangered Children Team of Monterey County.

MIKE KANALAKIS  
MONTEREY COUNTY SHERIFF-CORONER

DATED

DEAN D. FLIPPO  
MONTEREY COUNTY DISTRICT ATTORNEY

DATED

ELLIOT ROBINSON  
MONTEREY COUNTY DEPT. OF SOCIAL AND  
EMPLOYMENT SERVICES

DATED

WILLIAM FOLEY  
NATIVIDAD MEDICAL CENTER

DATED

E. VALERIE BARNES, MEDICAL DIRECTOR  
BATES-ELDREDGE CLINIC

DATE

JEFF BASS, M.D.  
DIRECTOR, EMERGENCY DEPARTMENT  
NATIVIDAD MEDICAL CENTER

DATED

GEORGE RAWSON, CHIEF  
CARMEL POLICE DEPARTMENT

DATE

FRED HARDEE, CHIEF  
C.S.U.M.B. POLICE DEPARTMENT

DATED

RON LANGFORD, CHIEF  
DEL REY OAKS POLICE DEPARTMENT

DATE

PAULETTE CUDIO, CHIEF  
GONZALES POLICE DEPARTMENT

DATE

JOE GREBMEIER, CHIEF  
GREENFIELD POLICE DEPARTMENT

DATE

\_\_\_\_\_  
NICK BALDIVIEZ, CHIEF  
KING CITY POLICE DEPARTMENT

\_\_\_\_\_  
DATED

\_\_\_\_\_  
EDMUNDO RODRIGUEZ, CHIEF  
MARINA DEPARTMENT OF PUBLIC SAFETY

\_\_\_\_\_  
DATED

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TIM SHELBY, CHIEF  
MONTEREY POLICE DEPARTMENT

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DATED

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DARIUS ENGLES, CHIEF  
PACIFIC GROVE POLICE DEPARTMENT

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DATED

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DANIEL ORTEGA, CHIEF  
SALINAS POLICE DEPARTMENT

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DATED

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JOHN "MIKE" KLEIN, CHIEF  
SAND CITY POLICE DEPARTMENT

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DATED

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STEPHEN CERCONE, CHIEF  
SEASIDE POLICE DEPARTMENT

\_\_\_\_\_  
DATED

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RICHARD COX, CHIEF  
SOLEDAD POLICE DEPARTMENT

\_\_\_\_\_  
DATED

## **DRUG ENDANGERED CHILDREN (DEC) TEAM**

### **LAW ENFORCEMENT GUIDELINES**

The Monterey County Law Enforcement Agencies who are signatories to the DEC Team Interagency Memorandum of Cooperation adopt the following guidelines for DEC investigations:

1. The Monterey County Sheriff's Office and the Monterey County Department of Social and Employment Services shall be jointly responsible for providing training on a regular basis in the areas of drug lab recognition, drug trafficking, drug use, criminal investigation procedures, child protective service procedures, child interview techniques, and the impact of illegal drugs on children's' health to the employees of DEC Team member agencies, who are assigned to assist in the investigation and prosecution of DEC cases.
2. During a narcotics investigation, Law Enforcement Officers, who become aware of a child being present in a home or other location which presents a danger to the child because illegal drugs are being manufactured, sold, stored or used at that location, shall immediately notify the on-call FCS worker to respond to that location.
3. In all cases where conditions exist that are dangerous to the lives or health of any child, Law Enforcement Officers shall take custody of said child or children under the authority of Welfare and Institutions Code Section 305. Once the on-call FCS worker arrives at the scene, the Law Enforcement Officers shall give custody of the endangered child(ren) to the FCS worker.
4. In the event that any drug endangered children leave or are removed from the scene prior to the arrival of the FCS worker, Law Enforcement Officers shall, whenever possible, record the identity and whereabouts of said children and provide this information to the FCS worker to follow up immediately on the welfare of said children.
5. During an investigation into the manufacture of illegal drugs, particularly methamphetamine, if a NEUCOM detective becomes aware of a child being present in the structure containing the illegal drug manufacturing equipment and chemicals, the detective shall, as timely as possible, contact the on-call FCS worker to respond to that location. The NEUCOM detective shall take the endangered child into protective custody and designate a Law Enforcement Officer to safeguard the child's welfare, until the FCS worker arrives at the location.
6. Law Enforcement Officers will assess and document all the conditions of the homes and other locations that present a danger to any child who is present. The supervising Law Enforcement Officer shall ensure that appropriate photographs and videotapes of the dangerous conditions, of the appearance of any child, and of the unlawful manufacture, sale, storage or use of illegal drugs at the scene are taken.

7. Law Enforcement Officers shall conduct on-scene interviews of the parents or guardians and children, and in each case, all relevant information gleaned from these interviews shall be passed on to the FCS worker by the law enforcement interviewer. Law Enforcement Officers may also contact the Coordinator of the Child Advocacy Center at Natividad Medical Center and request a forensic interview be conducted with the endangered child(ren).
8. Law Enforcement Officers shall be responsible for the collection of all evidence relevant to child endangerment charges, including but not limited to, all evidence of an illegal drug manufacturing lab, all evidence of drug trafficking and drug use in a residence where the illegal drugs are accessible to children and/or drug users who are under the influence endanger children, all evidence of health hazards and filthy living conditions that pose significant health risks to children, and all evidence of firearm violations and other related crimes that pose significant danger to children.
9. When it appears to Law Enforcement Officers and the FCS worker that a child is in immediate need of medical treatment and/or evidence of the impact of illegal drugs on a child must be collected promptly by medical personnel, the FCS worker shall transport the child to the Emergency Department of NMC for a wellness medical examination, to include both the appropriate treatment of the child for any acute medical problems and the collection of evidence to support the allegations of child endangerment.
10. Law Enforcement Officers shall give the FCS worker a copy of the completed DEC Chemical Checklist (Appendix B) of chemicals found at the scene and a copy of the search warrant, if applicable, or a signed consent form of the child's guardian allowing for such collection of evidence. The FCS worker shall notify the Emergency Department that the worker is bringing a child for an examination and collection of evidence and the FCS worker will give these documents to the treating medical personnel upon arrival.
11. The Law Enforcement Officer assigned to the collection of evidence at the scene shall provide his/her name and phone contact numbers to the FCS worker taking custody of any drug endangered children. Upon completion of the medical wellness exam and collection of evidence from the children taken into custody at the scene, medical staff or the FCS worker shall contact said officer, or a member of that officer's agency, to respond to the Emergency Department to take custody of the evidence from the medical staff, following standard chain of custody procedures.
12. Law Enforcement Officers, FCS workers and medical personnel shall exchange all information and documentation about the narcotics case and about the medical condition of the drug endangered children that is necessary for a full investigation of the child endangerment charges, so that appropriate legal action can be taken in both adult and juvenile court, as supported by the evidence.

13. When an investigation results in an arrest being made, Law Enforcement Officers shall submit all investigative reports, including those involving drug endangered children that have been taken into protective custody, within two court days to the DEC designated Deputy District Attorney in the District Attorney's Office. The DEC designated Deputy District Attorney shall review and prosecute all appropriate cases where children are endangered by hazardous conditions arising out of the illegal manufacture, sale, storage or use of illegal drugs and where suspects have been identified as the persons responsible for said child endangerment.

## **DRUG ENDANGERED CHILDREN TEAM PROTOCOL FAMILY AND CHILDREN'S SERVICES**

### **I. Family and Children's Services**

- A. Monterey County Family and Children's Services, a division of the Monterey County Department of Social and Employment Services, adopts the following guidelines for Drug Endangered Children (DEC) investigations.
- B. Monterey County Family and Children's Services and the Monterey County Sheriff's Office shall be jointly responsible for providing training on a regular basis in the areas of drug lab recognition, drug trafficking, drug use, criminal investigation procedures, child protective services procedures, child interview techniques, and the impact of illegal drugs on children's health to the employees of DEC Team member agencies, who are assigned to assist in the investigation and prosecution of DEC cases.

### **II. Response Time**

- A. All DEC team investigations require immediate response (within two hours, preferably within one hour) to the investigation site. It is understood that response time during after-hours and weekends (standby staff) may vary based upon staff coverage and the necessity to cover the entire county during these shifts.
- B. Timely response is critical to minimizing the trauma to children found at investigation sites, and providing for the least disruptive removal from the site. FCS workers should come prepared with all necessary placement paperwork, which includes the DEC Chemical Checklist (Appendix B.)

### **III. History Check**

- A. When contacted by Law Enforcement, FCS workers should:
  - 1. Determine whether there is prior child welfare history;
  - 2. Determine if there is an open dependency case on the family.
- B. Share relevant information, if known, as soon as possible with Law Enforcement about:
  - 1. children living at the residence;
  - 2. others living at the same location (i.e. elderly adults, disabled family members, etc.); and
  - 3. details about the residence (i.e. guard dogs, alarm systems, etc.), which may be useful to minimize trauma to the children present, complete investigations, as well as protect the lives of all persons at the site.

### **IV. Cross-reporting Referrals**

- A. If FCS receives a referral from the public regarding alleged manufacturing, sale, use or storage of drugs where children are present, FCS will notify the Law Enforcement agency in the proper jurisdiction and Narcotics Enforcement Unit for the County of Monterey of the DEC situation via mandatory reporting requirements. The Narcotics Enforcement Unit fax # is 759-0517.

**V. Safety Procedures**

- A. FCS workers should approach the investigation site only after obvious threats have been neutralized. The FCS worker should stay at a location designated by Law Enforcement for safety reasons and to preserve evidence. The FCS worker will put on latex gloves when instructed and provided by Law Enforcement. If available and necessary, shoe coverings should also be used.
- B. Law Enforcement will take the lead in permitting the worker to see the conditions of the home and surrounding area. Law Enforcement will take pictures of the home and the children's proximity to dangerous substances and provide copies of the photos to FCS, to support the FCS case.
- C. FCS workers should have contact with the children only after having been briefed by Law Enforcement regarding whether children have been evaluated for chemical contamination and cleared. In most instances, a Law Enforcement officer with regard to contamination will have cursorily performed this evaluation. In some situations, an EMT (Emergency Medical Technician) or other hazardous materials team professional may have made a more thorough evaluation. In either case, a more expert medical assessment is required.
- D. FCS workers should not take any items of children's clothing, toys, or personal effects from the crime scene without the authorization of Law Enforcement due to concerns of contamination.
- E. FCS workers may need to provide clothing for the child following decontamination at the site.
- F. FCS workers will take the lead from Law Enforcement as to when the child can be interviewed and removed from the site.

**VI. Protective Custody**

- A. FCS workers should anticipate the possible placement of children at the investigation site and arrive with all necessary placement papers.
- B. Decisions regarding taking children into protective custody should be made in consultation with Law Enforcement.
- C. If possible, parental notification of protective custody should be done at the site.

**VII. Sharing Information**

- A. As a fully functioning, multi-disciplinary team formed to work cases involving drug-endangered children, FCS workers, Law Enforcement officers, and medical personnel shall exchange all information and documentation about the narcotics case and about the medical condition of the drug endangered children as needed for a full investigation of child endangerment charges.
- B. Information shared would be needed in making an appropriate medical assessment of the drug-endangered child.
- C. Information shared may be used to take appropriate legal action in both adult and juvenile court, as supported by the evidence.

### **VIII. Medical Procedures**

- A. Children placed into protective custody needing immediate care will be transported for medical assessment to Natividad Medical Center (NMC) Emergency Department.
- B. Prior to the transport, the FCS worker will obtain the Law Enforcement contact information for the collector of evidence, a copy of the completed DEC Chemical Checklist, and a copy of the search warrant provided by Law Enforcement or standing court order for the collection of evidence from the children.
- C. If able to contact a parent at the site, the FCS worker should attempt to obtain a signed Medical Release. This does not substitute for the copy of the search warrant provided by Law Enforcement or standing court order necessary for the collection of forensic evidence.
- D. The FCS worker will transport the children to NMC emergency department after the child has been placed in protective custody by Law Enforcement.
- E. The FCS worker will provide a copy of the search warrant provided by Law Enforcement or standing court order requesting the collection of evidence from the children and the completed DEC Chemical Checklist to hospital personnel.
- F. Testing will include, but is not limited to, gathering blood, urine, and hair samples for each child. (NMC Policy 1:2410 will outline hospital procedures to follow.) At the completion of the medical assessment, the ED staff will determine whether the child needs to be admitted to NMC or if they can be discharged to FCS for placement.
- G. The FCS worker will telephone the Law Enforcement collector of evidence when the emergency room testing is complete, to enable Law Enforcement to pick up and take custody of the samples for laboratory analysis in order to preserve the chain of custody. The FCS worker will not take custody of evidence collected. This is a Law Enforcement duty only.
- H. A referral will be made by the NMC Emergency Department to the Bates-Eldredge Clinic for a general health exam, to be scheduled by the coordinator of the clinic at a later date. The coordinator will contact the case social worker to schedule that appointment.
- I. The FCS worker will request hospital clearances/releases and transport the children to the CHERISH Center and provide a copy of any medical recommendations and the DEC Chemical Checklist to CHERISH Center staff.
- J. Law Enforcement will fax results of laboratory analysis to the FCS worker immediately upon receipt.
- K. In the event the children do not need immediate medical attention or medical evidence collected, but are placed into protective custody, the FCS worker will transport the children directly to the CHERISH Center.
  1. The CHERISH Center nurse, generally available Monday through Friday, will conduct a health screening of the child.
  2. A Child Health and Disability Prevention (CHDP) exam will be conducted within seven days for all children entering foster care placement.

### **IX. CHERISH Center Assessment**

- A. The FCS worker will take all children removed from an investigation site to the CHERISH Center, after immediate medical needs have been met.

- B. The FCS worker will provide a copy of the DEC Chemical Checklist to the CHERISH Center staff as well as any other known information regarding the children and family.
- C. While at the CHERISH Center, the children's immediate needs will be met, including food, bathing, clean clothing, crisis counseling, resting, playing, and mental and physical health screenings. Children may remain at the CHERISH Center for up to 23 hours.

**X. Placement**

- A. FCS staff will follow agency protocol in assessing relatives and nearkin for possible placement while the child is at the CHERISH Center.
- B. The FCS worker will also coordinate with the FCS Placement Resource Worker regarding prospective placement needs of the child and the FCS Court Officer regarding possible court intervention.
- C. The FCS worker will attempt to consult with Law Enforcement and the DEC Deputy DA when reviewing prospective placements for the child. Law Enforcement and the DEC Deputy DA should make any concerns regarding placement of a child known to the FCS worker as quickly as possible.
- D. The FCS worker will initiate a Team Decision-making Meeting (TDM) referral for all children living within identified TDM areas. The TDM will be held by the end of the next business day following protective custody and prior to any petitions being filed in Juvenile Court.
- E. An internal staffing will be held for all children not within the identified TDM areas.
- F. Pending decisions at the TDM or internal staffing, the FCS worker will release the children to their parents or place with relatives, nearkin or other resource family, and complete all paperwork in a timely manner.
- G. The FCS worker shall notify the Law Enforcement officers and the DEC Deputy District Attorney assigned to the case of any placement decisions made with respect to any drug endangered children. The address or phone number of a child's placement will be made available upon request to FCS. The FCS worker shall provide the phone numbers of the Law Enforcement officers and the DEC Deputy District Attorney assigned to the case to the persons the child is placed with.

**XI. Follow-up Appointments**

- A. FCS will be contacted by the coordinator of the Bates-Eldredge Clinic regarding any possible medical appointments needed for drug-endangered children if they were brought to NMC ED for the medical assessment.
- B. FCS may be contacted regarding a forensic interview of drug-endangered children to be held at the Archer Child Advocacy Center (CAC). The coordinator of the CAC may be requested by Law Enforcement to perform a forensic interview of these children. FCS may be requested to assist in arranging and transporting the children to the CAC. The FCS worker should plan on being present for any such interview at the CAC.

## **DRUG ENDANGERED CHILDREN TEAM PROTOCOL**

### **NATIVIDAD MEDICAL CENTER EMERGENCY DEPARTMENT BATES-ELDREDGE CLINIC**

#### **I. LOCATION**

Natividad Medical Center (NMC) is located at 1441 Constitution Blvd., Salinas. The Emergency Department is located in Building 500 of NMC. The Bates-Eldredge Clinic is located in Building 200 of NMC, housed in the Archer Child Advocacy Center.

#### **II. SERVICES PROVIDED**

- A. Acute health assessments of drug endangered children brought to the Emergency Department who are exposed to the manufacturing, use, sale or storage of illegal drugs.
- B. Evidence gathering for law enforcement or Family and Children's Services (FCS) to aid in the prosecution of adults exposing said children to such activity.
- C. Referral to the Bates-Eldredge Clinic for a follow-up general exam.
- D. Admit the child to the Pediatric Service if medically necessary.
- E. If appropriate, discharge the child to the proper authorities or caretaker with necessary medical records and lab results to ensure continuity of care.
- F. A general health exam for the child at the Bates-Eldredge Clinic.
- G. A forensic interview of the child if requested at the Child Advocacy Center, NMC.

#### **III. ACUTE MEDICAL EXAMINATIONS FOR DRUG ENDANGERED CHILDREN – NATIVIDAD EMERGENCY DEPARTMENT**

- A. Children located at the site of a drug investigation who have been exposed to the manufacturing, use, sale, and storing of illegal drugs should be brought to the Emergency Department of Natividad Medical Center for a health assessment, optimally within 2 to 4 hours of being found at such a site.
- B. Law enforcement will need to provide a chemical checklist, listing any chemicals found at the site.
- C. Upon arrival at NMC, children will need to be triaged prior to entering the hospital for the need for decontamination due to said exposure. The person transporting the child (FCS or law enforcement) will need to have information regarding whether the child was decontaminated at the site or not.
- D. Emergency Department staff will proceed as directed in NMC IDP 1:2410 in the assessment of said children, including possible ingestion of said illegal drugs.

- E. Upon completion of this health assessment, a determination will be made whether the child needs to be admitted to the Pediatric Service or if the child can be discharged to FCS for placement.
- F. Appropriate referrals or follow-up medical care will be made at the completion of this medical assessment.
- G. Evidence collected will be provided to law enforcement, using the appropriate chain of evidence procedures, if provided a subpoena or a standing court order.

#### **IV. GENERAL HEALTH EXAM - BATES-ELDREDGE CLINIC**

- A. Drug-endangered children seen in the Emergency Department of NMH for acute health assessments will be referred to the Bates-Eldredge Clinic for a general health exam following the collection of evidence.
- B. Appointments will be scheduled by the Bates-Eldredge Clinic Coordinator with the guardian/caretaker of any child referred.
- C. Results of this general health exam will be made available to the legal guardian of the child. If a child is placed in protective custody, that guardian is Family and Children's Services.

#### **V. ARCHER CHILD ADVOCACY CENTER (CAC) INTERVIEW**

- A. Drug-endangered children may be brought to the CAC for a forensic interview at the request of law enforcement. Contact the CAC coordinator for a time (769-8682) during normal working hours.
- B. Law enforcement shall be responsible for documentation of all interviews at the CAC.
- C. Law enforcement shall take possession of the tapes produced at the CAC during all interviews as evidence in their case.
- D. Other members of the DEC team will be contacted regarding the scheduled time for the interview and may be present for the interview.
- E. Persons interviewing drug-endangered children at the CAC must comply with all requirements needed to interview at the CAC as stated in the C.A.R.T. protocol.

**DRUG ENDANGERED CHILDREN (DEC) TEAM**  
**GUIDELINES FOR DISTRICT ATTORNEY'S OFFICE**

1. The District Attorney (DA) shall assign an experienced attorney with background in drug prosecutions to be the lead attorney in prosecutions involving drug endangered children (DEC).
2. The DEC Deputy District Attorney shall assist the Monterey County Sheriff's Office Narcotics Enforcement Unit (NEUCOM) and Family and Children's Services (FCS) in providing training to all DEC Team members in criminal investigation procedures, collection of evidence, case preparation and trial strategy for the successful prosecution of DEC cases.
3. The DEC Deputy District Attorney will be available to provide legal advice and support to law enforcement personnel and FCS social workers who respond to the site of a clandestine methamphetamine lab, where drug endangered children are present.
4. The DEC Deputy District Attorney shall assist law enforcement in the training of peace officers to write search warrants that include requests to gather evidence from any drug endangered children found at sites where drugs are manufactured, sold, stored, or used. The DEC Deputy District Attorney shall also review all search warrants prepared by law enforcement agencies that involve the collection of evidence from drug endangered children. If the DEC Deputy District Attorney is unavailable to review a DEC search warrant, the law enforcement agency shall contact the Deputy District Attorney on call for review of the search warrant.
5. The DA's Office shall review, and when appropriate under the facts presented, file and prosecute cases where children are endangered by the manufacturing, sale, storage or use of any controlled substances. The DEC Deputy DA shall personally prosecute all clandestine meth lab cases where children are endangered by chemical exposure and all other serious non-lab drug-related child endangerment cases. Cases not falling within these categories, that may involve drug endangered children, will be reviewed in the normal course of business. The Penal Code Sections most commonly filed in drug endangered children cases are attached hereto as Appendix A.
6. The DEC Deputy District Attorney shall coordinate with law enforcement, FCS, the Bates Eldredge Clinic of NMC and other involved social services and health agencies to ensure that all evidence collected in a drug-related child endangerment case, including but not limited to drugs, chemicals, fingerprints, photos, medical reports, and lab reports on urine, blood and hair samples, shall be preserved for use at trial, and that copies of all reports generated by DEC Team members shall be forwarded to the DEC Deputy D.A. for use in prosecution.

7. The D.A.'s Office encourages the timely exchange of information among law enforcement agencies, Family and Children's Services (FCS), the medical personnel at the Natividad Medical Center and the Deputy District Attorneys prosecuting DEC cases, so that these cases can be fully developed and fully prosecuted.
8. The D.A.'s Office encourages that interviews of drug endangered children be conducted by a team including a peace officer and a social worker, so that the peace officer may testify on behalf of the children at preliminary hearings pursuant to Proposition 115 provisions, in order to spare the children being forced to testify at that early stage of the case. Such interviews may be conducted at the Archer Child Advocacy Center (CAC) at Natividad Medical Center. Arrangements for such interviews should be made by contacting the CAC Coordinator.
9. In incidents where a child is not present at the time that law enforcement conducts a search or makes arrests at a site where drugs are manufactured, sold, stored or used, but law enforcement and/or FCS social workers have reason to suspect that a child has previously been present at that site and is probably a drug endangered child, the results of a medical examination and an interview of said child will be provided the D.A.'s Office, along with any request for filing of child endangerment charges.
10. The D.A.'s Office shall notify Law Enforcement, FCS, CAC and their designated record keepers of the results of all DEC prosecutions after adjudication of the criminal case.

**APPENDIX A**  
**PENAL CODE SECTIONS FOR DRUG ENDANGERED CHILDREN CASES**

**Penal Code Section 273a:**

**Subdivision (a) (Felony or misdemeanor):**

Any person who, under circumstances or conditions likely to produce great bodily harm or death, willfully causes or permits any child to suffer, or inflicts thereon unjustifiable physical pain or mental suffering, or having the care or custody of any child, willfully causes or permits the person or health of that child to be injured, or willfully causes or permits that child to be placed in a situation where his or her person or health is endangered, shall be punished by imprisonment in a county jail not exceeding one year, or in the state prison for two, four, or six years.

**Subdivision (b) (Misdemeanor):**

Any person who, under circumstances or conditions other than those likely to produce great bodily harm or death, willfully causes or permits any child to suffer, or inflicts thereon unjustifiable physical pain or mental suffering, or having the care or custody of any child, willfully causes or permits the person or health of that child to be injured, or willfully causes or permits that child to be placed in a situation where his or her person or health may be endangered, is guilty of a misdemeanor.

A showing of circumstances likely to result in great bodily harm or death will support the filing of PC 273a(a) as a felony. See People v. Sargent (1999) 19 Cal. 4<sup>th</sup> 1206.

"Great bodily harm" is defined as significant or substantial physical injury. It is injury that is greater than minor or moderate harm. CALCRIM 821.

To prove felony child endangerment, a child does not need to actually suffer great bodily harm. CALCRIM 821.

PC 273a(a) applies to any person, regardless of relationship to a child, who seriously endangers the life or health of a child. CALCRIM 821.

PC 273a(a) also applies to any person who is the caretaker or custodian for a child, who either directly causes or permits a child to suffer or be injured or endangered or who puts a child in a situation where the child's health is seriously endangered. CALCRIM 821.

There must be evidence of "criminal negligence" to prove felony child endangerment. A person acts with criminal negligence when he or she acts in a reckless way that creates a high risk of death or great bodily harm; and a reasonable person would have known that acting in that way would create such a risk. CALCRIM 821.

### **Health and Safety Code Section 11379.7**

**Subdivision (a):** For any person convicted of manufacture of methamphetamine or PCP (HS 11379.6) or possession of precursors with intent to manufacture methamphetamine or PCP (HS 11383), or an attempt to manufacture methamphetamine or PCP or possess precursors, when the crime is committed in a structure where a child under 16 is present, the defendant shall receive as punishment a consecutive term of 2 years in prison.

**Subdivision (b):** For any person convicted of manufacture of methamphetamine or PCP (HS 11379.6) or possession of precursors with intent to manufacture methamphetamine or PCP (HS 11383), or an attempt to commit either offense, where the commission of the crime causes any child under 16 to suffer great bodily injury, the defendant shall receive as punishment a consecutive term of 5 years in prison.

“Structure” means any house, apartment building, shop, warehouse, barn, building, vessel, railroad car, cargo container, motor vehicle, housecar, trailer, trailer coach, camper, mine, floating home, or other enclosed structure capable of holding a child and manufacturing equipment.

### **Health and Safety Code Section 11353**

Every person 18 years or older (a) who in any voluntary manner solicits, induces, encourages, or intimidates any minor with the intent that the minor shall violate any provision related to possession or sale of controlled substances (as listed in HS 11054 (b), (c), (e) or (f)(1), or in HS 11054 (d) (14), (15) or (20), or in HS 11055(b) or (c), or in HS 11056 (b), or in Schedule III, IV or V, which is a narcotic drug) or related to Section 11550 or (b) who hires or uses a minor to unlawfully transport, carry, sell, give away, prepare for sale, or peddle any such controlled substance, or (c) who unlawfully sells, furnishes, administers, gives, or offers to sell, furnish, administer or give a controlled substance to a minor, shall be punished by serving 3, 6 or 9 years in prison.

(Controlled substances: opiates, heroin, cocaine, cocaine base, depressants – GHB, methaqualone, hallucinogenic drugs – mescaline, peyote, THC, dronabinol)

### **Health and Safety Code Section 11380**

Every person 18 years or older who violates any provision involving controlled substances that are classified in Schedule III, IV or V that are not narcotic drugs, or are listed in Section 11054(d) (except paras. 13, 14, 15, and 20), or are listed in Section 11056(c)(11), 11054(f)(2) and (3), or 11055(d), (e) or (f), by using a minor as agent, who solicits, induces, encourages, or intimidates any minor with the intent that the minor shall violate any provision of the sections on controlled substances, or who unlawfully furnishes, offers to furnish, or attempts to furnish those controlled substances to a minor shall be punished by 3, 6, or 9 years in prison.

(Controlled substances: methamphetamine, amphetamine, hallucinogens – LSD, DMA, DOM, STP, psilocybin, psilocin, PCP, GHB, fenethylamine, stimulants, depressants, precursors to methamphetamine, amphetamine and PCP)

**DRUG ENDANGERED CHILDREN  
CHEMICAL CHECK LIST  
CHEMICALS OF A CLANDESTINE DRUG LAB**

The following is a list comprised of chemicals that have been normally found in clandestine laboratories. A narcotic officer or social worker, following instruction of a narcotic officer, will check off the chemicals found in a methamphetamine lab where children are present. This form is then delivered to the hospital with the children for medical examination.  
Check chemicals found at the scene

- |                                                        |                                                      |
|--------------------------------------------------------|------------------------------------------------------|
| <input type="checkbox"/> Ethyl Ether                   | <input type="checkbox"/> Red Phosphorous             |
| <input type="checkbox"/> Acetone                       | <input type="checkbox"/> Sodium Thiosulfate          |
| <input type="checkbox"/> Acetaldehyde                  | <input type="checkbox"/> Hydrogen Chloride Gas       |
| <input type="checkbox"/> Freon R-11 or R-12            | <input type="checkbox"/> Palladium                   |
| <input type="checkbox"/> Methanol                      | <input type="checkbox"/> Methylamine                 |
| <input type="checkbox"/> Mercuric Chloride             | <input type="checkbox"/> Palladium ion carbon        |
| <input type="checkbox"/> Phenyl-2-propanone            | <input type="checkbox"/> Thionyl chloride            |
| <input type="checkbox"/> Phenyl acetic acid            | <input type="checkbox"/> Phosphorous Trichloride     |
| <input type="checkbox"/> Acetic Anhydride              | <input type="checkbox"/> Phosphorous Pentachlorid :  |
| <input type="checkbox"/> Alcohol                       | <input type="checkbox"/> Chloroform                  |
| <input type="checkbox"/> Anhydrous Sodium<br>Acetate   | <input type="checkbox"/> Ethanol & Denatured Alcohol |
| <input type="checkbox"/> Benzene                       | <input type="checkbox"/> Hydroiodic Acid             |
| <input type="checkbox"/> Ephedrine/Pseudo<br>Ephedrine | <input type="checkbox"/> Potassium Dichromate        |
| <input type="checkbox"/> Sodium Hydroxide (lye)        | <input type="checkbox"/> Sulfuric Acid               |
| <input type="checkbox"/> Toluene                       | <input type="checkbox"/> Muriatic/Hydrochloric Acid  |
| <input type="checkbox"/> Iodine Crystals               | <input type="checkbox"/> Other                       |
| <input type="checkbox"/> Coleman Fuel                  |                                                      |

These are commonly found chemicals used in the manufacture of methamphetamine, as we find them in clandestine laboratories in Monterey County. There are a number of other similar solvents, reagents and acids that are not listed, but are commonly submitted for the ones listed above

Completed by:

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Name	Title	Date
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**DRUG ENDANGERED CHILDREN PROTOCOL  
GLOSSARY OF ABBREVIATIONS AND TERMS**

CAC: Archer Child Advocacy Center  
C.A.R.T.: Child Abuse Response Team  
CHERISH CENTER: Monterey County FCS Receiving Center for children placed in  
Protective Custody  
DA: District Attorney  
DEC: Drug Endangered Children  
DSES: Department of Social and Employment Services  
EMT: Emergency Medical Technician  
FCS: Family and Children's Services  
NEUCOM: Narcotics Enforcement Unit, County of Monterey  
NMC: Natividad Medical Center  
NMC ED: Natividad Medical Center Emergency Department  
NMC IDP: Natividad Medical Center Interdisciplinary Policy  
TDM: Team Decision-making Meeting (a FCS program component)