CHILD PROTECTIVE SERVICES INTAKE PROCEDURES

Issue

What are the intake procedures at Children’s Receiving Home of Sacramento (CRH) and Child Protective Services (CPS) Dependent Intake Unit regarding receiving of children into protective custody?

Reason for the Investigation

In August 2005, the police transported a developmentally delayed teenager to the CRH. It was around 11:30 P.M.; the juvenile was scared, tired and hungry; his mother had been arrested that evening, and there was no one available at that hour to care for him. The complainant alleged that the CRH staff would not accept the juvenile, and told the police to take him to the Sacramento Mental Health Treatment Center (SMHTC) on Stockton Boulevard. The complainant felt the CRH should have admitted the juvenile, as SMHTC housed people with more serious health problems.

Method of Investigation

The Grand Jury toured the CRH facilities and interviewed the following individuals:

- Chief Executive Officer
- Director of Clinical Services
- Program Specialist Manager, Nurse (LVN)
- Director of Programs
- Human Services Supervisor of the CPS Dependent Intake Unit

The Grand Jury also reviewed the following documents:

- CRH Policy and Procedure Manual for 2005
- Protective Custody Report Form completed by the admitting agency when requesting admittance to the CRH
- General Statistics breakdown sheets for 2005
Background and Facts

CRH has provided Sacramento County with short term shelter care for abused and neglected children since 1944. The county contracts with CRH for this service. This facility has been located at its current site, 3555 Auburn Boulevard, Sacramento, CA since 1965. Most of the children, ages 1 through 17, are brought to the facility by law enforcement, often at the request of, and in agreement with, CPS. The average stay in this 98-bed facility is approximately 28 days. It is open 24 hours a day, 7 days a week. Upon release from the facility, children are either returned to their homes, placed into the custody of other family members, or into foster care.

The admission goal of CRH is to accept as many children as possible. They realize these children come to them in a crisis situation. However, there are occasions when they may have to refuse admittance. Some of the non-admission categories are as follows:

- Lack of available bed space for the age and/or gender of the referred child
- Children whose physical impairment or non-communicative status limits their ability to care for themselves, and is beyond the ability of the program to help
- Children who are a clear and present danger to themselves or others, i.e., who exhibit physical or sexual-assaultive behavior, or have been charged with a felony
- Children with specific medical issues. These are reviewed on a case by case basis.
- Juveniles with a history of running away

The Grand Jury conducted an investigation into the complainant’s allegations. At the conclusion of the investigation, the following facts were brought to light:

- The juvenile in question had been brought to CPS Dependent Intake Desk at CRH by the police, requesting a “courtesy hold” for a few hours. They were not requesting a custodial admittance into the facility. It was not an uncommon occurrence for the police to request a “courtesy hold.” The general policy at CRH, when a juvenile is brought to the facility is, the juvenile is first processed by CPS Dependent Intake Unit before possible admittance to CRH. Therefore, CRH had not been aware of this particular incident.
- The juvenile’s mother had been arrested and jailed for drunk and disorderly conduct.
- The police needed a safe place for the child to stay for a few hours, until they could place him back with his mother, or contact the father, or uncle who lived in San Francisco. The staff at the CPS Dependent Intake Desk and the police tried to find the best solution.
- The developmentally delayed juvenile had a history of running away, and CRH is not a locked facility. It would have been irresponsible to place the juvenile in a situation where he might find himself on the street, in the middle of the night, unable to care for or protect himself. After conferring with CPS Intake Dependent Unit, the police called SMHTC and made the final decision to take the juvenile to that location because it was a locked facility.
- SMHTC agreed to take the child for a few hours.

The next day, the CPS Human Services Supervisor was made aware of the incident by her staff. She thought the juvenile should have been turned over to CPS. Then, CPS would have done a complete investigation and decided what was best for the child. Returning the child to his
mother might not have been the best decision. If the police turned the child over to the father, it is likely that he would have returned him to the mother.

Shortly after this incident occurred, but several months before this complaint was brought to the Grand Jury, the CPS Human Services Supervisor of the Dependent Intake Unit established new procedures to be used when the police bring a child to CRH. She believed an unofficial “courtesy hold” was not in the best interest of any child. The “courtesy hold” did not allow CPS to have full responsibility for the child, and their “child protective custody” procedures would not have been followed.

CPS no longer offers a “courtesy hold”, and automatically places the child in protective custody. The Protective Custody Report form is completed by the admitting party. CPS then conducts an investigation into the child’s circumstances and makes a recommendation as to placement. Before any child is released from custody, the CPS social worker must have the approval of the supervisor.

The Grand Jury has been advised that CPS recently entered into a Memorandum Of Understanding (MOU) with Alta California Regional Center (ACRC). The two organizations worked for over a year on the MOU. ACRC is a private, non-profit agency assisting in the placement of developmentally disabled children and high risk infants. ACRC contracts with state operated homes and foster care homes to care for these special needs children. CPS and ACRC had long realized there was a need for this kind of cooperation between the two organizations. Hereafter, when an incident occurs such as the one reported in this complaint, CPS can contact ACRC, which will respond and assist with these special needs placements.

Findings and Recommendations

**Finding 1.** The August incident with the developmentally delayed juvenile raised a red flag at the CPS Dependent Intake Unit of CRH. It became apparent that CPS needed to have full responsibility for any child brought to its unit. They took corrective action necessary to accomplish that goal. They are to be commended for their resolve to change the procedure. This decision gives CPS better control over juveniles placed in its care.

**Recommendation 1.** The Grand Jury supports the change made to CPS intake procedures. This change was an appropriate and necessary step, and the Grand Jury recommends they keep the new requirement in place.

Response Requirements

Penal Code sections 933 and 933.05 require that specific responses to both the finding and recommendations contained in this report be submitted to the Presiding Judge of the Sacramento Superior Court by October 1, 2006 from:

- Director of Health and Human Services
- Child Protective Services