Follow-Up Report

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Performance Audit of the **Department of Children and Family Services LGBTQ Youth In Care**

Audit Follow-Up

The Office of the Auditor General conducted a performance audit of the State of Illinois, Department of Children and Family Services (Department or DCFS) LGBTQ Youth In Care pursuant to Senate Resolution Number 403. The audit was released in February 2021 and contained a total of 16 recommendations to the Department. The recommendations were followed up on as part of the compliance examination for the two years ended June 30, 2022. At that time, it was reported that four recommendations had been implemented, six recommendations had been partially implemented, and six recommendations had not been implemented. As part of the compliance examination for the two years ended June 30, 2024, we followed up on the status of the remaining recommendations. The current status of the recommendations is shown in the table below. Of the 12 remaining recommendations, 1 has now been implemented while 8 remain partially implemented, and 3 not implemented.

STATUS OF PERFORMANCE AUDIT RECOMMENDATIONSAs of June 30, 2024

			Current Status		
Rec. No.	Recommendation Description	Agency	Implemented	Partially Implemented	Not Implemented
1	Computer Systems and Tracking	DCFS			Х
2	Reviewing Rights with Youth in Care	DCFS			X
3	LGBTQ Procedures	DCFS		X	
4	LGBTQ Training	DCFS	X		
5	Oversight and Monitoring of Appendix K	DCFS		Χ	
6	Complaints	DCFS	X		
7	Child/Caregiver Matching Process	DCFS			X
8	Shelter Bed Availability	DCFS	Χ		
9	Foster Home Recruitment	DCFS	X		
10	LGBTQ Youth in Care Information	DCFS		Χ	
11	Foster Care Files	DCFS	Χ		
12	Sibling Visitation Plans	DCFS		Χ	
13	Normalcy Activity Documentation	DCFS		Χ	
14	Emergency Placements	DCFS		X	
15	Psychiatric Lockouts	DCFS		Χ	
16	Waiting for Placement Report	DCFS		Χ	

Recommendation 1: Computer Systems and Tracking

The Department of Children and Family Services should ensure that it is accurately capturing youth in care data. Additionally the Department should consider:

- Implementing a single case management system for all youth in care; and
- Electronically tracking clinical referrals, which would include LGBTQ referrals.

Current Status: Not Implemented

During the current examination, the auditors noted that the Department had not implemented a single case management system and is still utilizing both the Statewide Automated Child Welfare Information System (SACWIS) and the Child and Youth Centered Information System (CYCIS) for case management and tracking youth in care. According to Department officials, the new Comprehensive Child Welfare Information System (CCWIS), IllinoisConnect, will be the sole case management system for the Department. The new CCWIS program, which started in July 2022, includes a data cleansing of the child welfare data for movement to the new system. This should improve the quality of child welfare data. Additionally, the program includes the development of a Data Quality Plan for the Department to monitor data quality.

In addition, the auditors noted the Department had not implemented an electronic clinical referral system. According to Department officials, IllinoisConnect will include the ability for caseworkers to submit and track referrals to providers electronically.

As of June 30, 2024, the Department was in the process of transitioning to IllinoisConnect.

Recommendation 2: Reviewing Rights with Youth in Care

The Department of Children and Family Services should ensure that all Department and private agency caseworkers review the CFS 496-1 form (Illinois Foster Child and Youth Bill of Rights form) with all youth in care within the first 30 days of coming into care, every six months prior to the administrative case review, and annually as is required by statute and Department procedures.

Current Status: Not Implemented

During the current examination, the auditors noted the Department has not improved in reviewing CFS 496-1 forms. The auditors sampled 40 youth in care files to determine if the CFS 496-1 form was being completed. During testing, we noted the following:

- For 27 (68%) youth in care files tested, the CFS 496-1 forms were not approved within 30 days from the child's initial placement date. The approval ranged from 32 to 790 days from the child's initial placement date.
- The auditors were unable to determine whether the CFS 496-1 forms were reviewed due to the following issues noted:
 - For 10 (25%) youth in care files tested, the CFS 496-1 forms have missing required signatures.
 - For 5 (13%) youth in care files tested, the Department was unable to provide a copy of the CFS 496-1 form.
 - For 1 (3%) youth in care files tested, the CFS 496-1 form was not properly completed.

Recommendation 3: LGBTQ Procedures

The Department of Children and Family Services should conduct a review of all statutes, administrative rules, Department procedures, and forms to ensure a consistent LGBTQ policy throughout the Department and to eliminate any conflicts within existing procedures.

Current Status: Partially Implemented

During the current examination, the auditors reviewed the statutes, administrative rules, or Department procedures as listed below:

- Procedures 315 Appendix H (Illinois Bill of Rights for Youth in Care) June 2021
- Procedures 302 Appendix K (Support and Well-Being of Lesbian, Gay, Bisexual, Transgender, Questioning/Queer, and Intersex) - December 2023

- Administrative Procedure #30 (Youth Voice) March 2019
- CFS 496 (Customer Rights and Responsibilities) October 2005
- CFS 496-1 (Illinois Bill of Rights for Youth in Care) July 2018
- CFS 496-2 (DCFS Advocacy Office Youth Issues and Concerns) March 2019

The auditors noted that only Procedures 302 Appendix K has been updated as of June 30, 2024, while the other procedures and related forms are still in the process of finalization and not yet implemented.

Recommendation 5: Oversight and Monitoring of Appendix K

The Department of Children and Family Services should provide oversight and monitoring of POS agencies for compliance with Appendix K and ensure that all agencies have established policies at least as extensive as those required by their contract and Appendix K.

Current Status: Partially Implemented

During the current examination, the Department officials stated the Department continues to facilitate trainings to all POS agencies on Appendix K. In addition, the Department's monitoring teams and agency performance teams ensure that all POS agencies have established policies that align with Appendix K.

The auditors reviewed a copy of the training materials utilized by the Department and found that it includes comprehensive information necessary for establishing policies that are at least as detailed as those required by the POS agencies contract and Appendix K. Furthermore, the Department had established a formal procedure whereby the monitoring team actively requested that each agency's leadership submit a sign-in sheet, confirming their review of Appendix K, ensuring consistent compliance and oversight.

In addition, the auditors tested six POS agencies to determine whether their established policies were in accordance with Appendix K. The auditors also verified whether all staff at the sampled POS agencies had completed LGBTQ trainings as mandated. The auditors noted two of six (33%) POS agencies tested had not established policies and conducted staff trainings as required by Appendix K.

Recommendation 7: Child/Caregiver Matching Process

The Department of Children and Family Services should follow its matching procedures and ensure that a formal and documented matching process is being utilized for all placements. That process should include an assessment of any sexual orientation or gender identity needs for the youth in care.

Current Status: Not Implemented

During the current examination, the auditors noted that the Department has not implemented any updates or changes to the child/caregiver matching process. According to Department officials, the Department has neither changed nor updated its procedures requiring the CFS 2017 Form. Additionally, there have been no official updates to the matching process. However, the Clinical and Child Services Division is in the process of updating Procedures 301.85, which will include relevant LGBTQ sensitivity and support. Lastly, according to Department officials, the Sexual Orientation, Gender Identity, and Gender Expression (SOGIE) icon will be available in SACWIS; however, as of June 30, 2024, it is not yet live.

Recommendation 8: Shelter Bed Availability

The Department of Children and Family Services should take steps to increase the available number of shelter beds throughout the State.

Current Status: Implemented

During the current examination, the auditors noted that as of June 30, 2024, there was a total of 98 shelter beds statewide,

2024	2022	Increase
54	34	20
22	12	10
12	7	5
10	0	10
	54 22 12	54 34 22 12 12 7

an increase of 45 from FY22. All the regions had increased the number of beds from FY22 to FY24. The increase in the number of shelter beds for each region from FY22 to FY24 is shown in the table.

Recommendation 10: LGBTQ Youth in Care Information

The Department of Children and Family Services should solicit information from youth in care willing to provide it regarding their sexual orientation and gender identity for purposes of placement as well as identifying and offering any necessary services.

Current Status: Partially Implemented

During the current examination, the Department officials stated that the SOGIE icon is currently in SACWIS but not yet live. In addition, the Department officials stated that currently the LGBTQ youth are identified by the Clinical Division via Clinical referral for consultation from their caseworker, investigator, or guardian ad litem via consultation and staffing requests.

Furthermore, the Department provided information on Part I of the survey, which was distributed to youth in care to gather data on LGBTQ youth. The survey was anonymous. Part II of the survey, which focuses on LGBTQ concerns while in placement and the resources needed, is still in progress. According to Department officials, the results of Part I led them to serve 164 youth in FY24.

Recommendation 12: Sibling Visitation Plans

The Department of Children and Family Services should:

- Ensure that sibling visitation plans are created for all youth in care who require one;
- Ensure that all sibling visitation plans are completed in a timely manner; and
- Clarify the timeliness requirement between the Juvenile Court Act of 1987, the Illinois Administrative Code, and Department Procedures.

Current Status: Partially Implemented

The Juvenile Court Act of 1987 requires that when a child comes into care and the child has siblings in care, the Department shall file with the court a sibling placement and contact plan within 10 days, excluding weekends and holidays (705 ILCS 405/2-10(2)). Department rules (89 Ill. Adm. Code 301.220(c)) and Department Procedures 301.230 require that when siblings enter care and are not in joint placement, the caseworker shall complete and file a Visitation and Contact Plan with the juvenile court within 10 days.

During the current examination, the auditors noted that the Department created sibling visitation plans when required, but not all plans were created in a timely manner. The auditors tested 40 youth in care and found that all had sibling visitation plans. However, 40 (100%) youth in care tested had sibling visitation plans established between 218 and 5,470 days after the temporary custody date.

The Department reviewed the various provisions of the Juvenile Court Act of 1987, the Illinois Administrative Code, and Department procedures related to the Sibling Visitation Plan to address the time frames in which the Sibling Visitation Plans should be completed to determine whether any changes are required to be made to Department procedures. The Department determined that no change was required. The Department stated that procedures are purposely more restrictive than the Juvenile Court Act of 1987.

Recommendation 13: Normalcy Activity Documentation

The Department of Children and Family Services should ensure that discussions of normalcy activities are documented in case contact notes, as required by Department Policy Guide 2017.07.

Current Status: Partially Implemented

Department Policy Guide 2017.07 requires caseworkers to document discussions of normalcy activities. Caseworkers should discuss normalcy parenting with the caregiver at each monthly home visit, and those discussions should be documented in contact notes. The Department defines normalcy as "allowing youth in care the opportunity to participate in age-appropriate enrichment, extracurricular and social activities." According to the Children and Family Services Act (20 ILCS 505/7.3a(c)(1)), each child who comes into the custody of the Department is fully entitled to participate in appropriate extracurricular, enrichment, cultural, and social activities in a manner that allows the child to participate in his or her community to the fullest extent possible.

During the current examination, the auditors noted for 30 of 40 (75%) youth in care tested, there were missing monthly documentation of caseworkers' discussion of normalcy activities. The missing monthly contact notes ranged from 2 to 24 months during the examination period.

Recommendation 14: Emergency Placements

The Department of Children and Family Services should:

- Ensure that youth in care are not placed in emergency shelters after a psychiatric hospitalization in accordance with Department procedures; and
- Consistently and accurately track emergency placements.

Current Status: Partially Implemented

During the current examination, Department officials stated that the Department made a concerted effort to ensure youth are not placed in emergency shelters following a psychiatric hospitalization. The Department has multiple staff members dedicated to visiting each youth in the hospital weekly, tracking those without a discharge plan on an Excel spreadsheet, and prioritizing efforts to identify a placement post-hospitalization.

In addition, the Department tracked emergency placements daily through a shared drive document and a customized tracking grid. Staff from across the State follow the process outlined on the Department's DNET when an emergency placement resource is needed. The auditors tested 40 youth from the Department's tracking spreadsheet to verify whether youth were placed in emergency placements for not more than 30 days. Department Procedure 301.55(b) states that placement in an emergency shelter should not exceed 30 days. During testing, the auditors noted no instances of youth placed in emergency placements after discharge from a psychiatric hospital. Additionally, the results of the auditors' testing noted the following:

- 19 (48%) youth remained in emergency placements for 32 to 730 days.
- There was missing information on the admit and discharge dates in the tracking of emergency placements for 15 (38%) youth, therefore, the auditors were unable to determine the timeliness of their placement.

Recommendation 15: Psychiatric Lockouts

The Department of Children and Family Services should ensure that protective custody of psychiatric lockout patients is taken within 48 hours as required by Department Procedures 300.

Current Status: Partially Implemented

The Department was not taking psychiatric lockout youth in care into protective custody in a timely manner, as required by Department procedures. A psychiatric lockout occurs when a youth is psychiatrically hospitalized and the parents/guardians refuse to pick up the youth when the youth is ready for discharge. Procedures 300 require that if a lockout cannot be resolved within 48 hours, the youth shall be taken into protective custody.

The Department is currently working to update Procedures 300 to be consistent with Illinois policy and the statute on Protective Custody, which directs the Department to only take protective custody if a child is at urgent and immediate risk of harm. The Department intends to complete the update by Fiscal Year 2026.

During the current examination, the Department provided a list of 31 psychiatric lockout patients for FY23 and FY24. The auditors tested 5 youth to determine if protective custody was taken within 48 hours for psychiatric lockout patients. For 4 (80%) youth tested, the Department did not take protective custody within 48 hours. Specifically, the youth were taken into protective custody 10 to 28 days after the investigation began.

Recommendation 16: Waiting for Placement Report

The Department of Children and Family Services should:

- Ensure the Youth in Care Waiting for Placement reports are filed in a timely manner;
- Ensure the Youth in Care Waiting for Placement reports meet the statutory requirements of the Act; and
- Verify that the data used to create the Youth in Care Waiting for Placement reports is accurate and that accurate data is provided to the General Assembly.

Current Status: Partially Implemented

The Department was not providing accurate and complete information to the General Assembly in the required Youth in Care Waiting for Placement annual report. Public Act 100-0087 amended the Children and Family Services Act to require that beginning December 31, 2018, and on December 31 of each year thereafter through December 31, 2023, the Department shall prepare and submit an annual report, covering the previous fiscal year, to the General Assembly regarding youth in care waiting for placements. The report must include data on three types of placements:

- emergency placements, including shelters and emergency foster homes, for longer than 30 days;
- psychiatric hospitalization beyond medical necessity; and
- remaining in a detention center or Department of Juvenile Justice (DJJ) facility solely because the Department cannot locate an appropriate placement (20 ILCS 505/2.2).

During the current examination, the Department provided the FY22 (due December 31, 2022) and FY23 (due December 31, 2023) Youth in Care Waiting for Placement reports. Both reports were filed timely. The FY22 and FY23 reports included all required information and were in compliance with the statutory requirements.

In addition, the auditors sampled and analyzed the data used to create the FY22 report. The auditors noted there were still issues with data accuracy of the report. The shelter care data used by the Department included 14 cases where the youth in care had not been in a shelter for more than 30 days as of the end of fiscal year. Additionally, the auditors noted 1 case where the placement end date is earlier than the placement start date.

Follow-up was conducted as part of the Fiscal Year 2023 and 2024 State compliance examination by our special assistant auditors, Roth & Co. This was the second time follow-up has been done on the recommendations from the February 2021 performance audit.