

**Stillwater County  
Human Services Department  
Family and Children's Services  
Dependency Initial Hearing Report**

300       342       387

**Jason Jones**

<b>Detention Hearing Date: November 18, 2015</b>	Parent Need to be Present? Yes Location: Berryville
<b>Jurisdictional Hearing Date: December 10, 2015</b>	Parent Need to be Present? Yes Location: Berryville
<b>Dispositional Hearing Date: December 10, 2015</b>	Parent Need to be Present? Yes Location: Berryville

**Social Worker:** Serena Hernandez      **Phone:** (831) 454-2015

**Protective Custody Date:** November 14, 2015

**Police Report #:** SCS 1500203

**Date Juvenile Court Notified:** November 17, 2015

**Petition Filing Date:** November 17, 2015

**Last Possible Disposition Date:** January 18, 2016

**In Custody Parent**

Transportation Required: NO

Name:

SS#:                      DOB:

Last Address:

**Interpreter Requested:**      YES              NO

**Attorney Requested:**      YES              NO

Mother's Past/Current Representation: none

Father's Past/Current Representation: none

**In Custody Parent**

Transportation Required: YES

Name: Frank Jones

SS#: unknown      DOB: 01/10/1984

Last Address: 4200 Stillwater Cove #A  
Stillwater, CA 95021

Language:

**Mother:** Martha Smith

**Father:** Fred Jones

Alleged     Presumed

DOB: 12/04/1982

DOB: 01/10/1984

**Notice:**  YES     NO

**Notice:**  YES     NO

Date: November 14, 2015

Date: November 16, 2015

How: In person

How: In person

By Whom: SW S. Hernandez

By Whom: SW S. Hernandez

If not, reason:

If not, reason:

**If presumed, proof of paternity attached:**

- Hospital Declaration     Family Court Support Order     Paternity Order
- Marriage Certificate     Prior Juvenile Dependency Court Order

Children	Age	JD#
Brianna Alleweg	12 years	JD 001025
Jason Jones	1 years	JD 001026

**Indian/Eskimo Heritage:**

According to child's  Mother     Father     Other (who)

There is NO reason to believe the child may be of Indian ancestry;

There IS reason to believe the child may be of Indian ancestry;

There IS reason to KNOW the child may be a member of or eligible for membership in, a federally recognized Indian tribe.

Explanation:

**What efforts have been made (currently and in the past) to prevent or eliminate the need for removal of the child(ren)?**

In early 2015, the mother and father were offered services to assist with domestic violence; neither availed themselves of those services.

At the current time, the Department has assessed the situation and finds that there are no services that would result in either parent being able to safely care for the children, due to drug abuse and continuing domestic violence, despite previous provision of services.

**What relatives have the parents identified as being able and willing to care for the child(ren)?** Maternal Aunt, Jean Salvador

**Have any other relatives offered to care for the child(ren)?**  YES  NO  
(if so, who?)

**Recommended Visitation:**

Mother:  Supervised  Unsupervised 3 Times per week

Father:  Supervised  Unsupervised 3 Times per week\*

- While incarcerated, Department recommends no Visitation in the main jail as face to face visits are not available and at this child's age, visits in local jail would be detrimental

Other:  Supervised  Unsupervised \_\_\_\_\_ Times per week

**Future Services Recommended to facilitate return of the child(ren):**

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Drug/alcohol assessment | <input checked="" type="checkbox"/> Domestic Violence Services   |
| <input checked="" type="checkbox"/> Drug/alcohol treatment  | <input checked="" type="checkbox"/> Individual Family Counseling |
| <input checked="" type="checkbox"/> Drug/alcohol testing    | <input type="checkbox"/> Psychological Evaluation                |
| <input checked="" type="checkbox"/> Parenting classes       | <input type="checkbox"/> Other:                                  |

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): <b>DANA MCRAE, Santa Cruz County Counsel 142231</b> <b>SHANNON M. SULLIVAN, Asst. Co. Counsel SBN 182637</b> <b>701 Ocean Street, Room 505</b> <b>Santa Cruz, CA 95060</b> TELEPHONE NO.: (831) 454-2051      FAX NO. (Optional): (831) 454-2115 E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): <b>HSD/Family &amp; Children's Services</b>	<b>FOR COURT USE ONLY</b>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF <b>SANTA CRUZ</b> STREET ADDRESS: <b>One 2nd Street, Room 300</b> MAILING ADDRESS: CITY AND ZIP CODE: <b>Watsonville, CA 95076</b> BRANCH NAME: <b>Juvenile Dependency Division</b>	
CHILD'S NAME: <b>JASON JONES</b>	
<b>JUVENILE DEPENDENCY PETITION (VERSION ONE)</b> (Welf. & Inst. Code, § 300 et seq.) <input checked="" type="checkbox"/> § 300 - Original <input type="checkbox"/> § 342 - Subsequent <input type="checkbox"/> § 387 - Supplemental	CASE NUMBER: <b>JD 001026</b>  RELATED CASES (if any): <b>JD 001025</b>

1. Petitioner on information and belief alleges the following:

a. The child named below comes within the jurisdiction of the juvenile court under the following subdivisions of section 300 of the Welfare and Institutions Code (check applicable boxes; see attachment 1a for concise statements of facts): <input type="checkbox"/> (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/> (c) <input type="checkbox"/> (d) <input type="checkbox"/> (e) <input type="checkbox"/> (f) <input type="checkbox"/> (g) <input type="checkbox"/> (h) <input type="checkbox"/> (i) <input type="checkbox"/> (j)			
b. Child's name: <b>Jason Jones</b>	c. Age: <b>1</b>	d. Date of birth:	e. Sex: <b>M</b>
f. Name: <b>Martha Smith</b> <input checked="" type="checkbox"/> mother Address: <input type="checkbox"/> father <b>4200 Stillwater Cove #A</b> <input type="checkbox"/> guardian <b>Stillwater, CA 95021</b> <input type="checkbox"/> unknown  If mother or father (check all that apply): <input type="checkbox"/> legal <input type="checkbox"/> biological <input checked="" type="checkbox"/> presumed <input type="checkbox"/> alleged	g. Name: <b>Frank Jones</b> <input type="checkbox"/> mother Address: <input checked="" type="checkbox"/> father <b>125 Jail Street</b> <input type="checkbox"/> guardian <b>Stillwater, CA 95021</b> <input type="checkbox"/> unknown  If mother or father (check all that apply): <input type="checkbox"/> legal <input type="checkbox"/> biological <input type="checkbox"/> presumed <input checked="" type="checkbox"/> alleged		
h. Name: Address:  If mother or father (check all that apply): <input type="checkbox"/> legal <input type="checkbox"/> biological <input type="checkbox"/> presumed <input type="checkbox"/> alleged	i. Other (state name, address, and relationship to child):  <input type="checkbox"/> No known parent or guardian resides within this state. This adult relative lives in this county or is closest to this court.		
j. Prior to intervention, child resided with <input checked="" type="checkbox"/> parent (name): <b>Martha Smith &amp; Frank Jones</b> <input type="checkbox"/> parent (name): <input type="checkbox"/> guardian (name): <input type="checkbox"/> Indian custodian (name): <input type="checkbox"/> other (state name, address, and relationship to child):	k. Child is <input type="checkbox"/> not detained <input checked="" type="checkbox"/> detained Date and time of detention: <b>11/14/15 at 19:30</b> Current place of detention (address): <b>confidential foster placement</b>  <input type="checkbox"/> Relative <input checked="" type="checkbox"/> Shelter/foster care <input type="checkbox"/> Other		

2. I have asked about Indian ancestry for this child and have completed and attached the required *Indian Child Inquiry Attachment*, form ICWA-010(A). (If this is a subsequent filing and there is no new information, the ICWA-010(A) is not required.)

(See important notice on page 2.)

CHILD'S NAME: <b>JASON JONES</b>	CASE NUMBER: <b>JD 001026</b>
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3. Petitioner requests that the court find these allegations to be true.

I declare under penalty of perjury under the laws of the State of California that the foregoing and all attachments are true and correct.

Date: 11/26/15

**Serena Hernandez, MSW**  \_\_\_\_\_  
(TYPE OR PRINT NAME) (SIGNATURE OF PETITIONER)

Address and telephone number (if different person signing than listed in caption above):

Number of pages attached:   2         Other children are listed on *Additional Children Attachment* (form JV-101(A))

**- NOTICE -**

**TO PARENT**

Your parental rights may be permanently terminated. To protect your rights, you must appear in court and answer this petition.

**TO PARENTS OR OTHERS LEGALLY RESPONSIBLE  
FOR THE SUPPORT OF THE CHILD**

You and the estate of your child may be jointly and severally liable for the cost of the care, support, and maintenance of your child in any placement or detention facility, the cost of legal services for you or your child by a public defender or other attorney, and the cost of supervision of your child by order of the juvenile court.

CHILD'S NAME: - JASON JONES	CASE NUMBER: JD 002026
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**FAILURE TO PROTECT**  
**§ 300(b)**

The child has suffered, or there is a substantial risk that the child will suffer, serious physical harm or illness,

- as a result of the failure or inability of his or her parent or legal guardian to supervise or protect the child adequately.
- as a result of the willful or negligent failure of the child's parent or legal guardian to supervise or protect the child adequately from the conduct of the custodian with whom the child has been left.
- by the willful or negligent failure of the parent or legal guardian to provide the child with adequate food, clothing, shelter, or medical treatment.
- by the inability of the parent or legal guardian to provide regular care for the child due to the parent's or legal guardian's mental illness, developmental disability, or substance abuse.

*(State supporting facts concisely and number them b-1, b-2, b-3, etc.) :*

**b-1 The child's mother, Martha Smith, is unable to safely parent the child due to the mother's use of methamphetamine and her inability to keep the home free of that drug. On November 14, 2015, the mother's domestic partner, who is father to the child's sibling, was arrested for methamphetamine sales in the alleyway next to the family home. Search of the home at that time revealed methamphetamine in a bedside stand drawer in the mother's bedroom, which was accessible to the child. Sales of methamphetamine next to the home and the presence of methamphetamine in the home puts the child at risk of serious physical harm due to the possibility of ingestion, and due to the high risks of physical harm associated with drug sales nearby.**

**b-2 The child's mother, Martha smith, is unable to keep the child safe from domestic violence. The mother has a long history of association with men who physicall abuse her in the presence of the child. Ms. Smith admitted having been a victim of domestic violence with Brianna's father in the past, and Brianna reports current domestic violence between her mother and mother's domestic partner, who is the father of Brianna's half-sibling. This history of placing the child in the path of domestic violence presents a high probability that Brianna will suffer serious physical harm related to that violence.**

**b-3 The child's parents, Martha Smith and Fred Alleweg, have failed to provide the child with necessary medical treatment and have failed to enroll the child in school, or provided the child with any form of education. Brianna's speech is difficult to understand, and the parents have not had the speech assessed or provided Brianna with treatment. This lack of provision of treatment results in increased risk of physical harm to Brianna due to her inability to communicate her needs clearly.**

**b-4 The child's father, Fred Alleweg, has failed to provide the child with any form of support whatsoever, has not maintained contact with the child, and has failed to protect the child from the risk caused by the mother's drug use and participation in domestic violence. This lack of protection has caused the child to be at risk of serious physical harm.**

**b-5 The child's father, Fred Alleweg, has put the child at risk of serious physical harm by participating in domestic violence in the child's presence. The mother reports that when she and the father were together, the father used to beat her. Mr. Alleweg's untreated anger issues place the child at significant risk of serious physical harm.**

CHILD'S NAME: <b>JASON JONES</b>	CASE NUMBER: <b>JD 002026</b>
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**ABUSE OF SIBLING**

**§ 300(j)**

The child's sibling has been abused or neglected, as defined in subdivision (a), (b), (d), (e), or (i), and there is a substantial risk that the child will be abused or neglected, as defined in those subdivisions.

*(State supporting facts concisely and number them j-1, j-2, j-3, etc.) :*

**j-1 The child's mother, Martha Smith, has failed to provide the child with necessary medical treatment and has failed to enroll the child in school, or provided the child with any form of education. The child's sibling's speech is difficult to understand, and the parents have not had the speech assessed or provided Brianna with treatment. This lack of provision of treatment results in increased risk of physical harm to Brianna due to her inability to communicate her needs clearly, and also places Jason at risk of serious medical and developmental neglect.**