

2016 Child Abuse and Neglect Prevention Plan

Illinois Department of Children and Family Services

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DCFS
Grant Management

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(Based on Law (2011CS 505 /4a) (from Chapter 23, paragraph 5004a)

Introduction:

The Illinois Department of Children and Family Services was established on January 1, 1964, as the nation's first cabinet-level state child welfare agency. Until that time, the state's child welfare responsibilities were housed in the Department of Mental Health. The Department's history is steeped in a long tradition of service and innovation for the state's most vulnerable children. Illinois is home to the nation's first juvenile court, counts itself as the birthplace of social work with Jane Addams' Hull House, was among the first state to establish child protection laws, was an early signatory to laws mandating the reporting of child abuse and neglect and created one of the nation's first statewide child abuse hotlines.

Under new leadership, DCFS continues to be one of many state agencies that plan and coordinate primary, secondary and tertiary child abuse and neglect prevention programs and services. As such, The Department is charged to administer child abuse prevention shelters and service programs for abused and neglected children, or provide for their administration by not-for-profit corporations, community-based organizations or units of local government. DCFS is also legislatively empowered with the administration of the Illinois Child Abuse Prevention Fund that is supported through the statewide tax check-off option and a portion of proceeds from the sale of Illinois commemorative birth certificates.

In this past year DCFS continued its commitment to join with agencies and organizations to expand its focus, achieve common goals, and to facilitate supports to those with unmet needs, especially those in situations where the potential for abuse and neglect was heightened. These activities included expanding or enhancing community-based, prevention-focused programs and accessible, effective, culturally appropriate activities to strengthen and support families. Community Based Child Abuse Prevention and matching funds build upon existing strengths.

The State Child Abuse and Neglect Prevention Plan is submitted annually and address the following four areas:

1. **Identification and definition of priorities, goals and objectives;**
2. Identification and estimation of the **resources necessary to investigate or process reports** of suspected child abuse or neglect;
3. Provision of necessary **follow-up services** for child protection, family preservation, and family reunification in indicated cases; and
4. Proposals for the most effective use of **existing resources** to implement the plan, including recommendations for the optimum use of private resources, local public resources, and state and federal resources.

Identification of Priorities and Goals:

The Department's priorities, goals and objectives are adequately reflected in the Department's Mission Statement, our Vision Statement and our adherence to the principles of children and family services that are listed in the annually revised Code of Federal Regulations (45 CFR 1355.25). The federal Administration for Children, Youth and Families-Children's Bureau (ACYF-CB) assures effective services for children, youth, and families by guiding States in developing, operating, and improving the continuum of child and family services through the Code of Federal Regulations.

DCFS Mission: To promote prevention, child safety, permanency and well-being. We bring the voices of Illinois children and families to the forefront, building trusting relationships that empower those we serve.

DCFS Vision: Communities strengthening families to ensure every child is safe, healthy and productive at home and in school.

DCFS Values:

We value Trust

We value Compassion

We value Accountability

We value Responsiveness, Relationships and Respect

We value Empathy

We value Safety

These Goals and Objectives represent the overarching priorities for those serving children and families in Illinois.

1. Education and Self-Sufficiency
2. Moving from Institutional to Community-Based Care
3. Paying for Value, Quality and Outcomes
4. Prevention and Population Health
5. Data Integration and Predictive Analysis
6. Build Relationships and Effective Communications Streams internally and externally by Engaging Youth and Their Families.

Resources necessary to investigate or process reports:

Investigation and processing of suspected child maltreatment begins with the **State Central Register** (Child Abuse Hotline), where DCFS staff urgently takes action steps necessary to protect the child in question. Protecting children involves a strong system of screening reports, a properly assessed "front end" investigation, effective use of investigative tools, and timely service delivery. In order to improve training for investigators, DCFS partnered with the local university in Springfield to create a **Residential Simulation Lab House**, as well as a mock courtroom, which opened in February 2016 to give new

investigators real-life experience in investigating maltreatment situations and in court testimony, with an ability to receive feedback.

In another resource to assist with investigations, in May 2016 DCFS began implementation of the **Eckerd Rapid Safety Feedback Program** to apply predictive analytics to identify the children at highest risk of death or serious physical injury that have had prior contact with the Department through an investigation. As part of this process, a review is conducted on investigations that have the highest probability of having a poor outcome (serious harm or death) utilizing a tool that focuses on 9 critical practices. Through work with Eckerd, the Department is attempting to impact the rate of serious maltreatment reports to children previously known to the Department.

DCFS also partners with the **Multidisciplinary Pediatric Education and Evaluation Consortium (MPEEC)**, which primarily provides expert medical evaluations for abuse allegations of serious harm to children in Chicago. There are other specialized medical programs located in Rockford, Peoria and Carbondale to assist child protection and law enforcement personnel in thorough forensic investigations of these incidents.

Enhancement to DCFS's **Human Trafficking** response has been made within the past year with the establishment of a Human Trafficking Program Manager, who provides oversight to the training of investigative and casework staff, foster parents, residential staff, and others. The Human Trafficking Program Manager also collaborates with other agencies and stakeholders, including The National Center for Missing and Exploited Children and the FBI. They lend their expertise to updates of DCFS policy and procedures. A media campaign and prevention curriculum for youth has been developed around the message of "You Are Not for Sale."

The **Child Rescue Unit** is a partnership between the Cook County Sheriff's Office and the Department of Children and Family Services whose aim is to improve the recovery of missing state children, helping to ensure their safety and protect their future. On any given day, up to 100 Child Protection Warrants remain outstanding in Cook County, with each one representing a child who is vulnerable to exploitation and crime. A multi-disciplinary unit staffed with at least nine on-the-ground recovery specialists, coupled with critical access to DCFS and law enforcement resources ensure these children are located and provided with the necessary support to help them thrive. The unit's aim is to reduce the number of outstanding CPW's by 50 percent within six-to-eight months, representing scores of children recovered from the streets. Three teams of two CCSO officers and one DCFS investigator, with a relief factor allow two teams to efficiently recover children from the streets every workday. The DCFS investigators and CCSO office-based administrative staff quickly locate, return and connect children with the appropriate DCFS services.

A significant contributor to overall systemic change to reduce child neglect and abuse is our partnership with the nine **Child Death Review Teams**. The Child Death Review Teams produce an annual accumulated report that summarizes findings from the teams and presents recommendations for improvement to the child welfare system. The document is presented to the Governor, the Illinois Legislature, and other interested parties every year in a continued effort to understand and reduce preventable child deaths in Illinois.

Child Advocacy Centers (CACs) continue to play a critical role in the coordination of investigative activities utilizing a multi-disciplinary approach. CACs bring together child protective services, law

enforcement, state's attorneys, medical and mental health providers to ensure thorough, victim sensitive interviews and interventions. The number of children receiving forensic interviews has steadily increased in Illinois since 2011. The CACs also provide support and services to families after the Initial victim contact.

Follow-Up Services:

Whenever needed, DCFS and its social service partners provide voluntary services that allow children to remain safely at home. When children must be removed from their home, services are made available in order to aid in family reunification as quickly as possible. In 2016, DCFS established a workgroup aimed at reviewing, analyzing, and revising core permanency practice procedures to establish a standard of care and service provision that considers family engagement, shared parenting as a means to empower birth parents, the child's sense of time in achieving permanency, and lifelong connections for families and children. Below is a partial list of services provided to Illinois families.

Intact Family Services are designed to make "reasonable efforts" to stabilize, strengthen, enhance, and preserve family life by providing services that enable children who are the subject of a founded abuse or neglect report to remain safely with their families. Intact family services are designed to promote permanency by maintaining, strengthening and safeguarding the functioning of families to: A) prevent substitute care placement, B) ensure the safety, permanency and well-being of children and, C) facilitate a safe, stable family environment. Adequately assessing the family's strengths and needs and assisting the family to achieve enhanced parenting skills are essential to the success of those efforts. Direct intervention and linkage to appropriate community services are provided with the goal being that families will demonstrate an increased capacity to provide for their children's needs.

The **Safe Families for Children** program was developed in 2002 by LYDIA, a Chicago based Christian social service agency, in partnership with churches, ministries, and local community organizations to offer voluntary placement arrangements to families whose children are at risk of being removed from their custody by child protective authorities. Safe Families for Children ("SFC") is a program oriented to prevent child abuse recurrence and removal into state protective custody by recruiting and overseeing a network of host families with whom parents can voluntarily place their children in times of need. Families retain legal custody and voluntarily place their children with SFC host families. The families share decision-making authority, and SFC volunteers and paid staff serve as case coordinators for the birth parents and the host families. In FY16 Intact Family Services providers placed 125 children in this program, and Child Protection Investigators worked with parents and the Safe Families program to place 143 children in host family homes statewide.

An additional resource for families is the **Family Advocacy Center** network. There are twenty three Family Advocacy Centers (FAC) operated by eighteen service providers located throughout the state. Family Advocacy Centers maintain a prevention-focused, holistic approach that builds on a family's existing strengths. The FAC focus is to serve a combination of families who have already been involved with DCFS and families who may not have been involved with DCFS but who have children age 6 and under and may be at greater risk of abuse and neglect. The FAC's tailor their services to the unique needs of the communities they serve. In addition to traditional counseling, referrals and training services, the FAC's may also offer services including mediation services, after-school programs, parenting coaching, classes and mentoring services in both English and Spanish, as well as other programs.

In FY16, the Department continued its partnership with **Be Strong Families** (BSF), NFP[??] whose role is serving child-welfare-involved families and youth & young adults by providing services that build the Strengthening Families™ Protective Factors in families and children involved with the child welfare system. All services provided by Be Strong Families contribute to achieving child welfare goals. These include training workshops and cafes for both parents (Foster, Birth) and youth and young adults (teen parents / youth in care). Youth and young adult services also contribute to building the Center for the Study of Social Policy's Youth Thrive™ Protective / Promotive Factor framework.

Norman Cash Assistance and Housing Locator Service are programs operated by DCFS. Norman Services assist families who lack food, clothing, housing or other basic human needs that place children's safety at risk and would otherwise necessitate their removal from the family or would be a barrier to family reunification. The statewide program provides:

- Cash assistance to purchase items needed to care for the children that the family may not afford to purchase themselves;
- Assistance in locating housing; and
- Expedited enrollment for Temporary Assistance for Needy Families (TANF) so that children in DCFS custody may be returned home within 90 days.

In FY 16 the program provided cash assistance to 2,112 families and the housing advocates reported serving 1,285 families.

Abuse of alcohol and other drugs are frequent accompaniments to incidents of child abuse or neglect. The Department's intervention with **Substance-Affected Families** (SAF) is a collaborative effort between DCFS and the Department of Alcohol and Substance Abuse (DASA). Department policies and procedures describing intervention and services to substance affected families establish requirements including completion of substance abuse screens for all adults, referrals for assessment and treatment when indicated, enrollment of preschool children into protective day care, and other measures.

DCFS attempts to keep children and families out of the court and foster care systems by providing intact, in-home services to strengthen families and protect children. The **Intact Family Recovery** (IF/R) program model was first developed by the DCFS Inspector General in response to child deaths and injuries in cases involving the birth of a substance exposed infant. The IF/R teams child welfare and alcohol and other drug abuse (AODA) outreach workers together to provide comprehensive services to intact families during the process of recovery from alcohol and other drug abuse. The program targets families where an infant has been born exposed to controlled substances, and currently serves families in only Cook County.

The Department has established the **Clinical Intervention for Placement Preservation** (CIPP) program, which is intended to support foster care placements and reduce placement disruptions. CIPP uses a facilitated team decision-making process to identify and meet the appropriate intensity of service support for the youth and caregiver through creative and flexible interventions that preserve the youth's current connections within his/her home, school, and community. The CIPP's goal is to improve placement preservation and increase placement stability, improve the youth's well-being and functioning by building and maintaining connections to family, social supports and community, access to and use of local, community-based support services, and improve the timeliness of interventions, prior to placement disruptions.

The **Statewide Provider Database** (SPD) is an easily accessible online tool with searchable information on community based services for children and families. The SPD allows users to identify and locate DCFS-contracted and non-contracted service providers across Illinois, and includes detailed agency and program specific information. The information on each program is extensive and includes eligibility criteria, service features, evidence-based practices, staff credentials, and more. The SPD supports the efforts of caseworkers by locating services in the catchment area in which the child has been placed, or near the school the child attended prior to removal from the home. The SPD is available to public and private agencies and may be used to locate services as a preventative measure.

Reunification Foster Care creates a team including the parent, caregiver, caseworker and the child. A Family Reunification Support Special Service Fee provides reimbursement for caregivers who team with parents to work toward reunification in eligible activities. This specialized type of foster care is aimed at identification of caregivers who are prepared to support family reunification and providing them the training and tools needed. To achieve reunification, foster parents serve as partners, mentors, and role models for the family and are active participants in the process of reuniting a family.

In 2007, the Department, in collaboration with its African-American Advisory Council, the Illinois African-American Family Commission and Illinois State University, launched the **Permanency Enhancement Program** Initiative (PEP). The purpose of the Initiative is to reduce and/or eliminate racial disproportionality and disparities of families and children of color in the Illinois Child Welfare System and thereby improve permanency outcomes. The methodology for the PEP is a systems approach to understanding how structural and/or institutional racism contextualizes child welfare practice in ways that create disparities in the determination of need and services for children and families of color. The disparities are created when services are presumptively allocated, poorly provided or inadequate in addressing a family's identified need. Disparities are also created when differences in service delivery are not justifiable based on a family's identified need, available agency resources or other objective criteria.

Use of Existing Resources:

The programs being funded through the Community-Based Child Abuse and Prevention (CBCAP) federal grant and matching funds are collectively diverse in population served and the types of primary and secondary prevention services offered. This promotes a wide variety of interests and collaborations across the state. These affiliations and cooperative agreements range from statewide child abuse prevention coalitions at the community level to the creation and professional growth of the Coalition for Crisis Nurseries of Illinois.

Extensive child abuse and neglect prevention efforts in Illinois provided by Prevent Child Abuse Illinois are heavily supported through the DCFS Community-Based Child Abuse Prevention grant funds. Project staff members provide leadership and coordination for community-based **Child Abuse Prevention Coalitions**. They form new coalitions to address specific child abuse issues and needs within local communities. Staff members facilitate meetings and help plan events. They also coordinate the activities of the coalitions with other groups, including IDCFS, the Family Violence Coordinating Council, the Children's Mental Health Partnership, and others. Support includes identifying grants and funding sources, coordinating Child Abuse Prevention month activities, developing resources, and addressing local issues. PCA Illinois provides Child Abuse Prevention Coalitions with reduced registration fees for the PCA Illinois Annual Conference, and access to all PCA Illinois workshops, trainings and prevention education materials. When needed, PCA Illinois is available to act as a fiscal agent for coalitions receiving

grant funds. Program staffers chair the Child Abuse Prevention Coalitions Advisory Committees which are made up of representatives from the various local coalitions. In addition, staff plan and coordinate an annual Child Abuse Prevention Coalition Summit.

PCA Illinois' **Child Sexual Abuse Prevention** Program supports efforts in the state to help prevent child sexual abuse and its devastating effects on children, families, and society as a whole. All four Prevention Specialists and the Project Director are certified facilitators of the evidence-based Stewards of Children child sexual abuse prevention curriculum developed by the Darkness-to-Light organization. The three-hour training follows a 7-Step training model. These steps are: 1) Learn the facts and understand the risks; 2) Minimize opportunity; 3) Talk openly about it; 4) Stay alert; 5) Make a plan; 6) Act on suspicions; and 7) Get Involved. Each training participant receives a workbook that contains vital information and resources which supports continued learning and prevention efforts. Individuals, programs, organizations, and communities are asked to examine their current policies and develop new policies which protect children and create an atmosphere where child sexual abuse is not tolerated. In addition to providing training, PCA Illinois staffs provide the support needed to develop and implement these new policies and take child safety to the next level. Darkness-to-Light reports that for every one adult trained, ten children are better protected.

In addition, PCA Illinois' Child Sexual Abuse Prevention Program provides public awareness and educational materials and works in partnership with local and statewide Child Advocacy Centers and other agencies working on this issue.

Promoting Infant Care and Safety includes a number of programs. Caring for a new baby can be a challenge even for the most experienced parent or caretaker. Some babies come with special challenges and often, best-practice recommendations on caring for an infant change from generation to generation. PCA Illinois works with parents, foster and adoptive parents, childcare providers, and professionals working with caregivers to understand the issues of safe sleep environments and infant crying (The Period of Purple Crying), which has been known to trigger Shaken Baby Syndrome (Abusive Head Trauma) and other forms of abuse.

The Happiest Baby on the Block is a curricula developed by Dr. Harvey Karp. This curriculum teaches participants five simple techniques for soothing a crying infant. Six PCA Illinois staff, including the project director, all four Prevention Specialists, and the Healthy Families Illinois Associate, are certified Happiest Baby Educators. The Happiest Baby Program also addresses safe sleep environments and the dangers of shaking an infant or young child. The class provides hands-on practice of the five techniques. Parents are given a parent kit which includes a take home DVD and infant soothing CD. PCA Illinois' Happiest Baby Program is made up of three base components which include providing parent training, assisting other programs and professionals to become certified Happiest Baby Educators, and the development of an Illinois Happiest Baby Network.

Shaken Baby Syndrome (Abusive Head Trauma) is a medical term that describes the injuries that occur to infants who are violently shaken by an adult caregiver. The purpose of PCA Illinois' *Shaking a Baby Can be Deadly Campaign* is to provide public awareness and education throughout the state on Shaken Baby Syndrome and its prevention. Components of this campaign include literature and material distribution, parent and professional training, and area wide Train-the-Trainer events.

The highly visible "Be Water Wise...Supervise" is a statewide drowning prevention campaign that has been in existence for several years. It that was developed in collaboration with DCFS Death Review Teams, DCFS staff and Prevent Child Abuse Illinois staff.

The Department through its Communications staff also promotes public awareness of the “Safe Haven” Act allowing mothers who do not want their newborn children to safely take them to designated facilities, such as hospitals, where they can be cared for without the risk of criminal charges against the mother for neglect or abandonment.

Addressing the Connection between Substance Abuse and Child Abuse involves DCFS and substance abuse treatment providers. PCA Illinois coordinates and facilitates two established IDCFS/Illinois Division of Substance Abuse workgroups in Central Region and Southern regions, as well as provides cross-training and technical assistance between child welfare agencies and substance abuse treatment providers. Project staffers help resolve referral issues and find needed treatment resources. They coordinate and provide community training on methamphetamine abuse and its impact on children, current drug trends, and other substance abuse issues. Staff serve on Community Drug Coalitions, partner with the Illinois State Police, the Drug Enforcement Association, local law enforcement agencies, and others to address substance abuse issues. The Southern Region Prevention Specialist chairs and coordinates the Methamphetamine and Other Drug Conference annually. Staff provides brochures and other educational material to professionals to help them work with families impacted by this issue.

DCFS supports PCA Illinois’ work in close partnership with the Illinois Family Violence Coordinating Council (IFVCC), other violence prevention initiatives, and local domestic violence shelters in order to **address the Connection between Family Violence and Child Abuse**. Project staff members chair committees, provide support material and resources, coordinate and provide training and cross-training on the connection between family violence and child abuse, provide technical assistance, and help resolve referral and service issues. In addition, staff develops training curricula, provide resources on childhood trauma, and serve on statewide committees and workgroups.

We have been fortunate that PCA Illinois has provided leadership for **Child Abuse Prevention Month Activities** for the past 17 years. Activities include launch events (5 events across Illinois), media conferences, Community Campaign Awards, local community involvement, collaborative efforts with other statewide groups, and a state calendar of events. This effort is in partnership with IDCFS and includes these additional components each year:

- Advisory Committee
- Regional Subcommittees
- Community Resource Packet
- Blue Ribbon campaigns
- Pinwheels for Prevention campaigns
- Involvement of Child Abuse Prevention Coalitions

In addition, program staff conducts training, provides community workshops, organize Child Abuse Prevention month events, coordinate Child Abuse Prevention month committees, provide technical assistance, and distribute prevention materials.

Home Visitation is a strategy that is essential to enhancing support for our country’s youngest children. Project staff works with all types of home-visiting services including *Parents as Teachers*, *Early Head Start*, *Healthy Families Illinois*, *Nurse-Family Partnership*, and others. Project staff serves on the Healthy Families Illinois Workgroup and its Executive Committee and co-chairs its Public Awareness Committee. Staff members facilitate regional networking groups, provide training, provide specific home-visiting workshops and other opportunities at the annual conference. Staff works with home-

visitation programs to help home visitors to become Happiest Baby Educator certified. They also assist Healthy Families Illinois sites with accessing credentialing and affiliation support.

The CBCAP Lead in Illinois, along with PCA Illinois, supports the federal Maternal Infant Early Childhood Home-Visiting grant (MIECHV), originally the Illinois Department of Human Services Strong Foundations Home-Visiting project. Both organizations work on several subcommittees to establish service outcomes and to search for ways to sustain home visiting services in Illinois.

Prevent Child Abuse Illinois requires client satisfaction surveys for all trainings and conferences. Quarterly reports track literature distribution, resource and referral requests, as well as participation in ongoing workgroups, networks and collaborations. Service numbers are submitted to DCFS on a regular basis.

Conclusion: The future prosperity of our communities and state depends on our ability to foster the health and well-being of the next generation through high-quality programs proven to reduce and prevent child abuse and neglect. Research has told us that the best predictors of our children's success are to have a healthy start at birth and a healthy development in the early years. One of the most significant factors in any child's life is the attachment to a single, stable, responsible adult. There is near universal agreement that being raised by parents in a low-conflict household give children enormous emotional benefits. A family facing multiple stress factors can create instability and conflict for children and compromise parenting. When children are nurtured and well cared for, they have better social-emotional and learning outcomes and are most likely to thrive. Evidence-based parenting programs have created significant long-term improvements for children, and are the kind of innovations we need to support.

DCFS supports, through the CBCAP grant, many types of evidence-based parenting programs and specialized parent support groups statewide.