

# Memorandum of Understanding

Between

SANTA BARBARA COUNTY DEPARTMENT OF SOCIAL SERVICES, CHILD WELFARE SERVICES

Herein referred to as "CWS"

AND

SANTA BARBARA COUNTY PROBATION DEPARTMENT

Herein referred to as "Probation"

AND

SANTA BARBARA COUNTY DEPARTMENT OF BEHAVIORAL WELLNESS

Herein referred to as "Behavioral Wellness"

AND

SANTA BARBARA COUNTY JUVENILE COURT

Herein referred to as "Juvenile Court"

AND

SANTA BARBARA COUNTY PUBLIC HEALTH DEPARTMENT

Herein referred to as "Public Health"

AND

SANTA BARBARA COUNTY DISTRICT ATTORNEY VICTIM WITNESS PROGRAM

Herein referred to as "Victim Witness"

AND

SANTA BARBARA RAPE CRISIS CENTER

Herein referred to as "SBRCC"

AND

NORTH COUNTY RAPE CRISIS AND CHILD PROTECTION CENTER

Herein referred to as "NCRCCPC"

FOR

## **Santa Barbara County Commercially Sexually Exploited Children (CSEC) Program**

WHEREAS, an individual who is a commercially sexually exploited child (CSEC) or who is sexually trafficked, as described in Section 236.1 of the California Penal Code, or who receives food or shelter in exchange for, or who is paid to perform sexual acts described in Penal Code Section 236.1 or 11165.1, and whose parent or guardian failed to, or was unable to protect the child, is a commercially sexually exploited child and may be served through the Santa Barbara County Child Welfare System pursuant to California Welfare and Institutions Code (WIC) Section 300(b)(2); and

WHEREAS, Santa Barbara County Child Welfare Services elected to participate in the CSEC Program as described in WIC Section 16524.7 in order to more effectively serve CSEC youth by utilizing a multidisciplinary approach for case management, service planning, and the provision of services; and

WHEREAS, the parties to this Memorandum of Understanding (MOU)(hereinafter, the "Parties"), have developed the following MOU to guide Santa Barbara County's approach to serving CSEC; and WHEREAS, WIC Sections 18960-18964 provide that 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 Penal Code Sections 11160, 11166, or 11166.05, or for the purposes of child welfare agencies making a detention determination; and

WHEREAS, the Parties agree to form a multidisciplinary team (MDT), incorporating existing collaborative structures including the Sexual Assault Response Team (SART) protocols, pursuant to WIC 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, this MOU defines the mutually agreed upon responsibilities of each of the Parties under the CSEC Program pursuant to WIC Section 16524.7, but is not intended to establish legal duties or otherwise alter the respective responsibilities of the Parties;

NOW, THEREFORE, the Parties set forth the following as the terms and conditions of their understanding:

### **I. Steering Committee**

**A. Purpose.** To ensure that Santa Barbara County effectively implements the CSEC Program, the Parties agree to form a Steering Committee to provide oversight and leadership for the CSEC Program and to ensure that the First Responder Interagency Protocol is operating effectively.

**B. Steering Committee Membership:** The Steering Committee will be comprised of the Parties and other representatives of agencies that play key roles in the County's effort to eliminate sex trafficking, such as Law Enforcement, the Public Defenders Office, Court Appointed Special Advocates staff, private attorneys representing children in the Foster Care system, and a CSEC Survivor. As the State designated agency lead, Child Welfare Services staff will serve as the Chair of the Steering Committee, and will be responsible for:

- i) Convening regular Steering Committee meetings;
- ii) Providing staff to prepare agendas, take minutes and chair the meetings; and
- iii) Gathering data from the MDTs to present and analyze with Steering Committee members.

**C. General Steering Committee Member Responsibilities.** Steering Committee members will fulfill the following responsibilities:

- a) Ensure that an agency representative with decision making authority, or designee, is assigned to participate in Steering Committee meetings, and attends meetings regularly;
- b) Oversee the implementation of the MOU;
- c) Conduct de-identified case review to track trends, gaps in the services, resolve issues raised by the individual MDTs, and serve as a consultant to case carrying staff as needed.
- d) Report on respective successes, barriers to providing services, the sufficiency of CSEC-specific resources in the county, and areas for improvement, including recommendations for adapting the MOU;

- e) Identify appropriate and necessary training, including training in the identification and assessment of youth who are, or are at risk of becoming, commercially sexually exploited;
- f) Collect and analyze aggregate data on the numbers of identified CSEC including the response time for providing CSEC specific/Trauma-Focused services and the actual services accessed by those youth;
- g) Prepare an annual report on the CSEC Program for the State in compliance with State and Federal requirements.

### III. Coordinated Response to Reports of CSEC

The Parties agree to respond to reports of identified CSEC in a systematic and collaborative manner that ensures that the needs of the youth will be addressed sensitively and efficiently. Although responses will depend on the circumstances of each case, the Parties generally agree to approach each case in the manner set forth below.

- A. First Responder Interagency Protocol.** In addition to routine screenings and assessments, CSEC youth may be identified through contact with law enforcement and other mandated reporters such as schools, medical facilities, youth shelters and clinics. To ensure that the Parties are alerted to the existence of a CSEC case, a First Responder Interagency Protocol is hereby established to serve as a guide on appropriate steps to take within the first 72 hours of interfacing with an identified or suspected CSEC. The Parties agree that children who are suspected or identified victims of sexual exploitation, and where a serious safety risk is present, require an immediate trauma-informed crisis response within 2 hours and intensive CSEC specific-Trauma Focused services through the first 72 hours to stabilize them.
- B. Assessment.** The Parties agree that an assessment of CSEC's needs and strengths must take place upon identification and on an ongoing basis. Further, the Parties agree that it is in the youth's best interest to limit unnecessary and/or duplicative assessments. To ensure that assessments are streamlined and limited when appropriate, in most circumstances, the Department of Behavioral Wellness will utilize its clinical staff from the RISE program, Juvenile Hall, and/or the Children's Clinic to conduct this initial assessment of youth who have been identified as victims of or at risk of commercial sexual exploitation.
- C. Roles and Responsibilities:** The Parties will fulfill the following respective responsibilities as part of their First Responder role:
  - 1. Child Welfare Services, Social Services Department**
    - a) Assess all reports of suspected abuse and neglect, to include the identification of any commercial sexual exploitation of a minor, and inform Behavioral Wellness, District Attorney, and Law Enforcement of the determined CWS response time on a case by case basis;
    - b) Determine if child is under the jurisdiction of CWS or Probation: if Probation, the CWS Hotline staff will contact the Probation Department to provide information as to the youth's status and to which Child Welfare Worker the youth is assigned;

- c) Work collaboratively with the Probation Department and Juvenile Court to include participation in a WIC Section 241.1 Report if ordered, and to consider the need to file a Juvenile Court WIC 300 petition as it relates to CSEC youth;

## **2. Probation Department**

- a) Complete a preliminary screening of all new out of custody referrals received or youth booked into the juvenile hall to identify those at risk of meeting CSEC criteria;
- b) Complete screenings of all youth under the supervision of probation whenever a suspicion arises that a youth is at risk of meeting CSEC criteria;
- c) Interface with CWS hotline or designated staff to provide information regarding a youth's status on probation and who is assigned as the Probation Officer;
- d) Ensure transportation to medical or therapeutic services necessary for any detained youth if those services are not available in the custodial setting;
- e) Consider elements of the CSEC matter in determining whether to request the filing of a WIC Section 602 petition.

## **3. Public Health Department**

- a) Initiate a Sexual Assault Response Team (SART) response through contracted trained forensic examiners who perform examinations per protocols when a sexual assault or sexual abuse has occurred;
- b) As part of the SART exam, provide information, services, and medication related to reproductive and sexual health, including access to contraceptives, HIV prophylaxis, and treatment for STIs/STDs;
- c) Link the potential CSEC to medical treatment and follow-up medical services based on the type of insurance coverage within 72 hours of identification;
- d) Provide medical witness if needed, in cases that go to trial.

## **4. Behavioral Wellness Department**

- a) Contract with Casa Pacifica's SAFTY program for the provision of 24/7 mobile crisis response services for sexually exploited minors (17 and under) in need of emotional crisis stabilization, safety planning and rapid support, and possible assessment for psychiatric hospitalization;
- b) Follow policies for temporary involuntary hospitalization under the Lanterman-Petris-Short Act if, at any point, the minor presents as a danger to self or others due to a mental disorder;
- c) Conduct an assessment of the minor to determine immediate mental health needs and when indicated, refer CSEC specialized trauma-informed, female-specific services and treatments via the RISE Project (Resiliency Intervention for Sexual Exploitation). Program services primarily include:
  - a. Stabilization and advocacy;
  - b. Attention to basic, immediate needs (e.g. outreach packages w/ hygiene/self-care items);
  - c. Medical/OBGYN consultation and services;

- d. Assessment (i.e. CSE-IT, Clinical Assessment, CANs);
- e. Treatment Planning (i.e. Self-care Safety Plan);
- f. Trauma-focused treatment modalities (i.e. CBT, DBT, Seeking Safety);
- g. Groups and therapies focused on biopsychosocial wellness;
- h. Peer supports and mentoring;
- i. Vocational development.

**5. District Attorney's Office/Victim Witness**

- a) Provide a CSEC-trained advocate for the child;
- b) Engage the child and build rapport;
- c) Explain Criminal Justice System;
- d) Accompany the identified youth to placement;
- e) Provide intensive supervision and support.

**6. Rape Crisis Centers**

North County Rape Crisis and Child Protection Center (NCRCCPC) and Santa Barbara Rape Crisis Center (SBRCC) intend to work together toward the mutual goal of providing maximum available assistance for sexual assault survivors and their significant others residing in Santa Barbara County, as follows:

- a) Respond to Hotline calls;
- b) Accompany sexual assault survivors and their significant others during sexual assault related meetings or appointments, 24-hours a day, 7-days a week to hospitals, law enforcement agencies, the District Attorney's office, court proceedings, and to other agencies as indicated by the needs of the client (survivor or significant other);
- c) Advocate and intervene with agencies or individuals on behalf of sexual assault survivors and their significant others as requested by the client or as deemed appropriate;
- d) Provide counseling in-person to individuals, couples, and families as well as facilitate support groups for survivors of sexual assault and their significant others;
- e) Offer case management if clients (survivors or significant other) choose to receive case management services.

**7. Juvenile Court**

- a) Serve in an administrative/advisory role to the CSEC Program;
- b) Participate on the Steering Committee and at general meetings in the discussions of/in the development of policy and procedures, to include making administrative recommendations on how to serve this high risk population and ensure coordinated response for CSEC youths;
- c) Will not participate in a CSEC MDT to avoid the appearance of a conflict of interest.

**IV. Development of the MDTs**

The Parties agree that the information they receive from other entities and individuals concerning a child that is identified and detained during the identification and assessment process or during a multidisciplinary team meeting shall be used solely for prevention, identification, and treatment purposes and that such information 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 WIC Section 18961.7(c).

#### **A. Multi-Disciplinary Response.**

Once it is determined that a youth is a victim, or is a **potential victim**, of commercial sexual exploitation, the Parties will invoke a multi-disciplinary response based on the circumstances of the case. The Parties agree to serve as core members of the MDTs pursuant to WIC Section 16524.7.<sup>1</sup>

To immediately engage and stabilize the child and address immanent safety and placement needs in a coordinated manner, CWS and/or Probation, Behavioral Wellness, and Public Health will serve as the core members of the Triage and Immediate Crisis MDTs. These agencies must:

- i) designate a point of contact qualified and trained in CSEC, to participate in the MDT via phone or in person to develop a service plan that addresses issues relating to:
  - a) safety planning;
  - b) placement if needed;
  - c) transportation; or
  - d) other case management related services; and
- ii) work collaboratively to:
  - a) ensure the consistent implementation of the First Responder Interagency Protocol; and
  - b) communicate and resolve issues related to rapid response, service triage and placement of the CSEC.

#### **A. Triage Response Multidisciplinary Team**

The purpose of the Triage Response MDT is to assess risk factors and determine what level of MDT is needed for the youth. This MDT will also identify other entities and individuals, as appropriate, to serve on the other MDTs to most effectively meet the unique needs of the child. , These agencies or entities may include, but are not limited to, the following:

- a. Youth
- b. Caregiver/placement provider
- c. Children's Dependency Attorney
- d. Victim Advocate
- e. Rape Crisis counselor/advocate
- f. Public Defender
- g. Law enforcement
- h. Education provider/Foster Youth Liaison
- i. Mental Health Provider

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<sup>1</sup> Note that not all required parties will need to participate in all tiers of the response

- j. Survivor Advocate or mentor
- k. Legal service providers
- l. Court Appointed Special Advocates

## B. Immediate Crisis Multidisciplinary Team

The purpose of the Immediate Crisis MDT is to address the immediate safety and placement needs of the child. This MDT may involve both a rapid response within 2 hours as well as intensive, ongoing support through the first 72 hours post-identification.

1. The following circumstances will require that an Immediate Crisis MDT be convened by phone or in person within 2- 24 hours when a high risk youth has been identified in the following circumstances:

- a. Youth leaves, is missing, runs away, or is otherwise absent from placement/home/shelter;
- b. Youth's placement changes or is becoming compromised;
- c. A new urgent issue, additional exploitation or abuse 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;
- f. Youth's behavioral health services needs change, including improvement or need for hospitalization;
- g. Contact with Law Enforcement;
- 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 a case review or other response.

2. The goals of this MDT will be:

- a. Providing trauma-informed CSEC Specific rapid response in the field or over the phone within two (2) hours to identified or suspected CSEC requiring immediate crisis stabilization supports and services;
- b. Determining the need for a forensic interview via the SART Protocol or addressing other immediate medical and mental health needs;
- c. Ensuring basic needs are met, such as food, shelter, and clothing;
- d. Providing individual case-by-case collaboration with multiple child-service agencies as needed;
- e. Engaging with youth and family/caregiver(s), if appropriate;
- f. Actively participate in all stages of the interagency response model by (1) attending all MDT meetings, (2) ensuring notification of Core MDT members on a timely basis and (3) completing and submitting all required documentation to proper authorities.

## C. Initial Multidisciplinary Team

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

2. The Initial MDT is a team of individuals connected to the child's life. The MDT will attempt to involve the youth in meaningful 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 10 days;
  - b. Orient the youth and family to the multidisciplinary teaming approach;
  - c. Provide individual case-by-case collaboration with multiple child-serving agencies;
  - d. Assess and address the child's short and long-term needs;
  - e. Develop and coordinate a service plan;
  - f. Develop a safety plan with the parent/guardian/caregiver that addresses the following:
    - i. Potential safety risks for the youth, the family, and/or providers;
    - ii. Identifying trauma triggers that may cause 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/care provider will notify law enforcement and the social worker and the advocate and social worker will text the youth to maintain communication).
3. 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 a CSEC.

#### D. 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.

1. Individualized Ongoing MDTs will be held with each identified CSEC 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.
2. In addition to regularly scheduled Ongoing MDTs, a meeting should be called when any of the following circumstances or events occur:
  - a. The youth leaves, is missing, runs away, or is otherwise absent from placement/home/shelter;
  - b. The youth's placement changes;
  - c. The youth is preparing to testify in a court case against exploiter/purchaser;
  - d. The youth's behavioral health service needs change;

- e. A change in Court disposition;
- f. A member of the MDT identifies a need requiring case plan review or other response.

#### E. Engagement of the Youth

The Parties recognize that CSEC often cycle through the stages of exploitation many times before they are able to maintain a life outside of exploitation; it is also recognized that in order to be effective, interventions and services must be victim-centered. On this basis, the Parties are committed to take the steps necessary to engage the youth as a participant in his or her MDT meetings with the goal of identifying strengths and to best position the CSEC to meet his or her needs in a culturally sensitive and trauma informed way. The MDT will function in a manner that builds rapport with the youth and encourages his or her participation in developing a safety plan and deciding on placement, as appropriate to age and development.

#### V. Confidentiality

The Parties to this MOU agree to comply with the following confidentiality practices:

1. Maintain the confidentiality of all records pursuant to WIC Sections 827 and 10850-10853, the State Protocol, and all other provisions of law and regulations promulgated hereunder relating to privacy and confidentiality, as each may now exist or be hereafter amended.
2. Maintain the confidentiality of all records with respect to Juvenile Court matters, in accordance with WIC Section 827, all applicable statutes, case law, and in accordance to Santa Barbara County Juvenile Court Policy regarding confidentiality, as it now exist or may hereafter be amended.
3. No access, disclosure or release of information regarding a youth who is the subject of Juvenile Court proceedings shall be permitted except as authorized. If authorization is in doubt, no such information shall be released without the written approval of a Judge of the Juvenile Court.
4. Obtain prior written approval of the Juvenile Court before allowing any youth under the age of eighteen (18) years old, (and to make their best efforts to obtain prior written approval for youth over the age of eighteen (18) years old), to be interviewed, photographed or recorded by any publication or organization or to appear on any radio, television or internet broadcast or make any other public appearance. Such approval shall be requested through the child's social worker.
5. CSEC information and statements obtained via the identification, assessment and MDT processes will be maintained, disclosed and used only as stated within this MOU and in accordance with all applicable state and federal laws and regulations.
6. Inform every member of the youth's MDT's who receives information or records on children and families served under this MOU that he/she shall be under the same privacy and confidentiality obligations and subject to the same confidentiality penalties as the person disclosing or

providing the information or records. Further, all MDT members shall be required to complete a CSEC Confidentiality Agreement form.

7. Comply with mandatory reporting guidelines as defined by California Penal Code Sections 11164-11174.3 and report known or suspected child abuse and neglect, including sexual exploitation. These reporting requirements shall be extended to non-mandated parties who are signatories to this MOU; however, nothing in this MOU shall be intended or have the effect of increasing or expanding the scope of mandatory reporting requirements as set forth in Penal Code Sections 11164-11174.3 with respect to judicial officers.
8. Youth provided services under this MOU shall be informed that all information obtained is confidential, with the following exceptions:
  - i) incidences of abuse or neglect that are reportable to the Child Abuse Registry;
  - ii) information will be shared with members of the MDT in order to develop an appropriate plan for services, including medical and psychological care;
  - iii) information shared among the MDT and all identified members during assessment may be shared with other agencies/programs to ensure the youth's safety and the safety of others and/or to coordinate care;
  - iv) information may be shared with the Juvenile Court in order to better assess the youth's safety and intervention needs;
  - v) the MDT and all identified members will use its screening to complete psychosocial assessments and identify and report to DSS/Law Enforcement any instance of sexual exploitation in accordance with mandated reporting laws; and
  - vi) the MDT and all identified members will maintain records of its screening results as well as any information collected and statements made during the screening including information regarding sexual exploitation.

#### **V. Amendment to Add Parties to the MOU**

The Steering 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.

#### **VI. Termination**

Any one of the Parties may terminate this MOU without penalty at any time but will attempt to provide thirty (30) calendar days' written notice. Notice shall be deemed served on the date of mailing to the following address:

Devin Drake  
Deputy Director  
Child Welfare Services  
2125 S. Centerpointe Parkway  
Santa Maria, CA 93455

#### **VII. Signatures in Counterpart**

The Parties agree that separate copies of this MOU may be signed by each of the Parties, and this MOU will have the same force and effect as if the original had been signed by all the Parties.

Wherefore, the Parties hereto have executed the MOU in the County of Santa Barbara, California and this MOU shall be continuous until terminated by the Santa Barbara County CSEC Steering Committee.

**VIII. Signatures by Department Heads or Authorized Designees:**

Dated: \_\_\_\_\_ By: \_\_\_\_\_  
Daniel Nielson, Director  
Santa Barbara County Department of Social Services

Dated: \_\_\_\_\_ By: \_\_\_\_\_  
Guadalupe Rabago, Chief Probation Officer  
Santa Barbara County Probation Department

Dated: \_\_\_\_\_ By: \_\_\_\_\_  
Alice Gleghorn, Ph.D., Director  
Santa Barbara County Alcohol, Drug, and  
Mental Health Services

Dated: \_\_\_\_\_ By: \_\_\_\_\_  
Arthur A. Garcia, Presiding Judge  
Santa Barbara County Presiding Judge

Dated: \_\_\_\_\_ By: \_\_\_\_\_  
Dr. Takashi Wada, Director  
Santa Barbara County Public Health Department

Dated: \_\_\_\_\_ By: \_\_\_\_\_  
Joyce Dudley, District Attorney  
Santa Barbara County District Attorney's Office

Dated: \_\_\_\_\_ By: \_\_\_\_\_  
Elsa Granados, Executive Director  
Santa Barbara Rape Crisis Center

Dated: \_\_\_\_\_ By: \_\_\_\_\_  
Shannon Chavez, Executive Director  
North County Rape Crisis and Child Protection Center

## CSEC GUIDING PRINCIPLES

### A. Commercial Sexual Exploitation of Children

1. Must be understood as child abuse and reported as such, and
2. Should not be criminalized.

### B. Responses to CSEC should be:

1. Victim-centered,
2. Trauma-informed,
3. Strengths-based,
4. Developmentally appropriate,
5. Culturally, linguistically, and LGBTQ competent and affirming,
6. Committed to active efforts that engage CSEC early and often,
7. Multidisciplinary, individualized, flexible, and timely, and
8. Data and outcome driven.

### C. Agency Policies & Procedures should:

1. Ensure and track cross-system collaboration at the system and individual case level,
2. Incorporate mechanisms to identify and assess CSEC at key decision points,
3. Address the unique physical and emotional safety considerations of CSEC, and
4. Address unique physical and emotional safety considerations, including vicarious trauma of staff, caregivers, and other relevant support persons.