

**Illinois Department of  
Children & Family Services**

**CITIZEN REVIEW  
PANELS**

**FINAL REPORT**  
*FISCAL YEAR 2000*

**December 1, 2000**

**STATE OF ILLINOIS  
DEPARTMENT OF CHILDREN AND FAMILY SERVICES**

**CITIZEN REVIEW PANELS**

**REPORT OF ACTIVITIES AND RECOMMENDATIONS  
Federal Fiscal Year 2000**

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# I. INTRODUCTION

## *Purpose of Citizen Review Panels*

In 1996, the U.S. Congress amended the Child Abuse Prevention and Treatment Act (CAPTA). In its amendments to CAPTA (SEC.106 [42 U.S.C. 5106a]), Congress required states to establish Citizen Review Panels in order to maintain eligibility for funding from the Child Abuse and Neglect State Grants Program.

The federal statute indicates that the purpose of the Citizen Review Panels is to “evaluate the extent to which the agencies (state and local) are effectively discharging their child protection responsibilities.” The panels must examine the policies, procedures, and, where appropriate, specific cases, handled by the state and local agencies providing child protective services. In particular, the panels must evaluate:

1. The State CAPTA plan and specific areas of the child protective system which are addressed therein;
2. The state’s compliance with federal child protection standards and assurances set forth in the CAPTA legislation; and
3. Any other criteria which the Panels consider important to ensure the protection of children, including the coordination of child protection with foster care and adoption services and the state’s review process for child fatalities and near fatalities.

The revised CAPTA requirements called for each state to establish Citizen Review Panels by July 1, 1999. The panels must meet at least quarterly and must produce an annual, public report of their activities. A state has the option to designate existing committees or advisory entities to serve as Citizen Review Panels if these entities meet the federal requirements.

## *Development of Citizen Review Panels in Illinois*

The Illinois Department of Children and Family Services has established four Citizen Review Panels to examine the policies and procedures of state and local child protective service agencies. The Illinois Citizen Review Panels have been developed according to requirements set forth in the federal Child Abuse Prevention and Treatment Act (CAPTA) as amended in October 1996 and subsequent Program Instructions provided by the Administration on Children, Youth and Families (ACYF).

Authorizing legislation for the Illinois Citizen Review Panels was introduced as part of Senate Bill 1109 in February 1999 amending the Children and Family Services Act (20 ILCS 505/5). It was passed by the General Assembly and became effective with the Governor’s signature in June 1999.

A Citizen Review Panel Steering Committee was formed in May 1999 to oversee the process and to formulate basic guidelines regarding the operation of the individual panels. The Steering Committee includes DCFS administrators in the areas of Child Protection, Program Operations, and Administrative Case Review as well as the DCFS coordinator, chairperson and vice-chairperson of each individual panel. The CRP Steering Committee met on 5 occasions during the year—June 2, 1999; July 7, 1999; October 6, 1999; February 10, 2000; and June 13, 2000—to discuss the first year approach for organization of the panels.

In forming the individual panels, the Steering Committee invited several existing DCFS advisory groups to consider adding citizen review activities to their overall mission and responsibilities. Each group identified specific areas of interest (i.e. child abuse reporting, investigative procedures, multidisciplinary coordination of agencies, child fatalities) for their initial inquiry and review. A DCFS Coordinator has provided general orientation and training to each group at their meetings throughout the year. The individual Citizen Review Panels are:

1. The Child and Family Services (CFS) Advisory Council;
2. The Statewide Citizen's Committee on Child Abuse and Neglect (SCAN)
3. The Children's Justice Task Force (CJTF)
4. The Child Death Review Teams (CDRT) Executive Council

Each panel is made up of a variety of members who are experienced in the field of social services to children and families. The first two panels (CFS Council and SCAN) have members who represent professional organizations, child welfare agencies, volunteer associations, and concerned citizens. The other panels (CJTF and CDRT) have members from numerous disciplines including medicine, mental health, law, criminal justice, public health, education, social work, and child advocacy. Supporting documents listing all of the panel members are included in Appendix E.

This *Citizen Review Panel Report for FY 2000* contains a summary of activities and recommendations for each of the Citizen Review Panels. The Report also includes a discussion of several topic areas (Section III, Observations and Issues) that received attention by two or more panels. These topic areas will be the focus for further research, recommendations, and follow-up planning during the upcoming meetings of the Steering Committee in FY 2001. Finally, a section is provided to indicate the planned scope of Citizen Review Panel activities during the next year and to summarize the response which the Illinois Department of Children and Family Services has made to first year recommendations.

### **Overview of First Year Approach to the Citizen Review Process**

During this first year of establishing and developing the citizen review panel process, the Illinois Department of Children and Family Services concentrated on accomplishing two goals.

1. The first goal was to provide orientation and training to each panel on what it means to be a “Citizen Review Panel.” Panel members were provided with copies of the guidebook, *Citizen Review Panels for the Child Protective Services System: Guidelines and Protocols* written by Veronika Kot, Charles Bruner and Stephen Scott and published in 1998 by the National Committee to Prevent Child Abuse. Selected sections of this Guide were read and discussed by the Steering Committee and presented at the panel meetings for further review and discussion. The Guide is filled with useful information and has assisted all the panels in gaining a good awareness of their new responsibilities. The Citizen Review Panels have approached their mission with enthusiasm and will continue to receive a variety of orientation and training as their duties require.
2. The second goal for the first year has been to provide each panel with an in-depth understanding of a particular part of the Illinois child protection system. In order to accomplish this goal, the DCFS Coordinators asked each committee serving as a Citizen Review Panel to read and review a list of the various assurances that must be certified when the Department submits its State Plan under CAPTA. From this list, each panel selected two or three assurances relating to an area of the child protection system that interested them for further inquiry and study. Although each panel did not fully explore every one of its selected topics, this approach did allow the various committees/panels to self-select a relatively specific area for study and review which they found appealing and manageable. The list of assurances (taken from the Guidebook, p. 28) with the appropriate panel selections is provided in Appendix B.

After a year of orientation to DCFS child protection policies and planning and the citizen review process, all of the Citizen Review Panels have gained sufficient knowledge to feel comfortable in making recommendations and proceeding to undertake new activities during their second year of operation.

## **II. ACTIVITIES AND RECOMMENDATIONS**

### **CHILDREN AND FAMILY SERVICES ADVISORY COUNCIL**

#### **SUMMARY OF ACTIVITIES**

The Children and Family Services Advisory Council is a statutorily established advisory committee to DCFS that is appointed by the Governor. Its 17 members are appointed to staggered 4-year terms which can be renewed. It meets bi-monthly during the odd-numbered months of the year and alternates its meeting locations between Chicago and Springfield. Frances Pace Barnes has been the CFS Council chairperson since January 1999 and Micki Chulick has served as vice-chairperson during this same period. Celeste Webster is the DCFS meeting coordinator.

Since July 1999, the CFS Advisory Council has been engaged in activities related to its responsibilities as a Citizens Review Panel. Meetings were held in July, September, and November 1999 and in January, March, May, and July 2000. Each meeting included a substantial commitment of time to the presentation and discussion of DCFS policies and procedures for child abuse reporting and investigation. Because the CFS Advisory Council has an extensive background of knowledge about DCFS, the information was designed to highlight particular features of the Division of Child Protection.

During the July, 1999 meeting, the CFS Advisory Council determined that it wished to focus its first year inquiry on gaining a thorough understanding of the DCFS Child Abuse Hotline and its operations in order to address the way in which reports of abuse and neglect are handled in Illinois. As part of its approach the Council pursued the following activities in conjunction with developing a number of group recommendations.

The CFS Advisory Council orientation activities included:

1. Review of the *Manual for Mandated Reporters* and a discussion of key sections from the Abused and Neglected Child Reporting Act (ANCRA) (325 ILCS 5/1-11). Copies were distributed for further reading.
2. Viewing of a training videotape about the operation of the State Central Register and the Child Abuse Hotline.
3. Touring the State Central Register and reviewing quality assurance data on types and volume of calls handled during specific years/months.
4. Listening in on reports of child abuse/neglect handled by the Hotline. (Committee members were assigned to specific call floor workers for 1 hour).
5. Discussion of DCFS Procedures 300.30, 300.40, and 300.50 which explain child abuse reporting and provide details about the allegation-based system of investigation used by the Department.

6. Review of the LEADS protocol (Law Enforcement Agencies Data System) utilized by the Illinois State Police to track criminal history records within the state.
7. Presentation and review of internal training documents, particularly the SCR Manual which sets standards for Hotline/SCR workers.

## RECOMMENDATIONS

The CFS Council made the following recommendations for inclusion in the first Citizen Review Panel Report.

1. DCFS should promote ongoing training of mandated reporters. Consideration should be given to establishing a specific training requirement through legislation.
2. Mandated reporter training should be a required component of continuing education programs for teachers.
3. Notifications to mandated reporters on the outcome of the report (whether “indicated” or “unfounded”) should include the name of the child as well as the perpetrator.
4. When call-back messages are taken by the Child Abuse Hotline, the time to return a call should be 30 minutes or less.
5. The DCFS Hotline should work to reduce the rate of abandoned calls (situations where the caller hangs up before the Hotline has a chance to answer).
6. DCFS should work with the State Board of Education so that DCFS Hotline reports on a child **that are indicated** can be included as part of the student’s school record if the student transfers to another school.
7. DCFS investigators need to be able to obtain information more quickly from other systems (i.e. law enforcement, schools, hospitals) in order to protect children from potential harm.
8. During investigations, when it is evident a family has moved from another state, DCFS needs to have a policy and procedure for obtaining information from the other state on previous situations of abuse or neglect.
9. DCFS investigators should always check the criminal background history of an alleged perpetrator where allegations of abuse are involved. The state-based LEADS data system check may need to be supplemented by additional requirements for accessing a national database.

The CFS Advisory Council had planned to examine policies regarding the expungement of unfounded child abuse and neglect cases but deferred this consideration to meetings planned during FY 2001.

## **STATEWIDE CITIZEN'S COMMITTEE ON CHILD ABUSE AND NEGLECT (SCAN)**

### **SUMMARY OF ACTIVITIES**

The Statewide Citizen's Committee on Child Abuse and Neglect is established under Section 11.7 of Illinois' Abused and Neglected Child Reporting Act (ANCRA). Its twenty members are "broadly representative of social and economic communities across the State" and include individuals distinguished in human services, medical care, rights of the disabled, law, and community life. SCAN members serve 3-year terms, are appointed by the Director of DCFS, and advise the Department of Children and Family Services on child abuse prevention services and other aspects of child abuse and neglect. Meetings are scheduled bi-monthly in the even-numbered months. The chairperson of SCAN is Sue Walton and the vice-chairperson is Gwen Mastin; both have served as leaders of the group since 1998. The DCFS Coordinator is Gail Jackson.

Since October 1999, the SCAN Committee has been actively pursuing its responsibilities as a Citizens Review Panel. During the meetings held in October and December 1999 and in February, April, and June 2000, the agendas included a substantial commitment of time to the presentation and discussion of DCFS policies and procedures for child abuse reporting and investigation. These policies and procedures provided an introduction and orientation to the SCAN committee regarding the operations of the DCFS Division of Child Protection. With this background, the Committee prepared its members to consider select areas for in-depth review and analysis and to develop appropriate standards for group recommendations.

The orientation activities included the following:

1. Viewing of a training videotape about the operation of the State Central Register and the Child Abuse Hotline.
2. Presentation and discussion of the Child Endangerment Risk Assessment Protocol (CERAP)
3. Summary presentation of the CERAP Legislative Reports from 1996 and 2000 (Full copies were mailed to members for individual research and follow-up)
4. Review and explanation of the Domestic Violence Assessment Screening Form (used in conjunction with CERAP)
5. Discussion of DCFS Procedures 300.70 "Referrals to Law Enforcement and State's Attorneys"
6. Presentation on the *Madison County Protocol for Child Sexual Abuse/Serious Physical Abuse* (copies were mailed for reference and follow-up)
7. Presentation on "Draft Policy Guide for Concurrent Investigations" between child protection and licensing staff (licensed facilities named in ca/n report)

At the SCAN meeting on February 14, 2000, Deputy Director Ed Cotton presented 11 topics for in-depth study and review. The committee members selected three topics for ongoing examination during the next 6-9 months. The topics are:

- A. The role of law enforcement agencies in DCFS child abuse and neglect investigations.
- B. The use of safety plans in child abuse and neglect investigations.
- C. The procedures for investigating child abuse and neglect in licensed facilities

### **RECOMMENDATIONS**

The SCAN Committee confirmed its recommendations for FY 2000 at the August, 2000 meeting.

1. The language in Procedures 300.70 is outdated, especially with regard to references for contacting the Illinois State Police. The Division of Criminal Investigation has been reorganized and there are no "Zone Commands" as indicated in the current document.
2. Working agreements between DCFS and local law enforcement agencies should be in writing. DCFS should consider working with the Illinois Association of Police Chiefs to implement a statewide protocol.
3. DCFS child protection workers and law enforcement officers need to receive joint training on child abuse and neglect investigation and better understand common risks posed to child health and safety.
4. Protocols and working agreements need to be revised on a regular basis in order to resolve problems/issues and modify requirements that are duplicative or ineffective.
5. The Department needs a clearly defined monitoring procedure for identifying areas in the state where there are problem partnerships between DCFS and law enforcement and/or DCFS and State's attorneys.

## **ILLINOIS CHILDREN'S JUSTICE TASK FORCE**

### **SUMMARY OF CITIZEN REVIEW PANEL ACTIVITIES**

The Children's Justice Task Force is a multidisciplinary advisory group to the Department of Children and Family Services that is mandated by federal requirements in the Child Abuse Prevention and Treatment Act. The Task Force has 28 members drawn from the fields of child protection, law enforcement, medical and mental health services, attorneys for the prosecution and defense, criminal and civil court judges, education, child advocates, and parent advocates. It was established in 1989 and makes annual recommendations to DCFS for improving the coordination of various agencies and departments that are involved in the investigation of child sexual abuse and exploitation, the investigation and review of child fatalities, and the conduct of civil and criminal court proceedings involving the child and/or perpetrator. DCFS receives grant funding from the Office on Child Abuse and Neglect, U.S. Department of Health and Human Services, to administer projects based upon the Task Force recommendations.

The Director of DCFS appoints members of the Children's Justice Task Force to staggered 4-year terms with one potential renewal term. Meetings are held quarterly with an Annual Meeting scheduled in early May. The chairperson during 1999-2000 was Margaret Green; the chairperson during 2000-2001 is Dr. Bette Ann MacIntosh. John Piland has served as vice-chairperson since 1999. The DCFS Coordinator is Dr. Cheryl Peterson. The Children's Justice Task Force—which undertook a major 3-year review of its recommendations in FY 2000—decided to focus on two topics of inquiry during the initial orientation to Citizen Review Panel activities. These two topics related to DCFS assurances for 1) appointment of a guardian ad litem in cases with judicial proceedings; and 2) cooperation of law enforcement, courts, and appropriate state agencies in child protection services.

Meetings of the Children's Justice Task Force were held in September and November 1999 and in January, March, May, and June 2000. The next meeting is scheduled for September 2000 at which time the Children's Justice Task Force will begin a process of case file review.

#### ***Provisions for Appointment of a Guardian ad litem in cases with judicial proceedings***

- The Task Force examined the portion of the Illinois Juvenile Court Act (705 ILCS 405/2-17) that describes the provisions for appointment and training of a guardian ad litem.
- A representative from the DCFS training division presented information on the training curriculum and approval process that DCFS oversees and monitors with regard to guardians ad litem in counties of 100,000 to 3,000,000 population.

- A representative of the Illinois CASA Association presented information on the role of Court Appointed Special Advocates, especially with regard to those county-based programs which serve as guardian ad litem programs.
- The Task Force discussed various concerns that agencies and individuals had with regard to the role of guardians ad litem and their representation of a child's best interest.

**Recommendations:**

1. DCFS needs to evaluate the adequacy of the initial training for GALs as required by the Juvenile Court Act.
2. The Juvenile Court Act needs to include a requirement for continuing education on a regular basis for all GAL appointees.
3. DCFS should encourage the affiliation of smaller counties with larger counties for purposes of sharing technical assistance needed to recruit and train GALs.
4. Local CASA agencies need to invite lawyers to participate in GAL trainings whenever feasible, particularly with regard to topics in the area of child development and child welfare services.

***Cooperation of law enforcement, courts, and appropriate state agencies in CPS***

- The Children's Justice Task Force regularly looks at interdisciplinary issues related to child protection reports and investigations.
- The DCFS Division of Child Protection provides updates at every meeting of the Children's Justice Task Force on new policies and procedures affecting the operation of CPS.

**Recommendations:**

1. DCFS should develop interstate child protection agreements with CPS agencies in neighboring states.
2. DCFS should encourage the expansion of Children's Advocacy Centers and the development of protocols for coordinated investigation of child abuse.
3. Better coordination of services between DCFS and state/local domestic violence programs should be developed.
4. There should be more education and training for medical and mental health professionals on child abuse assessment and treatment within a multidisciplinary setting.
5. DCFS should support training for judges on awareness of child abuse and child development issues, working in conjunction with the Administrative Office of Illinois Courts and the Court Improvement Project.
6. DCFS needs to support and expand training for GALs and CASAs.
7. Programs for joint training to DCFS and Law Enforcement on forensic interviewing of children should be developed.

*Other Considerations related to Citizen Review Panel responsibilities*

- Committees within the CJ Task Force are working on a handbook of confidentiality issues. As part of this project, the committees will examine the methods currently used to preserve the confidentiality of DCFS records.
- The Task Force has begun a review of the new DCFS process for appealing indicated findings of abuse and neglect. A beginning discussion occurred in May 2000. The Legal and Legislative Committee is in charge of follow-up.

## **CHILD DEATH REVIEW TEAM EXECUTIVE COUNCIL**

### **SUMMARY OF ACTIVITIES**

The Child Death Review Team Executive Council is a relatively new group that was formed in 1998 to help coordinate the operations of the 9 regionally-based child death review teams begun in 1995. The membership of the CDRT Council includes the chair and vice-chair from each of the 9 regional teams. Its purpose is to provide statewide leadership and advocacy for the recommendations of the regional teams, plan an annual statewide training symposium, and oversee the preparation of an annual CDRT report. Meetings were held in October 1999, February 2000, May 2000, and July, 2000.

Because of their regular review of child death cases where the victims have been involved in the Illinois child protection/child welfare system, the CDRT Council members did not require any special orientation activities related to the operations of DCFS child protection. With only a few exceptions, the chairs and vice-chairs on the CDRT Council have been active members of their regional child death review teams since those teams were established in 1995 and have regularly attended the annual training symposia. Dr. Neil Hochstadt, who chairs the Council, has been involved in child fatality review since the late 1980's, and he led the Illinois Child Fatality Task Force which drafted state legislation in 1994 for the subsequent establishment of the regional teams.

The CDRT Council determined that the group would address the following topics for citizen review panel inquiry and recommendations during FY 2000: 1) procedures for reporting and dealing with medical neglect; and 2) provisions for public disclosure of findings about cases of child abuse or neglect resulting in fatality or near fatality.

### **RECOMMENDATIONS**

#### **Medical Neglect**

1. Need to update list of immunizations, specifically to adopt current requirements of the Illinois Dept. of Public Health. Changes made recently include the addition of Hepatitis B vaccines (Hep B); Hemophilus Influenzae (Hib); and Varicella (Var).  
*Changes to Rules and Procedures, Appendix B, Allegation #79 "Medical Neglect."*
2. Provide an updated version of the statewide Perinatal Regional Centers and the listing of hospitals they serve. The list of Perinatal Centers is attached as Appendix C in Procedures 300.
3. Need to reconsider whether the allegation #85, *Medical Neglect of Disabled Infants*, should be reported to law enforcement and state's attorney. Current language excludes

this Priority 1 allegation from the verbal notification provision that is in effect for other Priority 1 allegations. (Similar consideration might also be appropriate for Allegation #81, Non-organic Failure to Thrive)

4. Medical providers and health departments need to be educated about the serious medical conditions of children that require close supervision and regular follow-up. Failure of the parents to bring children for medical appointments or to follow instructions for care must be seen as medical neglect and reported to DCFS. Building a positive client relationship must not interfere with reporting serious safety or health concerns.
5. DCFS staff (i.e. follow-up or intact family workers) need better training to understand chronic medical conditions or serious malnutrition that require more than one visit to the doctor or health clinic. Failure to provide sustained or intensive follow-up can be a contributing factor in a child's death, especially that of a young infant.
6. DCFS needs to provide better information to medical professionals about the consequences of their failure to report instances of medical neglect.
7. Information on the procedures which DCFS follows in cases where a mandated reporter is cited for "failure to report" should be more widely disseminated to DCFS staff and to review panels, especially Child Death Review Teams and Citizens Review Panels. Monitoring of these procedures for effectiveness is needed.
8. In cases where a DCFS ward (child) is the victim of gross medical malpractice that leads to death, DCFS should establish a policy by which the state may take appropriate legal action against the responsible physician or medical facility.

### **Child Fatalities**

The CDRT Executive Council has initiated a new data system for tracking child deaths and preparing an annual report for the State of Illinois. The Report for 1999 is undergoing preparation during the next several months and will be distributed in January, 2001. This will provide reliable information on child deaths due to abuse and neglect.

### **Other Issues**

*Temporary Protective Custody in Domestic Violence Cases [Procedures 300.120 (8)].* There needs to be a better definition of the statement that "attempts must be made to prevent placement through the provision of hard services." The language of this section does not give a clear meaning to "hard services."

The CDRT Executive Council debated some of the current issues related to medical examination of children living in homes where there is injury to a parent as a result of spousal abuse or other familial violence. Risk factors, especially for younger children and infants, were ranked at a high level and indicated the need for possible child protective intervention.

### III. OBSERVATIONS AND ISSUES

In their recommendations for FY 2000, the Illinois Citizen Review Panels addressed a number of topics from a variety of perspectives. Some common ideas began to emerge that resulted in different, but related, observations on current issues involved in protecting children. In this section, these common themes are presented briefly with a few references to the discussion and recommendations made by the panels. These areas of common concern will be studied more thoroughly during the second year of the CRP process (FY 2001) and will be considered during upcoming meetings of the CRP Steering Committee.

#### *Families who move frequently*

Every one of the CRP panels considered some aspect of this issue, particularly as it was brought to their attention by a case where a child died or where a family “fell through the cracks” because some critical piece of information was not available at the time of a child protection investigation. Discussion centered around issues such as the following:

- The need for interstate agreements that allow access to child protection records across state boundaries (CFS, CJTF). *Families are increasingly mobile. A thorough investigation must consider a family’s history in another state and find out any specific information that may put a child at risk of harm (for instance, records of previous child abuse/neglect reports, assessments, investigations, allegations, court actions).*
- The need for better communication and coordination, including investigative protocols, between DCFS and law enforcement at the local, state, and national level (CJTF, CFS, SCAN). *DCFS and law enforcement are both involved in serious cases of physical abuse and sexual abuse and background checks are done by both agencies (DCFS—CANTS check; Law Enforcement—LEADS check). Background checks provide essential information about a family’s movement within the state and about previous instances of child abuse/neglect or criminal activity. Better access to information at a national level is needed.*
- The need to include information about an **indicated finding** of child abuse and neglect in a child’s school record (CFS, CDRT). *Schools have the most regular contact with children outside the home environment. Schools should have access to information that allows them to provide ongoing monitoring of a child’s situation so that recurrences of abuse or neglect can be prevented (i.e. social workers, nurses, counselors can assist with follow-up services and family communication; teachers can be alert to physical or behavioral symptoms of abuse/neglect).*

### **The complexity of risk assessment**

A number of factors within the home and family environment can put children at risk for abuse or neglect. Because child protection investigators are not experts in assessing every problem in a family, they need access to the appropriate tools and training that will help them determine if a child is at serious risk of harm.

Risk assessment in the following areas is most needed:

- Family assessment for domestic violence (spousal abuse) or other family violence (CJTF, CDRT). *Child protection needs to coordinate with law enforcement and domestic violence service providers in developing screening tools and joint training. Family violence would include things like verbal intimidation, animal cruelty, and gang membership.*
- Family assessment for special medical conditions, disabilities, and mental illness (CDRT). *Follow-up services to families may need to be more frequent or delivered in a different way to protect children who have complex medical needs or where parents may not be fully capable of accessing treatment.*
- Family assessment for abuse of illegal drugs and alcohol. *A screening tool for this already exists and is in use. Abuse of alcohol and drugs, however, definitely needs to be addressed as a component of assessments for domestic and family violence.*

### **The involvement of courts in child protection**

The Children's Justice Task Force did the most concentrated study during this past year with regard to legal and court systems and how they interact with DCFS child protection. Several other CRP panels, however, did discuss some issues related to the statutory requirements and official policies that DCFS follows in fulfilling its child protection mandates. In general, the discussion revolved around the following topics:

- The courts play a pivotal role in assisting DCFS with child protection issues that involve careful assessment, supervision, and monitoring of families with multiple problems (CJTF). *The "Family Court Model" allows one judge to supervise multiple legal actions occurring simultaneously in a family (divorce or custody, juvenile delinquency, child abuse/neglect, domestic battery or desertion). Courts are important in identifying community service needs and making sure that legal issues are resolved in a timely manner that benefits children rather than adults.*
- The courts need to support the recruitment and training of appropriate lawyers to serve as a child's guardian ad litem (CJTF). *The Juvenile Court Act makes*

*specific requirements of GALS in larger population areas, but many rural parts of the state do not have the same mandates. The courts must more effectively assist child protection in making sure that all children receive quality legal services, including CASA representation where such programs exist.*

- Confidentiality issues related to the operation of multidisciplinary teams and child investigation protocols need clarification and monitoring (CFS, SCAN, CJTF). *Information needs to be shared in a timely and orderly manner if other agencies and systems are to assist DCFS with protecting children at risk for abuse and neglect. Confidentiality statutes across disciplines need to be codified and/or simplified in a way that allows all agencies working in a team arrangement to share information necessary to assure the safety and protection of children.*

### **Training for mandated reporters of child abuse and neglect**

Mandated reporter training was a topic area that received attention from every CRP panel. Although the panels acknowledged the training effort currently underway by DCFS, most panels recommended more be done. In particular, suggestions were made in the following areas:

- Providing specialized training for medical professionals and hospitals on recognition and reporting of child abuse with appropriate penalties for failure to report (CJTF, CDRT). *Medical professionals comprise a large segment of the mandated reporter population, and almost 25% of Hotline reports made by mandated reporters come from medical personnel. This indicates that physicians, nurses, and hospital staff play an important role in child protection which should be enhanced with targeted training, especially to reach those medical personnel who are in private practice.*
- Establishing a curriculum course on mandated reporting of child abuse/neglect and requiring it as a component for professional certification or employment (CFS). *Most mandated reporters are employed within the fields of social service, education, medicine, and law enforcement. Working with colleges and universities around the state to institute a curriculum course on child abuse recognition and reporting in these four disciplines would significantly improve current training efforts. Established professionals could be reached through workplace and employer training initiatives.*

## IV. FUTURE DIRECTIONS

### DCFS follow-up on Citizen Review Panel Recommendations

The FY 2000 recommendations of the four Citizen Review Panels were finalized during panel meetings held in July, August, and September 2000. An *Interim Report* on the Citizen Review Panel recommendations was completed on August 15<sup>th</sup> and circulated to DCFS staff in early September. Consequently, the Department of Children and Family Services is just beginning to fully analyze the recommendations and plan appropriate responses. Several important actions have already been taken, however, to work out responses to the recommendations, including:

1. Sending the *CPR Interim Report* to the DCFS staff in charge of the Best Practice Implementation Project;
2. Notifying the DCFS Office of Child and Family Policy of recommendations regarding the revision and updating of information contained in DCFS Rules and Procedures;
3. Referring recommendations about joint protocols and agreements between DCFS and law enforcement to the next meeting of the Illinois Child Advocacy Commission;
4. Referring recommendations regarding the Child Abuse Hotline to DCFS administrators in charge of the State Central Register; and
5. Conferring with DCFS Child Protection Administrators, Regional Managers, and CRP Panel Coordinators to research specific recommendations where DCFS already has programs and services in place.

In addition, this *Citizen Review Panel Final Report for FY 2000* will be circulated in November and December, 2000 to numerous DCFS administrative staff throughout the state who work in the areas of child protection, child welfare, administrative case review, training, legal services, and quality assurance. More detailed information to explain items 1-5 above is provided in the section below.

### Best Practice Implementation Project

The DCFS Best Practice Project is a multi-year, intensive effort to develop a practice model which emphasizes child safety, permanency, and well-being from intake to case closure. It incorporates all of the requirements of the federal Adoption and Safe Families Act, the Illinois Permanency Initiative, the Office of Inspector General recommendations, business standards, laws and regulations, consent decrees, accreditation requirements, and principles of sound child welfare practice. Best Practice involves analysis and reform of all Department protocols and systems to ensure that services to families are of the highest quality and consistent statewide. It guides organizational change, including all policy development, training, and the implementation of the new Statewide Automated Child Welfare Information System.

The core principle of Best Practice in Illinois is ensuring child safety. Child safety is the foundation of the model and it emphasizes consistency statewide in all intake and investigative procedures. Pathways derived from the allegations-based approach will provide clear guidance for each step of the DCFS screening and investigative process. Interventions and services will be clearly tied to a family's safety and risk issues. Because of this approach, the Best Practices Project will provide an appropriate resource for addressing most of the recommendations made by the CFS Council, SCAN, CJTF, and CDRT which relate to Hotline procedures, investigative protocols and processes, risk assessment tools, and medical and mental health follow-up services to families.

### **Office of Child and Family Policy**

The Office of Child and Family Policy is working in close coordination with Best Practices regarding changes in investigative procedures. This unit within DCFS officially oversees all changes to DCFS Administrative Rules and Procedures. Several of the Citizen Review Panel recommendations suggested some modification or change of language to sections of Procedure 300, *Reports of Child Abuse and Neglect*, following an orientation and review session. Most of the changes were suggested by SCAN and the CDRT Council to reflect current operational policies related to the State Police or the Department of Public Health.

### **Illinois Child Advocacy Commission**

The Commission was formed by Illinois legislation to oversee the multidisciplinary response to child abuse investigation mandated in the Illinois Children's Advocacy Center Act. Principal members of the Commission are the Attorney General, the Director of the State Police, and the Director of DCFS. The Child Advocacy Commission is a forum which oversees and advises local governmental entities about protocols that will more efficiently and effectively address situations of child sexual abuse and serious physical abuse, especially as these situations interface with the criminal justice system. Recommendations made by SCAN and by CJTF related to interdisciplinary training and protocols between DCFS and law enforcement agencies will be presented to this group for analysis.

### **State Central Register**

The State Central Register administers the operation of the Illinois 24-hour Child Abuse Hotline and supervises all DCFS activities related to reporting, intake, and background checks. It is a major unit within the DCFS Division of Child Protection. Staff from SCR have provided much of the orientation and training to the Citizen Review Panels during 1999-2000. The suggestions made by the CFS Council directly related to the Hotline are being monitored for improvement. The form which is returned to mandated reporters following the outcome of child abuse or neglect investigation is being modified to include the child's name as well as that of the alleged perpetrator.

## **Child Protection Administrators and Managers**

These staff are most directly involved in the day-to-day investigative practice that assures child safety and assesses family risk factors. Through the CRP Steering Committee and through their contact with direct service workers, this group of DCFS staff can follow-up on many aspects of the recommendations, providing data and research based on actual case situations. Especially with regard to recommendations that have a community-based focus—such as training for mandated reporters, tools for risk assessment, interagency agreements and protocols—these staff members can offer many suggestions of a practical nature that will help in responding effectively to the recommendations.

Other systems within DCFS and within the Illinois state system will be involved in helping with some of the recommendations, particularly as this relates to training of mandated reporters, training of guardians ad litem, and the relationship of DCFS child protection with the courts.

## **Plans for the FY 2001 Case File Review Process**

### **Overall Approach**

During the year, the various Citizen Review Panels will be engaged in a process of Case File Review as this relates to investigative files. Each panel will devote at least two meetings to the review of randomly selected case files gathered from DCFS offices throughout the state. Some panels may decide to spend more than two meetings on case file reviews, and each panel will have the option to specify certain types of cases (by allegation, by age of child, by geographic location, by status of perpetrator, by presenting circumstance) that are of particular interest to the group.

Following each Case File Review meeting, the DCFS coordinator of the panel will prepare a summary of comments, observations, and recommendations offered by the panel members as a direct result of their file review. As much as possible, this activity will include input from the chairperson/vice chairperson of the panel. This summary will be shared with Cheryl Peterson, the DCP Administrator for Citizen Review, within 3 weeks of the meeting. Members of the originating panel will be asked to clarify and further revise this summary of the case file review at their next regularly scheduled meeting and resubmit any changes.

The case file review process may further stimulate the Citizen Review Panels to examine particular aspects of DCFS policy and procedure with regard to child protection. With the assistance of the panel coordinator and such guest presenters as may be warranted, these selected topics relating to child protection policy and procedure will be discussed at the other meetings of the panels throughout the year. At various times, the panel coordinators will meet together to discuss the plans for their upcoming meetings and to review recommendations made by the panels. These meetings will be designed to

address common issues of CRP motivation, training, guidance, follow-up, and recognition.

### **Specific Approach**

The “Case File Review” is a process that is being implemented by all of the Citizen Review Panels. It is designed to help the members understand the policies, procedures, and processes which are followed by staff of the Department of Children and Family Services as they investigate reports of child abuse and neglect. The documents provided in a case file give a thorough and detailed account of the information gathered by the DCFS worker and other affiliated professionals that is utilized to determine whether or not “credible evidence” of abuse or neglect is evident. From this information, an investigation is either “indicated”(credible evidence of abuse/neglect exists) or “unfounded”(no credible evidence of abuse/neglect exists).

The Case File Review objectives are as follows:

1. Panel members will learn the basic components of an Investigative Case File.
2. Panel members will review documents and forms contained in the file to become familiar with the various activities and contacts completed during the investigation. (Small group discussion format)
3. Panel members will analyze the information in the file to understand the nature of the allegations and to understand the evidence used to support the case finding.
4. Panel members will formulate questions, comments or suggestions regarding the investigative case file(s) and the investigative process reflected in the file.

### **Assessing Panel interests and activities**

As part of the Citizen Review Panel objectives for FY 2001, the CRP Steering Committee will continue to develop a general approach for the panels to follow in carrying out their responsibilities. The Steering Committee will formally assess the case file review process followed by the panels and make recommendations to improve it based on feedback from the panel members. Individual panels will be asked to review their priority interests as identified in the first year (see Appendix B) and further refine or change these as they plan for activities during the second and third year of operation.

The CRP Steering Committee will meet at least three times in FY 2001 to review and focus the recommendations of the various CRP panels, assist the Administrator in preparing required reports, and promote the appropriate follow-up to the reports and recommendations. Members of the Steering Committee also provide communication linkage to divisions within the Department of Children and Family Services that may be contacted for information or technical assistance with regard to operation of the Citizen Review Panels.

## *APPENDICES*

**APPROVED JUNE 30, 1999  
GEORGE H. RYAN, GOVERNOR**

AN ACT in relation to child welfare.

**Be it enacted by the People of the State of Illinois, represented in the  
General Assembly:**

Section 5. The Children and Family Services Act is amended by adding 17a-13 as follows:

(20 ILCS 505/17a-13 new)

Sec. 17a-13. The Department shall establish a minimum of 3 citizen review panels for the purpose of evaluating the extent to which public and private agencies are effectively discharging their child protection responsibilities as required by the State plan submitted under guidelines of the federal Child Abuse Prevention and Treatment Act.

Each citizen review panel shall be composed of volunteer members who are broadly representative of State and community leaders, including members who have expertise in the prevention and treatment of child abuse and neglect. Existing advisory groups that have been established under State or federal law by the Department may be designated as citizen review panels if they have the capacity to perform the required functions.

(20 ILCS 505/17a-12 rep.)

Section 10. The Children and Family Services Act is amended by repealing Section 17a-12.

CHILD PROTECTION STANDARDS  
FOR  
ORIENTATION, TRAINING, & REVIEW

CITIZEN REVIEW PANELS  
FY 2000

**Table Four<sup>1</sup>**

**Assurances That Must Be Included In State CAPTA Plans And Are Subject To  
Compliance Review by Citizen Review Panels**

- The operation of a statewide program relating to child abuse and neglect that includes:
  - Provisions or procedures for reporting known and suspected instances of abuse and neglect; (CFS Council)
  - Procedures for immediate screening, safety assessment, and prompt investigations of reports; (SCAN)
  - Procedures that immediate steps are taken to ensure child safety; (SCAN)
  - Provisions for immunity from prosecution of individuals making good faith reports; (CFS)
  - Methods to preserve confidentiality of records; (CJTF)
  - Provisions for public disclosure of findings about cases of child abuse or neglect resulting in fatality or near fatality; (CDRT)
  - Cooperation of law enforcement, courts, and appropriate state agencies in CPS; (CJTF)
  - Provisions and procedures for prompt expungement of records available to the public for unsubstantiated or false claims; (CFS Council)
  - Provisions for appointment of a guardian ad litem in cases with judicial proceedings; (CJTF)
  - Provisions for Citizen Review Panels; (Steering Committee)
  - Provisions for appeal of official findings of abuse or neglect; (SCAN)
  - Provisions (within two years) for expedited terminations of parental rights for abandoned infants; (CFS Council)
  - Provisions (within two years) not requiring reunification in certain circumstances; (CDRT)
  
- Procedures for reporting and dealing with medical neglect. (CDRT)

<sup>1</sup> Kot, Veronika, *Citizen Review Panels Guidelines and Protocols*, p. 28.

CFS = Children and Family Services Advisory Council

SCAN = Statewide Citizen's Committee on Child Abuse and Neglect

CJTF = Children's Justice Task Force

CDRT = Child Death Review Team

## *ILLINOIS CITIZEN REVIEW PANELS*

### **QUALITY ASSURANCE QUESTIONS FOR CASE FILE REVIEW**

#### *INVESTIGATIVE FILE*

##### **Intake and Screening**

- Has the Hotline completed report intake information legibly, completely and accurately? Were previous reports of CA/N checked? Emergency response or normal response?
- How were notifications completed, if required, to police and state's attorney?
- What other background information has been obtained to prepare for the investigation? (i.e. contact reporter, LEADS check, DHS check)

##### **Investigation**

- Did in-person contact with the victim take place within 24 hours? What problems were noted in locating the victim/family?
- What types of safety concerns were noted on the Child Endangerment Risk Assessment (CERAP) form? Were these concerns addressed through a safety plan? Did the investigator seek input from the family and the victim?
- Were children interviewed in a safe and secure setting away from the perpetrator? Away from the scene of the abuse? Was a Children's Advocacy Center involved? Who conducted and observed the interview?
- How many other people were interviewed for information? Was the interview with the parent, guardian, or other caretaker thoroughly documented based on all allegations?
- Were all concerns of abuse/neglect addressed in the risk assessment?
- Who interviewed the alleged perpetrator? Is his/her relationship to the family thoroughly identified? Background checks made for criminal history (LEADS)?

##### **Protective Custody/Placement**

- If a child was taken into custody, what considerations were provided for choosing the placement location? Were relatives considered? Was the placement appropriate to the child's needs? (i.e. any special needs accommodated?)
- What considerations were given to provide intact family services or to protect the child at home?

### **Coordination with Other Agencies**

- What other agencies were involved in the investigation? What documents were contained in the file to document the involvement of other agencies?
- Are there any agencies that might have been helpful to the investigation that were not contacted? Were any agencies uncooperative? Did they respond promptly to DCFS requests?
- Was there an indication of the need to subpoena medical and mental health records? Did parents sign a consent form for the release of records? (Which ones, are they contained in the file?)
- What coordination was documented with regard to the child's school and educational needs?

### **Outcomes**

- Was the case "indicated" or "unfounded"? Was the rationale for the decision clear from the case documents?
- Were mandated reporters, perpetrators, and other agencies involved in the investigation given proper notification of the outcome?
- Did the investigation lead to juvenile court adjudication for abuse and neglect? Were criminal charges filed against the alleged perpetrator?

### **Investigation Follow-up**

- During the investigation were provisions made for services to the child(ren) and family? Were the services adequate to provide for the child's safety and well-being?
- Who provided the services? What were their qualifications and what services were provided? What indications are provided that the child benefited or participated in the services?

If the child was placed outside the home, was there a smooth handoff of case responsibility from the investigator to the placement case

## **Illinois Department of Children & Family Services**

### **CITIZEN REVIEW PANELS STEERING COMMITTEE**

May 2000

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Volunteers of America of Illinois  
Chair, CFS Advisory Council

Micki Chulick, Executive Director  
Community Coordinated Child Care  
Vice-Chair, CFS Advisory Council

Roy Harley, Executive Director  
Prevent Child Abuse - Illinois  
Member: SCAN & Child Death Review  
Team

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Mary Loken, Administrator  
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Bette Ann MacIntosh, M.D.  
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