Filed 12/31/25 In re K.G. CA2/3

NOT TO BE PUBLISHED IN THE OFFICIAL REPORTS

IN THE COURT OF APPEAL OF THE STATE OF CALIFORNIA

SECOND APPELLATE DISTRICT

DIVISION THREE

In re K.G., a Person Coming Under the Juvenile Court Law.	B343888
LOS ANGELES COUNTY DEPARTMENT OF CHILDREN AND FAMILY SERVICES, Plaintiff and Respondent, v. B.G., Defendant and Appellant.	Los Angeles County Super. Ct. No. 20CCJP04595D

APPEAL from an order of the Superior Court of Los Angeles County, Tiana J. Murillo, Judge. Affirmed.

Sarah Vaona, under appointment by the Court of Appeal, for Defendant and Appellant.

Dawyn R. Harrison, County Counsel, Kim Nemoy, Assistant County Counsel, Tracey Dodds, Principal Deputy County Counsel, for Plaintiff and Respondent.

Mother challenges the juvenile court's order declining to return her then-eight-month-old child K.G. to her custody at the six-month review hearing. She argues substantial evidence did not support the court's finding that the return of K.G. to her care would create a substantial risk of detriment to the child. We disagree and affirm.

BACKGROUND

Mother has six children. On June 3, 2024, the juvenile court adjudicated K.G. (born April 2024 with a positive toxicology for amphetamine) a dependent—along with three of her older siblings—based on mother's history of substance abuse, her current use of amphetamines, and her failure to follow the court's orders regarding welfare checks. At disposition, the court found by clear and convincing evidence that mother's drug use and failure to follow court orders posed a substantial danger to K.G.'s safety and that no reasonable means existed to protect the baby without removing her from mother's custody.[1]

The juvenile court ordered mother to participate in a drug treatment aftercare program, weekly drug testing, a 12-step program with sponsor, a family preservation program, and individual counseling. The court also ordered 10 hours of visitation between mother and K.G. each week: five hours were to be monitored, and five hours were to be unmonitored in a public setting. The court set a six-month review hearing

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[1] Mother appealed the removal order, which we affirmed. (*In re K.G.* (Oct. 16, 2025, B339613) [nonpub. opn.].) The facts leading up to the June 3, 2024 hearing are from that opinion.

under Welfare and Institutions Code[2] section 366.21, subdivision (e) for December 2, 2024.

Mother tested positive for methamphetamine on May 30 and June 5, 2024, only a few days before and after the jurisdiction/disposition hearing.[3] After mother's positive test in June, the court apparently ordered her visits to be monitored.[4] The court also removed K.G.'s older twin siblings from mother's care and placed them with K.G.'s caregiver. On June 7, 2024, mother told the social worker she had begun attending NA meetings.

On November 15, 2024, DCFS reported on mother's progress. On July 1, 2024, mother enrolled in individual and substance abuse counseling programs through a single provider. Mother's programs began in early August, and she was attending one-hour, weekly sessions for each program. The program did not provide drug testing. According to a letter from the provider, as of October 2, mother had attended 10 of 26 individual counseling sessions, and nine of 26 substance abuse sessions. The provider stated mother had "shown determination in her efforts to prevent relapse." She had "begun exploring the

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[2] Statutory references are to the Welfare and Institutions Code.

[3] Mother contested the validity of the tests; she filed a motion to compel the production of lab records she subpoenaed. She testified she last used methamphetamine on November 4, 2021.

[4] The appellate record does not include the court's actual order. At the hearing there seemed to be confusion as to whether the order related to K.G. or only to K.G.'s twin siblings.

underlying factors that contributed to her past substance abuse" and was working on "strategies for managing cravings, identifying high-risk situations, and strengthen[ing] her support network." DCFS was unable to get a further update on mother's progress other than communications from the provider in November stating mother participated in "telehealth services" and remained "engaged" in the two programs. Mother told DCFS she was attending the substance use and relapse prevention program twice a week. Mother also said she attended weekly mental health sessions and had six sessions left. She told DCFS she was learning different ways to manage stress and addressing substance use and triggers during her sessions.

DCFS also reported that, after mother's positive test on June 5, 2024, she had tested negative for drugs/alcohol on June 14, June 24, and July 25, four times in August, September 19 and 23, four times in October, and on November 6. Mother was a "no show" on June 18, July 1, July 8, September 3, and October 7, 2024, however. Mother said she didn't know she had missed the October 7 test but admitted "around that date, she was feeling 'down' after reviewing recommendations regarding the dependency case for her older children." According to mother, as of November 14, she was attending "online NA/AA meetings" regularly and was on the 11th step of recovery but did not have a sponsor yet. Mother said she had digital attendance verifications from her on-line meetings and would give them to the social worker. She did not.

Mother consistently visited K.G. with her other children. Mother sometimes arrived late to visits or ended the visits early. The social worker stated mother's visits were appropriate, but she had difficulty managing the care of K.G. and her siblings

at the same time. DCFS had concerns about mother's challenges with managing all her children.

DCFS recommended mother continue to receive family reunification services "to monitor safety issues regarding [K.G.'s] transition to her care." DCFS noted mother "remained engaged" in services to address the issues that led to K.G.'s dependency "but further assessment as to her progress is required." The social worker had "assessed and determined that [the] current risk for future abuse/neglect is 'very high,' " and recommended the case remain "open for completion of services." DCFS recommended the child remain in her placement.

The court held the six-month review hearing on December 2, 2024. At mother's request, the court admitted into evidence a November 28, 2024 update from her counseling provider. Mother consistently had been attending separate weekly sessions in individual and substance abuse counseling. By then, she had completed 20 of 26 individual counseling sessions and 19 of 26 substance abuse counseling sessions. She had been "applying the skills and techniques learned during her" individual counseling sessions, had appeared sober during all her substance abuse counseling meetings, and had demonstrated "her dedication to preventing relapse and improving her overall well-being." The court also took judicial notice of the case file and case history and stated it had reviewed DCFS's current report. The court noted that, according to the report, except for a no-show on October 7, mother had been testing negative consistently since about September 19. The court also noted mother's consistent participation in counseling, her consistent visits with K.G., and her own report that she was "engaged in NA and AA."

Mother's counsel asked the court to return K.G. to mother's care, noting mother's substantial compliance with her case plan and consistent visitation. Counsel argued DCFS had failed to meet its burden to show K.G.'s return would create a substantial risk of detriment to the child.

Minor's counsel agreed mother should receive continued reunification services but did not believe K.G. should be returned to her care yet. Given the history of the case, counsel argued K.G. still was at risk. Counsel acknowledged mother had been testing negative "pretty much the entirety of the review period," but argued she still had more to do in her services. Counsel noted mother did not have a sponsor yet.

DCFS also did not agree with returning K.G. to mother's care yet. Counsel for DCFS noted mother's other children recently had been detained from her based on her substance use in June and her denial of that use. Counsel argued DCFS still had not been able to obtain certain information from mother's service provider because mother had not signed a release. DCFS noted it also had not been able to confirm if mother had engaged in any aftercare (meaning NA/AA) services or had found a sponsor. Mother's missed test on October 7 concerned DCFS because mother said she "was feeling down" and missed the test. Counsel noted mother had relapsed during times when she felt overwhelmed or "a certain way about the case." DCFS therefore was "concerned that mother . . . [had] not yet shown proof of her [enrollment in] aftercare services to maintain her sobriety." Counsel also noted the child was very young and asked that mother continue to have monitored visitation.

After hearing argument the court found continued jurisdiction was necessary because the conditions that justified

the court taking jurisdiction over K.G. continued to exist. The court found mother's compliance with her case plan "on the whole is pretty good" but it would be detrimental to return the child to mother at that time.

The court found mother was in substantial compliance with her case plan, but the court wanted to see evidence that mother had found a sponsor and more information about mother's participation in the NA/AA meetings. The court commended mother on "sticking to the orders." The court explained K.G. was young and mother had struggled with consistent testing in the past. The court acknowledged there was evidence mother had had consistent, negative testing "since roughly the late summer," which was "good." But the court wanted "to see continued evidence and a longer record here of mom being able to keep that up and continue the sobriety and continue to comply with court orders" before it could find "return is appropriate." The court ordered a three-month progress hearing "to see how mom's continued compliance is going." The court stated, "I would expect to see at that time that mom is continuing to follow the case plan orders pretty closely. [¶] . . . I'd like to see . . . more information about the NA/AA meetings, as well as whether mom has managed to get a sponsor by that time." The court also ordered DCFS to provide mother with five hours of unmonitored visitation each week.

On January 15, 2025, DCFS filed a Request to Change Court Order asking for mother's visits with K.G. to be monitored. DCFS had learned mother had tested positive for marijuana on December 13, 2024, and positive for amphetamine and methamphetamine on December 17. She tested negative on January 2, 2025. Mother told the social worker she didn't submit

to drug tests on December 13 and 17, but mother's signature was on the testing provider's sign-in sheets for both dates. She again told the social worker she had been sober since November 2021.

On January 31, 2025, mother filed a notice of appeal from the juvenile court's December 2, 2024 order.

DISCUSSION

At the six-month review hearing, a child who has been removed from a parent's care at disposition—as is the case here—must be returned to the parent unless DCFS proves by a preponderance of the evidence that return to the custody of the parent "would create a substantial risk of detriment to the safety, protection, or physical or emotional well-being of the child." (§ 366.21, subd. (e)(1).) An examination of the totality of the circumstances is necessary to determine whether placement of a child with her parent would be detrimental. (See *A.H. v. Superior Court* (2010) 182 Cal.App.4th 1050, 1059 ["Detriment can be shown many different ways."].) In evaluating detriment, the juvenile court must consider the social worker's report and recommendations (§ 366.21, subd.(e)(1)), the extent to which the parent "availed themselves" of provided services (*ibid.*), as well as "the efforts or progress the parent has made toward eliminating the conditions that led to the child's out-of-home placement" (*In re Yvonne W.* (2008) 165 Cal.App.4th 1394, 1400). The court also may consider evidence of a parent's past conduct when assessing the current risk of detriment. (*In re Jasmon O.* (1994) 8 Cal.4th 398, 424 [" 'a measure of a parent's future potential is undoubtedly revealed in the parent's past behavior with the child' "]; *In re Cole C.* (2009) 174 Cal.App.4th 900, 917 ["court may consider the parent's past conduct as well as present circumstances" in determining if child would be at substantial

risk of harm if returned home].) A parent's denial of protective issues is a valid factor when evaluating whether a child may safely be returned home. (See *Georgeanne G. v. Superior Court* (2020) 53 Cal.App.5th 856, 865, 867–868 (*Georgeanne G.*).)

"We review the juvenile court's finding of detriment for substantial evidence. [Citations.] Under that standard we inquire whether the evidence, contradicted or uncontradicted, supports the court's determination. We resolve all conflicts in support of the determination, indulge in all legitimate inferences to uphold the findings and may not substitute our deductions for those of the juvenile court. [Citations.] However, '[s]ubstantial evidence is not synonymous with any evidence. [Citation.] To be substantial, the evidence must be of ponderable legal significance and must be reasonable in nature, credible, and of solid value.' " (*Georgeanne G., supra*, 53 Cal.App.5th at pp. 864–865.)

Mother contends substantial evidence did not support the court's detriment finding. She argues the court relied on evidence—her case history, namely, her lack of consistent compliance with drug testing—that was "too vague" to constitute " 'reasonably specific and objective' " evidence from which the juvenile court could conclude K.G.'s well-being would be threatened if she were returned to mother at that time. (Quoting *Blanca P. v. Superior Court* (1996) 45 Cal.App.4th 1738, 1750 (*Blanca P.*).) Mother argues that, while she "may not have fully alleviated the initial protective issues," the evidence demonstrated "her commitment to safely caring for K.G.": she consistently had been testing clean; she was participating consistently and actively engaged in individual and substance abuse counseling sessions where she was learning coping techniques and developing a relapse prevention plan; she was

participating in a 12-step program; and she was visiting K.G. regularly. Mother acknowledges DCFS reported that she sometimes struggled managing her children during visits, but notes her visits were appropriate and positive, and she was able to address behavioral issues. Mother notes the court found she had made substantial progress in her case plan and ordered her visits with K.G. to be unmonitored. She argues there was no evidence that she could not safely meet K.G.'s needs.

DCFS does not dispute that mother had been testing regularly—and consistently testing clean—in the months leading up to the review hearing. As the court found, her compliance with her case plan had been substantial. Our review of the record, however, confirms there was substantial evidence to support the juvenile court's detriment finding—that it was more probable than not that K.G.'s safety, protection, or physical well-being would be at substantial risk if she were returned to mother's care.[5] Mother's compliance with her case plan was not dispositive of the question of K.G.'s safety in mother's care. (*Georgeanne G., supra*, 53 Cal.App.5th at p. 867 [" '[S]imply complying with the reunification plan by attending the required therapy sessions and visiting the children is to be considered by the court; but it is not determinative. The court must also consider the parents' progress and their capacity to meet the objectives of the plan; otherwise the reasons for removing the children out-of-home will not have been ameliorated.' "].)

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[5] The court's minute order states it made the detriment finding based on clear and convincing evidence. The statute, however, requires the finding be made only by a preponderance of the evidence. (§ 366.21, subd. (e)(1).)

Moreover, the juvenile court did not simply rely on mother's case history in assessing the risk to K.G., as mother suggests. Along with mother's past conduct, the court considered mother's *present* circumstances and progress, and the other evidence before it.

It is undisputed mother had been regularly attending individual and substance abuse counseling sessions as mandated by her case plan. Mother's case plan also required that she participate in a 12-step program *with a sponsor*, however. The court specifically noted mother had not yet obtained a sponsor. Mother had provided no proof of her attendance at NA/AA meetings. Although mother in June said she was attending in-person meetings, she never returned the court card the social worker had given her to obtain signatures proving her attendance. The social worker also was unable to reach the individual who facilitated the meetings and whom mother had identified as a potential sponsor. Nor did mother ever give the social worker the digital attendance verifications she said she had to confirm her participation in on-line NA/AA meetings. The court reasonably would want confirmation of mother's participation in the meetings, rather than to rely on mother's self-reporting. After all, mother continued to state she hadn't used illicit substances since November 2021 despite K.G.'s positive toxicology screening and later withdrawal symptoms,[6] mother's positive test at K.G.'s birth, and her positive tests on April 15, May 30, and June 5, 2024. Mother even denied substance use after she tested positive following the review

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[6] According to K.G.'s foster parent, the baby had experienced tremors after her release from the hospital and initially had digestive issues.

hearing. (See *In re Andrea G.* (1990) 221 Cal.App.3d 547, 553 ["successful treatment cannot occur until [the parent] accepts responsibility for her actions"].)

Mother's service provider stated mother had "shown progress in identifying emotional triggers and implementing coping strategies to regulate her emotions." She also had been "*exploring* strategies that have successfully managed cravings" and "identifying past triggers." (Italics added.) The provider opined mother's "engagement reflect[ed] her dedication to preventing relapse and improving her overall well-being." Mother "continue[d] to work on areas of growth." In other words, mother—commendably—was actively engaged and participating in her counseling programs, but she still had work to do. Indeed, mother had six individual counseling and seven substance abuse counseling sessions to complete—another six to seven weeks left in her programs. (Cf. *Georgeanne G., supra*, 53 Cal.App.5th at pp. 859, 861, 868–869 [reversing finding of detriment at 18-month review hearing where mother had completed her case plan and there was no evidence her companion—who had been violent with ex-wife—posed a risk of violence to child, rendering detriment finding speculative].) Moreover, mother's consistent, negative testing was fairly recent. As mother had yet to complete her services—and previously had relapsed just four months after her twins were returned to her care[7]—the court

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[7] As we explained in our earlier opinion, K.G.'s older twin siblings—born positive for amphetamine in November 2021—were returned to mother's care in December 2023 on the condition that she continue to test negative. She did at first but then missed 11 tests from late January to early April 2024 when she and K.G. tested positive for amphetamine at K.G.'s birth.

reasonably could conclude regular participation in NA/AA with a sponsor was crucial to mother's ability to meet the case plan's objective: maintaining her sobriety. A sponsor could provide support to mother to help her prevent another relapse, especially if she were feeling " 'down' "—as she had been when she missed the October test—or overwhelmed.

Critically, K.G. still was just a baby. She required constant care and supervision and was entirely dependent on her caregiver to meet her needs. Mother's ability to maintain her sobriety thus was vitally important to ensure K.G. would be safe in mother's care. (See *In re N.R.* (2023) 15 Cal.5th 520, 558–559 ["It is reasonable for courts to infer that very young children require a substantial degree of close supervision" and "a child's youth and maturity level can bear upon the care that the child may require and whether a parent's or guardian's substance abuse places the child at substantial risk of serious physical harm."].)

The evidence before the court was not vague; it was specific and of " 'solid value.' " (*Blanca P., supra*, 45 Cal.App.4th at p. 1750.) Based on its totality, the court reasonably could determine that K.G.—as young as she was—could not safely be returned to mother's care until mother completed her services—including finding a sponsor and showing proof of her NA/AA participation—and further demonstrated she could maintain the consistent, negative testing she had begun.

DISPOSITION

The juvenile court's December 2, 2024 order is affirmed.

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EGERTON, J.

We concur:

EDMON, P. J.

ADAMS, J.