REPORT TO THE GENERAL ASSEMBLY

JANUARY 29, 2018

20 ILCS 540/Custody Relinquishment Prevention Act

Pursuant to the custody Relinquishment Prevention Act, outcomes and data are to be reported annually by the Department of the Children and Family Services (DCFS).

This law became effective January 1, 2015 and establishes a pathway for families on the verge of seeking services for their child’s serious mental illness or serious emotional disturbance through relinquishment of parental custody to DCFS despite the absence of abuse or neglect, to receive services through the appropriate State child-serving agency. The goal of the law is to divert youth at risk of custody relinquishment to DCFS.

Such relinquishment of parental custody is commonly referred to as a “lockout.” This happens when insurance/Medicaid deems that further hospitalization for a child is going to be “beyond medical necessity,” yet parents refuse to take the youth home, often because they cannot find or afford alternative placement or appropriate services. This “lockout” of the youth by parents leads the hospital to make a hotline call to DCFS, forcing DCFS to investigate and determine if a “lockout” has in fact occurred or if there are indeed issues of abuse and neglect associated with the situation. Although DCFS investigates the report of a “lockout” as an allegation of abuse and neglect – in the vast majority of situations, the case is determined to be what is called a “no fault dependency.”

To implement this Act, an intergovernmental agreement was completed 4/19/16 between the Illinois Department of Human Services (DHS), the Illinois Department of healthcare and Family Services (HFS), the Illinois Department of Children and Family Services (DCFS), the Illinois Department of Juvenile Justice (DJJ), the Illinois Department of Public Health (DPH), and the Illinois State Board of Education (ISBE). These agencies then came together to develop a program plan defined as the Specialized Family Support Program (SFSP). This program is an expansion of the Illinois behavioral health crisis response system for youth, jointly utilizing the resources already found in the Screening, Assessment, and Support Services (SASS), Comprehensive Community Based Youth Services (CCBYS) and Intensive Placement Stabilization Services (IPS). Through leveraging existing state resources and altering key programmatic policies to accommodate the special needs of this population, the SFSP seeks to establish a pathway for youth at risk of custody relinquishment to receive services through the appropriate child serving agency.

An Interagency Clinical Team (ICT) with members from all participating state agencies was established to begin the process of operationalizing the SFSP. A training plan was developed with all agencies and community stakeholders receiving the same training and message, designed to address the needs and questions of each stakeholder. Training for all stakeholders occurred prior to the SFSP launch date of April 1, 2017 . Repeat and additional training was also provided to any stakeholder requesting such to ensure they understood the parameters of the program. Along with the training plan, a parent handbook was developed, as was a FAQ sheet and a consent form for families participating in the SFSP program.

The ICT met weekly, led by HFS, throughout FY2017 to ensure program quality and stability, and to review all submitted clinical assessment reports to determine lead agency responsibility and ongoing access to needed services.

Basic guidelines were developed to identify the youth eligible for the program and the actual process to be implemented for participation in the SFSP.

* Children eligible for the SFSP must be under the age of 18 and come to the attention of DCFS through a psychiatric lockout allegation (DCFS system code 84b).
* No other type of abuse or neglect should be identified.
* This is the only pathway to the program at this time.

From April 1, 2017 to June 30, 2017 (fiscal year 2017), DCFS received seventy (70) investigations related to allegation 84b psychiatric lockout. As of June 30, 2017, twenty-eight (28) of those seventy (70) investigations were still pending. The following explains the status of the 84b hotline reports as of June 30, 2017:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Unfounded Allegation;  Child Remained with Caregiver | Unfounded Allegation;  No Fault Dependency Petition (placement) | Indicated Allegation;  Neglect Petition (placement) | Other | Pending | Total Psychiatric Lockout Allegations |
| 32 | 7 | 1 | 2 (youth from another state; indicated allegation but child remained with caregiver) | 28 | 70 |

The youth who entered substitute care (placement) during this period remained in care through the end of the report period.

Based on data received from HFS from a launch date of April 1, 2017 to June 30, 2017, 27 families were referred to SFSP:

FY 2017 Program Measures (4/1/2017 – 6/30/2017)

|  |  |  |
| --- | --- | --- |
| N | Measure | % |
| 27 | Program Referrals | 100 |
| 6 | Families Completed SFSP 90 day Program | 22.3 |
| 9 | Program Refusals (Day 1) | 33.3 |
| 12 | Incompletes (families dropped out of the program prior to completion, Days 2 – 89) | 44.4 |

Six (6) families received the full 90 days of SFSP assessment services. In accordance with the interagency agreement, one family was assigned to DCFS for community follow-up due to the youth’s post-adoption status, and the remaining five (5) were assigned to HFS for ongoing community services. The family assigned to DCFS for follow-up remained intact, with community and post-adoption services and supports. The process was guided by a DCFS Behavioral Health Specialist and continued from June 2017 through October 2017.

The ICT continues to meet to assess the program and make necessary adjustments. Training stakeholders remains a priority this next fiscal year to ensure all families eligible for the intervention will have the opportunity to participate in the assessment program.