



PLACER COUNTY
SHERIFF
CORONER-MARSHAL



MAIN OFFICE
2929 RICHARDSON DR
AUBURN, CA 95603
PH (530) 889 7800 FAX (530) 889 7899

TAHCE SUBSTATION
DRAWER 1710
TAHCE CITY, CA 95745
PH (530) 561 6300 FAX (530) 561 6377

EDWARD N BONNER
SHERIFF CORONER MARSHAL

DEVON BELL
UNDERSHERIFF

To: Board of Supervisors
From: Edward N. Bonner, Sheriff-Coroner-Marshal
Date: February 23, 2010
Subject: Anti-Drug Abuse (ADA) Recovery Act Application

ACTION REQUESTED

It is recommended that your Board approve the Anti-Drug Abuse (ADA) Recovery Act grant application. The amount allocated is \$313,492 for personnel for the Multi-Jurisdictional Drug Task Force. The Sheriff's Office will act as lead agency in the grant. Pursuant to the task force Memorandum of Understanding, the task force participants will approve the distribution of funding. The grant period is from March 1, 2010 through February 28, 2012. Your Board's authorization to submit the grant requires execution by the Chair and for Edward N. Bonner, Sheriff-Coroner-Marshal to execute the application, grant award and other related paperwork as required. There is no impact to the General Fund.

BACKGROUND

The Sheriff's Office has received notification of Recovery Act funding through the California Emergency Management Authority (Cal EMA) for local Drug Abuse (ADA) Enforcement Programs. The Recovery Act funding under this grant is to provide staffing to the Multi-Jurisdictional Drug Task Force managed in Placer County by the State under the Special Investigations Unit (SIU). Per legislation, the task force is comprised of representatives from the State (Bureau of Narcotics Enforcement), the Sheriff's Office, police departments, Probation, District Attorney and Health and Human Services (for child protective services). SIU contributes to the safety and well-being of the Placer County residents and is part of the County's fight against drugs such as methamphetamines. It is intended with the current grant application to fund additional task force resources (personnel) from allied departments/agencies that are not currently funded. The economy has affected all agencies included in the task force. The task force participants will be meeting on February 18, 2010 to provide direction on how the additional resources from this grant will be allocated. Time is of the essence in submitting the grant as it is due no later than March 9, 2010.

This grant is only available through law enforcement agencies. The Sheriff is committed to this program and is willing to support whatever funding can be applied towards additional task force resources for allied departments/agencies participating in SIU. Currently the Auburn Police Department, Lincoln Police Department, Sheriff's Office, Probation Department, District Attorney, and Health and Human Services personnel are not fully funded in the task force.

FISCAL IMPACT

The current application amount allocated by Cal EMA to Placer County is \$313,492. The additional funding will be applied towards additional task force resources (personnel) from allied departments/agencies if approved. A budget revision will be submitted for approval once the grant has been approved. There is no impact to the General Fund.

ARNOLD SCHWARZENEGGER
GOVERNOR

MATTHEW R BETTENHAUSEN
ACTING SECRETARY



3650 SCHRIEVER AVENUE
MATHER CA 95655

PHONE (916) 324-9200
FAX (916) 324-3179

CALIFORNIA EMERGENCY MANAGEMENT AGENCY

DRAFT

Application Cover Sheet

RFA PROCESS

**ANTI-DRUG ABUSE (ADA) ENFORCEMENT TEAM
RECOVERY ACT PROGRAM**

Submitted by

**Placer Special Investigations Unit
P.O. Box 293
Rocklin, CA 95677
916-632-3111**

CALIFORNIA EMERGENCY MANAGEMENT AGENCY GRANT AWARD FACE SHEET (Cal EMA 2-101)

The California Emergency Management Agency, hereafter designated Cal EMA, hereby makes a grant award of funds to the following

1 Grant Recipient County of Placer

hereafter designated Recipient, in the amount and for the purpose and duration set forth in this grant award

2 Implementing Agency Placer County Sheriff's Department

3 Project Title Anti-Drug Abuse Enforcement Program Recovery 4 Grant Period 03/01/10 to 02/28/12

*Select the Grant year and fund source(s) from the lists below or type the appropriate acronym in box 9 Enter the amount(s) from each source Please do not enter both State and Federal fund sources on the same line Add any cash match(s) Block 10G is the Grant Award total amount

Grant Year	Fund Source	A State	B Federal	C Total	D Cash Match	E In-Kind Match	F Total Match	G Total Project Cost
09/10	5 JAGO		\$313,492				\$0	
Select	6 Select						\$0	
Select	7 Select						\$0	
Select	8 Select						\$0	
Select	9						\$0	
	10 TOTALS	\$0	\$313,492	\$313,492	\$0	\$0	\$0	10 Grand Total \$313,492

11 This grant award consists of this title page, the application for the grant, which is attached and made a part hereof, and the Assurance of Compliance forms which are being submitted. I hereby certify I am vested with the authority, and have the approval of the City/County Financial Officer, City Manager, County Administrator, or Governing Board Chair, to enter into this grant award agreement, and all funds received pursuant to this agreement will be spent exclusively on the purposes specified. The grant recipient signifies acceptance of this grant award and agrees to administer the grant project in accordance with the statute(s), the Cal EMA Program Guidelines, the Cal EMA Recipient Handbook, the Federal OJP Financial Guide and Program Guidelines (if applicable), and the Cal EMA audit requirements, as stated in the applicable RFP or RFA. The grant recipient further agrees to all legal conditions and terms incorporated by reference in the applicable RFP or RFA, and agrees that the allocation of funds is contingent on the enactment of the State Budget.

12 Official Authorized to Sign for Applicant/Grant Recipient Federal Employer ID Number 94-6000527

Name Edward N Bonner Title Sheriff-Coroner-Marshal

Payment Mailing Address 2929 Richardson Dr City Auburn Zip 95603

Telephone (530) 889-7800 FAX (530) 886-3898 Email ebonner@placer.ca.gov
(area code) (area code)

Signature _____ Date _____

[FOR CalEMA USE ONLY]

I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purposes of this expenditure stated above

CalEMA Fiscal Officer _____ Date _____ CalEMA Director (or designee) _____ Date _____

PROJECT CONTACT INFORMATION

Applicant Placer County Sheriff's Department Grant Number _____
[FOR CALEMA USE ONLY]

Provide the name, title, address, telephone number and e-mail address for the project contacts named below. If a section does not apply to your project, enter "N/A". NOTE: If you use a PO Box address, a street address is also required for package delivery and site visit purposes.

1 The **Project Director** for the project

Name Edward N Bonner Address 2929 Richardson Drive
Title Sheriff-Coroner-Marshal City Auburn Zip 95603
Telephone # (530) 889-7800 Fax # (530) 886-3898
(Area Code) (Area code)
E-Mail Address ebonner@placer.ca.gov

2 The **Financial Officer** for the project

Name Katherine J Martinis Address 2970 Richardson Drive
Title Auditor-Controller City Auburn Zip 95603
Telephone # (530) 889-4160 Fax # (530) 889-4163
(Area Code) (Area code)
E-Mail Address kmartinis@placer.ca.gov

3 The **person having routine programmatic responsibility** for the project

Name William Olson Address 4220 Rockin Road Suite 3
Title Commander City Rocklin Zip 95677
Telephone # (916) 632-3111 Fax # (530) 886-3898
(Area Code) (Area code)
E-Mail Address Wolson@placer.ca.gov

4 The **person having routine fiscal responsibility** for the project

Name Rosie Dreher Address 2929 Richardson Drive
Title Accountant Auditor II City Auburn Zip 95603
Telephone # (530) 889-7821 Fax # (530) 886-3898
(Area Code) (Area code)
E-Mail Address rdreher@placer.ca.gov

5 The **Executive Director** of a nonprofit organization or the **Chief Executive Officer** (e.g., chief of police, superintendent of schools) of the implementing agency

Name Mark J Siemens Address 4080 Rocklin Road
Title Chief of Police City Rocklin Zip 95677
Telephone # (916) 625-5400 Fax # (916) 625-5495
(Area Code) (Area code)
E-Mail Address Mark.Siemens@rocklin.ca.us

6 The **Chair of the governing body** of the recipient (Provide contact information other than that of the recipient)

Name Bill Donovan Address 9440 Indian Hill Road
Title Captain City Newcastle Zip 95658
Telephone # (916) 663-3344 Fax # (916) 663-2859
(Area Code) (Area code)
E-Mail Address bdonovan@chp.ca.gov

SIGNATURE AUTHORIZATION

Grant Award # _____

Grant Recipient County of Placer

Implementing Agency Placer County Sheriff's Department

***The Project Director and Financial Officer are *REQUIRED* to sign this form**

***Project Director** Edward N. Bonner

***Financial Officer** Katherine J. Martinis

Signature _____

Signature _____

Date _____

Date _____

The following persons are authorized to sign for the
Project Director

The following persons are authorized to sign for the
Financial Officer

Signature _____
Devon Bell, Undersheriff
Name _____

Signature _____
Andrew Sisk, Assst Auditor-Controller
Name _____

Signature _____
David Keyes, Captain
Name _____

Signature _____
Jose Rodriguez, Managing Acct Auditor
Name _____

Signature _____
Name _____

Signature _____
Sandy Bozzo, Sr Accountant Auditor
Name _____

Signature _____
Name _____

Signature _____
Jayne Goulding, Managing Acct Auditor
Name _____

Signature _____
Name _____

Signature _____
Barbara Besana, Administrative Service Manager
Name _____

**CERTIFICATION OF ASSURANCE OF COMPLIANCE
ANTI-DRUG ABUSE
METHAMPHETAMINE LABORATORY OPERATIONS**

The applicant must complete a Certification of Assurance of Compliance - ADA CalEMA 2-104a (formerly OES 656), which includes details regarding Equal Employment Opportunity Program (EEO), Drug Free Workplace Compliance, California Environmental Quality Act, Lobbying, Debarment and Suspension requirements, Proof of Authority from City Council/Governing Board, and compliance with the provisions of the National Environmental Policy Act (NEPA) relating to clandestine methamphetamine laboratories. The applicant is required to submit the necessary assurances and documentation before finalization of the Grant Award Agreement. In signing the Grant Award Face Sheet, the applicant formally notifies CalEMA that the applicant will comply with all pertinent requirements.

Resolutions are no longer required as submission documents. CalEMA has incorporated the resolution into the Certification of Assurance of Compliance, Section VI, entitled, "Proof of Authority from City Council/Governing Board." The Applicant is required to obtain written authorization (original signature) from the City Council/Governing board that the official executing the agreement is, in fact, authorized to do so, and will maintain said written authorization on file and readily available upon demand. This requirement does not apply to state agencies.

**CERTIFICATION OF ASSURANCE OF COMPLIANCE
ANTI-DRUG ABUSE
METHAMPHETAMINE LABORATORY OPERATIONS**

I, **Edward N. Bonner, Sheriff-Coroner-Marshal** hereby certify that
(official authorized to sign grant award, same person as Section 12 on Grant Award Face Sheet)

RECIPIENT County of Placer

IMPLEMENTING AGENCY Placer County Sheriff's Department

PROJECT TITLE Anti-Drug Abuse Enforcement Program Recovery Act

is responsible for reviewing the *Grant Recipient Handbook* and adhering to all of the Grant Award Agreement requirements (state and/or federal) as directed by CalEMA including, but not limited to, the following areas

I Equal Employment Opportunity – (Recipient Handbook Section 2151)

It is the public policy of the State of California to promote equal employment opportunity by prohibiting discrimination or harassment in employment because of race, religious creed, color, national origin, ancestry, disability (mental and physical) including HIV and AIDS, medical condition (cancer and genetic characteristics), marital status, sex, sexual orientation, denial of family medical care leave, denial of pregnancy disability leave, or age (over 40) **CalEMA-funded projects certify that they will comply with all state and federal requirements regarding equal employment opportunity, nondiscrimination and civil rights**

Please provide the following information

Equal Employment Opportunity Officer Nancy Nittler
Title Personnel Director
Address 175 Fulweiler Ave, Auburn, CA 95603
Phone 530-889-4060
Email nnittler@placer.ca.gov

II Drug-Free Workplace Act of 1990 – (2006 Recipient Handbook, Section 2152)

The State of California requires that every person or organization awarded a grant or contract shall certify it will provide a drug-free workplace

III California Environmental Quality Act (CEQA) – (2006 Recipient Handbook, Section 2153)

The California Environmental Quality Act (CEQA) (*Public Resources Code, Section 21000 et seq*) requires all CalEMA funded projects to certify compliance with CEQA. Projects receiving funding must coordinate with their city or county planning agency to ensure that the project is compliance with CEQA requirements

IV Lobbying – (Recipient Handbook Section 2154)

CalEMA grant funds, grant property, or grant funded positions shall not be used for any lobbying activities, including, but not limited to, being paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal grant or cooperative agreement

V Debarment and Suspension – (Recipient Handbook Section 2155)

(This applies to federally funded grants only)

CalEMA-funded projects must certify that it and its principals are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of federal benefits by a state or federal court, or voluntarily excluded from covered transactions by any federal department of agency

VI Proof of Authority from City Council/Governing Board

The above-named organization (applicant) accepts responsibility for and will comply with the requirement to obtain written authorization from the city council/governing board in support of this program. The applicant agrees to provide all matching funds required for said project (including any amendment thereof) under the Program and the funding terms and conditions of CalEMA, and that any cash match will be appropriated as required. It is agreed that any liability arising out of the performance of this Grant Award Agreement, including civil court actions for damages, shall be the responsibility of the grant recipient and the authorizing agency. The State of California and CalEMA disclaim responsibility of any such liability. Furthermore, it is also agreed that grant funds received from CalEMA shall not be used to supplant expenditures controlled by the city council/governing board.

The applicant is required to obtain written authorization from the city council/governing board that the official executing this agreement is, in fact, authorized to do so. The applicant is also required to maintain said written authorization on file and readily available upon demand.

**SPECIAL CONDITIONS OF ANTI-DRUG ABUSE PROJECTS
METHAMPHETAMINE LABORATORY OPERATIONS**

This special condition facilitates compliance with the provisions of the National Environmental Policy Act (NEPA) relating to clandestine methamphetamine laboratories, including the seizure and/or removal of clandestine methamphetamine laboratories [hereinafter, "meth lab operations"]

The United States Environmental Protection Agency (USEPA) has determined that, "law enforcement responsibilities terminate when the law enforcement official notifies the property owner of record, the state, and the local environmental or public health agencies in writing of a possible site contamination at a clandestine lab "

Law enforcement personnel may seize as evidence and remove any bottles, cans, jugs and other containers, as well as contaminated apparatus and chemical samples from a clandestine drug site, however, law enforcement agencies are not responsible for the cleanup/remediation of any rooms, buildings or surrounding environments, including septic systems, rivers, streams or contaminated soils.

(Check one of the following four boxes)

Will **not** accept the JAG funds for the period of July 1, 2009 - June 30, 2010

OR

Will accept the JAG funds for the period of July 1, 2009 - June 30, 2010 but will not use them in the **seizure or removal** of clandestine methamphetamine laboratories

OR

Will accept the JAG funds for the period of July 1, 2009 - June 30, 2010 and comply with Federal, State, and local environmental, health, and safety laws and regulations applicable to the **seizure** of clandestine methamphetamine laboratories Said compliance will include the following mitigation measures

- 1 Recipient will provide medical screening of personnel assigned or to be assigned by the recipient to the seizure of clandestine methamphetamine laboratories,
- 2 Recipient will provide Occupational Safety and Health Administration (OSHA) required initial and refresher training for law enforcement officials and all other personnel assigned to the seizure of clandestine methamphetamine laboratories,
- 3 Recipient will equip personnel, as determined by their specific duties, with OSHA required protective wear and other required safety equipment,
- 4 Recipient will notify the Department of Toxic Substances Control (DTSC), and send written notification to the property owner of record, and the local Environmental Management and/or Public Health Department whenever a clandestine methamphetamine laboratory is seized, and
- 5 Recipient will enter into a written agreement with the local Social Services Department to notify the local Social Services Department whenever a minor is found at a clandestine methamphetamine laboratory site, and, if determined to be necessary, require that qualified personnel be dispatched to the site and, if determined to be necessary
 - (i) Respond to the minor's health needs that relate to methamphetamine toxicity,
 - (ii) Take the minor into protective custody unless the minor is criminally involved in the clandestine methamphetamine laboratory activities or is subject to arrest/detention for other criminal violations,
 - (iii) Arrange for medical testing for methamphetamine toxicity, and
 - (iv) Arrange for any follow-up medical tests, examinations, or health care made necessary as a result of methamphetamine toxicity

OR

Will accept the JAG funds for the period of July 1, 2009 - June 30, 2010 and comply with Federal, State, and local environmental, health, and safety laws and regulations applicable to the **seizure and/or removal** of clandestine methamphetamine laboratories Said compliance will include the following mitigation measures

- 1 Recipient will provide medical screening of personnel assigned or to be assigned by the recipient to the seizure and/or removal of clandestine methamphetamine laboratories,

- 2 Recipient will provide Occupational Safety and Health Administration (OSHA) required initial and refresher training for law enforcement officials and all other personnel assigned to the seizure and/or removal of clandestine methamphetamine laboratories,
- 3 Recipient will equip personnel, as determined by their specific duties, with OSHA required protective wear and other required safety equipment,
- 4 Recipient will send written notification to the property owner of record, and the local Environmental Management and/or Public Health Department whenever a clandestine methamphetamine laboratory is seized,
- 5 Recipient will enter into a written agreement with the local Social Services Department to notify the local Social Services Department whenever a minor is found at a clandestine methamphetamine laboratory site, and, if determined to be necessary, require that qualified personnel be dispatched to the site and, if determined to be necessary
 - (v) Respond to the minor's health needs that relate to methamphetamine toxicity,
 - (vi) Take the minor into protective custody unless the minor is criminally involved in the clandestine methamphetamine laboratory activities or is subject to arrest/detention for other criminal violations,
 - (vii) Arrange for medical testing for methamphetamine toxicity, and
 - (viii) Arrange for any follow-up medical tests, examinations, or health care made necessary as a result of methamphetamine toxicity
- 6 Recipient will assign properly trained personnel to prepare a Hazard Assessment and Recognition Plan (HARP) for the clandestine methamphetamine laboratory site,
- 7 Recipient or DTSC will utilize qualified disposal personnel to remove the chemicals, associated glassware, equipment, and contaminated materials and wastes from the clandestine methamphetamine laboratory site,
- 8 Recipient or DTSC will dispose of the chemicals, associated glassware, equipment, and contaminated materials and wastes at properly licensed disposal facilities or, when allowable, at properly licensed recycling facilities, and
- 9 Recipient or DTSC will monitor the records involving the transport, disposal and recycling components of subparagraphs numbered 7 and 8 immediately above in order to ensure proper compliance

All appropriate documentation must be maintained on file by the project and available for CalEMA or public scrutiny upon request. Failure to comply with these requirements may result in suspension of payments under the grant or termination of the grant or both and the Recipient may be ineligible for award of any future grants if the CalEMA determines that any of the following has occurred (1) the Recipient has made false certification, or (2) violates the certification by failing to carry out the requirements as noted above

CERTIFICATION	
I, the official named below, am the same individual authorized to sign the Grant Award Agreement [Section 12 on Grant Award Face Sheet], and hereby swear that I am duly authorized legally to bind the contractor or grant recipient to the above described certification. I am fully aware that this certification, executed on the date and in the county below, is made under penalty of perjury under the laws of the State of California	
Authorized Official's Signature	_____
Authorized Official's Typed Name	<u>Edward N Bonner</u>
Authorized Official's Title	<u>Sheriff-Coroner-Marshal</u>
Date Executed	_____
Federal Employer ID #	<u>94-6000527</u>
Federal DUNS #	<u>868399627</u>
Current Central Contractor Registration	Yes <input checked="" type="radio"/> No <input type="radio"/>
Executed in the City/County of	<u>Placer</u>
AUTHORIZED BY <i>(not applicable to State agencies)</i>	
<input type="radio"/> City Financial Officer	<input type="radio"/> County Financial Officer
<input type="radio"/> City Manager	<input type="radio"/> County Manager
<input checked="" type="radio"/> Governing Board Chair	
Signature	_____
Typed Name	<u>Kirk Uhler</u>
Title	<u>Board of Supervisors Chairman</u>

FEDERAL GRANTS FUNDING LOG

List all federal grant funds awarded to the applicant during the current year. Include the fiscal year of operation, funding agency and the amount of funding.

If your agency receives no federal grant funds check this box

FISCAL YEAR	FUNDING AGENCY	GRANT AMOUNT
1 2009-2010	DOJ/OJP JAG	\$276,396
2 2009-2010	COPS Technology	\$385,610
3 2008-2009	SCAAP	\$153,197
4		
6		
6		
7		
8		
9		
10		
	Federal Grant Total.	\$815,203

BUDGET CATEGORY AND LINE-ITEM DETAIL		COST
A Personnel Services - Salaries/Employee Benefits page 1		
2010-2012		
Salary and Benefits for Task Force Personnel		\$313,492
exact breakdown to be determined by the Steering Committee		
CATEGORY TOTAL		\$313,492

PROJECT SUMMARY

1 GRANT AWARD NO		3 GRANT PERIOD	
2 PROJECT TITLE <u>Anti-Drug Abuse Enforcement Program Recovery Act</u>		<u>March 1, 2010</u> to <u>Feb 28, 2012</u>	
4 APPLICANT		5 GRANT AMOUNT (this is the same amount as 10G of the Grant Award Face Sheet)	
Name	<u>County of Placer</u>	Phone	<u>530-889-7800</u>
Address	<u>2929 Richardson Dr</u>	Fax #	<u>530-886-3898</u>
City	<u>Auburn</u>	Zip	<u>95603</u>
\$ 313,492			
6 IMPLEMENTING AGENCY			
Name	<u>Placer County Sheriff's Department</u>	Phone	<u>530-889-7800</u>
		Fax #	<u>530-886-389</u>
Address	<u>2929 Richardson Dr</u>	City	<u>Auburn</u>
		Zip	<u>95603</u>
7 PROGRAM DESCRIPTION			
<p>The Placer Special Investigation Unit will continue to coordinate all ongoing drug investigations in Placer County. We will work directly with ACCESS to remove children from drug-endangered environments created by methamphetamine user and those who manufacture methamphetamine in the residences where these children live. Placer SIU will continue to assess drug trends and coordinate strategies to address specific drug related crime problems.</p>			
8 PROBLEM STATEMENT			
<p>The number one drug problem in Placer County is methamphetamine and the manufacture of methamphetamine. Most of the patrol arrests for drug related crimes are for methamphetamine and/or methamphetamine labs. The PLEA Board ADA steering committee identified methamphetamine as the first priority drug problem that SIU needs to address within the County. Methamphetamine is easy to make, chemicals are purchased over the counter, and it's relatively inexpensive to buy. There has been an influx of people from adjacent counties entering Placer County to purchase/steal pseudoephedrine used in manufacturing methamphetamine along with distribution methamphetamine within Placer County. Methamphetamine crosses all age lines from grandmothers and fathers all the way down to young teenagers.</p>			
9 OBJECTIVES			
<ol style="list-style-type: none">1) Conduct investigations into the primary suppliers of illegal drugs in Placer County2) Increase prison sentences for drug traffickers and drug manufactures within Placer County3) Increase contacts with high risk probationers4) Continue the working relationship with the Adult, Child and Community Emergency Service5) Remove children from a drug endangered environment			

10 ACTIVITIES

Working in conjunction with local law enforcement, social services and prosecutors, investigate, arrest and prosecute the individuals and organizations involved in the sale of drugs and the manufacture of drugs in Placer County

See narrative for details

11 EVALUATION (if applicable)

Through the use of statistical data gathered (arrests, seizures, children removed from drug endangered environments, weapons seized and successful prosecutions and convictions adjust the activities and methods used, to reach the goals and objectives outlined See narrative for details

12 NUMBER OF CLIENTS

(if applicable)
333,401

13 PROJECT BUDGET

(these are the same amounts as on Budget Pages)

	Personal Services	Operating Expenses	Equipment	TOTAL
	\$313,492			\$313,492
				\$0
				\$0
				\$0
				\$0
				\$0
Totals	\$313,492	\$0	\$0	\$313,492

PROJECT SERVICE AREA INFORMATION

- 1 COUNTY OR COUNTIES SERVED Enter the name(s) of the county or counties served by the project Put an asterisk where the project's principal office is located

Placer County

- 2 U.S. CONGRESSIONAL DISTRICT(S) Enter the number(s) of the U.S. Congressional District(s) which the project serves Put an asterisk for the district where the project's principal office is located

4

- 3 STATE ASSEMBLY DISTRICT(S) Enter the number(s) of the State Assembly District(s) which the project serves Put an asterisk for the district where the project's principal office is located

N/A

- 4 STATE SENATE DISTRICT(S) Enter the number(s) of the State Senate District(s) that the project serves Put an asterisk for the district where the project's principal office is located

N/A

- 5 POPULATION OF SERVICE AREA Enter the total population of the area served by the project

more than 300,000

REPORTING ALIEN CONVICTIONS TO THE U.S. CITIZENSHIP AND IMMIGRATION SERVICES (USCIS)

This is to certify that I have read, understand, and agree to abide by the California's Plan to Report Alien Convictions to USCIS. Specifically, I ensure that criminal justice agencies in the city/county will perform the following functions:

- Notify USCIS, at the time of booking, when a suspected alien is arrested, and
- Notify USCIS within 30 days of a felony or deportable misdemeanor conviction of an alien

Noncompliance with the above mandate may result in the following:

- Temporary withholding of cash payments to the project pending corrections or more severe enforcement action by the California Emergency Management Agency,
- Disallowance of use of funds for all or part of the cost of the project,
- Suspension or termination of the current award for the recipient's program,
- Withholding further awards to California's Anti-Drug Abuse Enforcement Program, or
- Other legal remedies

Project Director Edward N. Bonner

Signature _____

Date _____

**PLACER COUNTY
DRUG ENDANGERED CHILDREN
TEAM PROTOCOL**

INTRODUCTION

In recent years, Placer County law enforcement agencies and other child care specialists have experienced an increase in the number of children exposed to deleterious environments where drugs are manufactured or have otherwise significantly subjected children to exposure. This protocol ensures that the needs of all agencies will be maximally addressed with minimal re-victimization of the child. A collaborative commitment and team approach to this issue will allow for better treatment of the child victim and prosecution of the offending adult. In the end, all of us are concerned with the same issues--the safety and well being of children and the successful prosecution of offending adults who endanger children by their actions.

PURPOSE

The purpose of this protocol is to establish a cooperative environment and coordinated response by Law Enforcement, Health and Human Services Adult, Children Emergency Services System (ACCESS) and the District Attorney's Office to events of Drug Exposed Children (DEC)

1. FUNDAMENTAL TRAINING NECESSARY. Due to varied backgrounds, training and experience, Law Enforcement and ACCESS employees will be cross-trained in responsibilities, processes, duties and dangers related to DEC cases
 - 1 1 ACCESS. ACCESS workers will also have fundamental knowledge and training related to criminal narcotics investigations. The knowledge and training will include a familiarity with the procedures followed in law enforcement drug operations, most specifically that of the Placer County Narcotics Task Force known as the Special Investigations Unit (SIU)
 - 1 2 LAW ENFORCEMENT OFFICERS, AGENTS AND INVESTIGATORS. Investigators assigned to SIU, or any other narcotics enforcement unit, will become familiar with the roles and responsibilities, powers and limitations of social workers assigned to ACCESS. Investigators will also familiarize themselves with the process followed by ACCESS in DEC cases
 - 1 3 CROSS-TRAINING. To effectively meet minimal training goals, it is essential that ACCESS and affected law enforcement agencies provide initial and update training for their counterparts. This may include block or briefing presentations as well as training schools. The District Attorney's Office, and/or County Counsel, will provide legal training as required

- 2 **COMPOSITION OF DEC TEAM/OPERATIONAL AUTHORITY:** A DEC Team is formed whenever an ACCESS worker is requested for assistance by an investigative unit which anticipates, knows or finds that a child is at risk in a drug endangered environment. Whenever a team is formed, operational authority will rest with the highest ranking or senior-most law enforcement officer assigned to the team, hereinafter known as the Team Leader. The Team Leader will have full control and authority over any crime scene and/or search warrant execution.

The DEC Team will continue to work as a unit until the needs of the respective agencies (ACCESS, Law Enforcement and District Attorney) are addressed and the child is stabilized in a safe environment.

3. **NOTIFICATION:** Narcotics agents shall notify ACCESS as soon as a probable endangered child is found to be in a drug endangered environment.

3.1 **DISCOVERY AT SCENE:** Whenever a child is discovered at the scene without advanced information, the child shall be removed to a safe location. Notification of the designated ACCESS Social Worker will be immediately made by the Team Leader.

3.2 **ADVANCED NOTICE:** When there is knowledge or expectation that a child will be found at a drug endangered scene, ACCESS will be contacted to join the investigation and will participate in the pre-operation narcotics briefing. When sufficient advanced notice is given, the social worker will complete a history check and review of pre-existing ACCESS cases involving the target family. If ACCESS has knowledge that a child may be living in a drug endangered scene, prior to responding to the home, the assigned social worker will contact the designated law enforcement agency and request a joint response. Said law enforcement agency will contact SIJ if appropriate.

4. **SCENE PROCESSING AND EMERGENCY CHILD INTERVENTION:** The ACCESS DEC Team Member will not approach the scene until obvious threats have been neutralized and the Law Enforcement Team Leader authorizes entry. The child will be moved from the scene and placed in a vehicle or other secure location, if necessary, while awaiting on-scene interview.

4.1 **RESPONSIBILITY OF LAW ENFORCEMENT TEAM MEMBERS:** Once the scene has been neutralized, the Law Enforcement Team Leader will authorize entry by the Team's social worker who will be escorted through the scene for visual review. The team's law enforcement members will photograph the scene with a digital camera, and will ensure availability of the photos to the rest of the team. The Team Members will discuss additional photographic needs directed specifically at child endangerment issues. On a case-by-case basis, video recording of the scene may be advisable.

- 4.2 RESPONSIBILITY OF ACCESS TEAM MEMBERS The ACCESS DEC Team Member will refrain from endangering his/her health/life or the health/life of others by not entering the scene until authorized to do so. In reviewing the scene with Law Enforcement Team Members, the social worker will assess/document the scene and point out the item's location he/she would like photographed. At any appropriate and reasonable time the social worker will conduct separate on-scene interviews of the offending parents and victim child.
5. INTERVIEWING THE VICTIM CHILD While interviewing the victim child, DEC Team Members will be mindful of the need for cooperation and collaboration in an effort to minimize the number of interviews and to fully share as much information with other Team Members as is lawfully possible.
- 5.1 ADDITIONAL INTERVIEW In addition to the on-scene interview, it may be necessary for an additional interview(s) to be completed by the assigned social worker. Usually, additional interviews will take place at ACCESS offices, the Children's Shelter, or a foster home.
- 5.2 MULTIPLE-DISCIPLINARY INTERVIEWS If an MDI interview is conducted, the interview will consist of qualified DEC Team Members and a representative of the District Attorney's Office and County Counsel. Should the facilities of the Multiple-Disciplinary Interview Center be utilized, protocol established by the MDIC Steering Committee will be followed.
6. HAZARDOUS OR UNFIT CONDITIONS: In all cases where hazardous and/or unfit conditions exist, which place the child at imminent risk of serious physical harm, such as drug exposure or direct accessibility by a child, the law enforcement agent will place the child into protective custody pursuant to Welfare and Institutions Code, Section 300. The child will be accepted by the ACCESS Team Member.
7. EXCHANGE OF INFORMATION AND ADDITIONAL PHOTOGRAPHS: As the case continues through the criminal/juvenile court venues, members of the Team will continue to exchange information.
8. REPORT WRITING: Law Enforcement DEC Team Members will prepare thorough criminal reports detailing both drug and child endangerment evidence and observations. The reports will list appropriate Penal and Welfare and Institutions code Sections, i.e., W&I, Section 300 and Penal Code, Sections 273a(a), 273a(b), etc. as charging violations. The reports will be used by prosecutors in filing endangerment charges as well as drug charges and by ACCESS in dependency proceedings.

The ACCESS DEC Team Member will prepare reports detailing statements made by the victim child, blood/urine analysis or pertinent photographs, etc

- 9 **CONTROLLED DOCUMENT REPORTS REQUIRED:** Many of these cases, if not all, will require that the minors names, address, etc be kept confidential and not listed in reports, other than by asterisk (*) notation. Controlled document forms must accompany reports directed to the District Attorney's Office and ACCESS

- 10 **DEBRIEFING:** DEC Team Members and the assigned Deputy District Attorney debrief each case individually to assess the successes and failures of the DEC product. The effort of debriefing will be directed to maintaining quality cases and improving process

11. **DISTRICT ATTORNEY REVIEW AND CHARGING:** The District Attorney's Office will review and, where appropriate, prosecute drug related child endangerment violations in conjunction with the underlying narcotics case

- 12 **INVOCATION BY OTHER LAW ENFORCEMENT OFFICERS:** Patrol or other sworn personnel may invoke the provisions of this protocol upon finding children in a drug endangered environment by notifying his/her immediate supervisor and requesting that ACCESS be notified of a DEC response. The supervisor or senior-most officer will serve as Team Leader. All of the provisions of this protocol must be followed

DRUG ENDANGERED CHILDREN CHECK LIST

DEC TEAM REQUIREMENTS

- | | | | |
|---|--|---|---|
| 1 | Check prior Access involvement | 6 | Complete interview of parent(s) |
| 2 | Remove child to safe location | 7 | Complete interview of child(ren) |
| 3 | Complete visual view of scene by ACCESS worker | 8 | Assess applicability of Section 300 W&I |
| 4 | Photograph child(ren) at scene | 9 | Make custody decision |
| 5 | Address child endangerment issues | | |

FAMILY MEDICAL HISTORY:

- | | | | |
|---|--------------|---|------------------------------|
| A | HIV/AIDS | G | DRUG EXPOSED |
| B | HEPATITIS C | H | EAR INFECTIONS |
| C | TUBERCULOSIS | I | CURRENT MEDICATION |
| D | SEIZURES | J | MEDICAL INSURANCE |
| E | ALLERGIES | K | MEDICAL CONSENT FORMS SIGNED |
| F | HEAD LICE | | |