# Annual Youth in Care Waiting for Placement Report

# Report to the General Assembly

#### December 31, 2024

Per ILCS 505/2.2 DCFS Youth in Care Waiting for Placement Report, the Department of Children and Family Services will provide a report by December 31st of the calendar year, with fiscal year information on the number of youth in emergency placements for longer than thirty days; hospitalized in psychiatric hospitals beyond medical necessity; in a detention center or Department of Juvenile Justice (DJJ) facility beyond the release date; in out-of-state residential treatment facilities; not in temporary custody or guardianship of the Department and subject to child protection investigations coded as 84b; in emergency rooms for longer than 24 hours waiting for admission to a psychiatric hospital bed; and, in overnight in DCFS or child welfare contributing offices or welcome centers.

#### **Statistics**

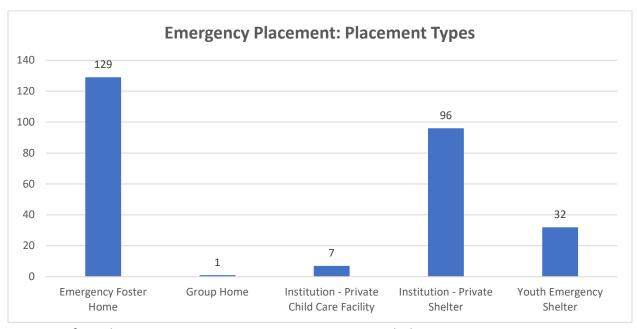
The following cumulative data is for instances of youth in emergency placements (shelters/foster homes) 30 days or more; in psychiatric hospitals beyond medical necessity; in detention center or DJJ facility beyond the release date; in out-of-state residential treatment facilities; in emergency rooms for longer than 24 hours waiting for admission to a psychiatric hospital bed; in overnight in DCFS or child welfare contributing offices or welcome centers. The total number of instances of youth across every category from 7/1/2023 to 6/30/2024 was 1656. The overall average age of youth across every category in FY24 was 13.01 years old with male instances making up 52.83% of the overall categorized population.

|             | Emergency | Psychiatric | Detention | Out of      | Emergency | Overnight in |
|-------------|-----------|-------------|-----------|-------------|-----------|--------------|
|             | Placement | Hospitals   | /DJJ      | State       | Rooms     | DCFS/CWCA    |
|             | 30+ Days  | (BMN)       |           | Residential | (24hr+)   | Offices      |
| Average Age | 9.9       | 12.5        | 17        | 14.5        | 12        | 12.2         |

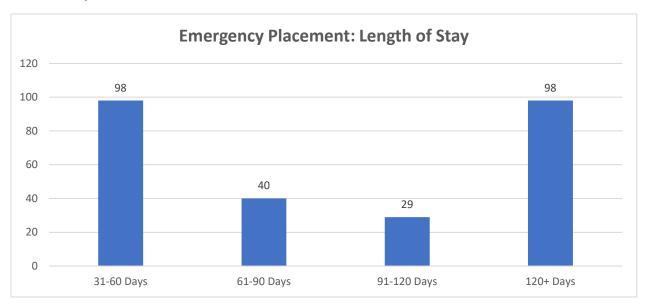
|                   | Emergency | Psychiatric | Detention | Out of      | Emergency | Overnight in |
|-------------------|-----------|-------------|-----------|-------------|-----------|--------------|
|                   | Placement | Hospitals   | \DJJ      | State       | Rooms     | DCFS/CWCA    |
|                   | 30+ Day   | (BMN)       |           | Residential | (24hr+)   | Offices      |
| Male              | 162       | 115         | 40        | 43          | 116       | 380          |
| Female            | 103       | 123         | 16        | 44          | 155       | 329          |
| Transgender/Other |           |             |           |             | 30        |              |
| Total             | 265       | 238         | 56        | 87          | 301       | 709          |

### Youth in Emergency Placements (Shelters/Foster Homes) 30 Days or More

In FY24 there were a total of 265 youth in emergency placements (shelters/foster home) for 30 days or more.



48.68% of youth were in Foster Homes; 36.23% were in a shelter.

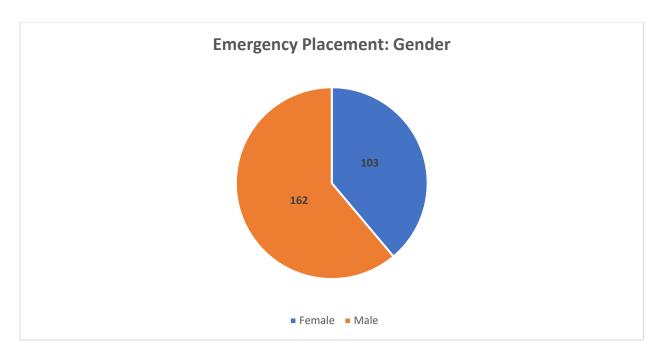


36.98% were in emergency placement for 31-60 days.

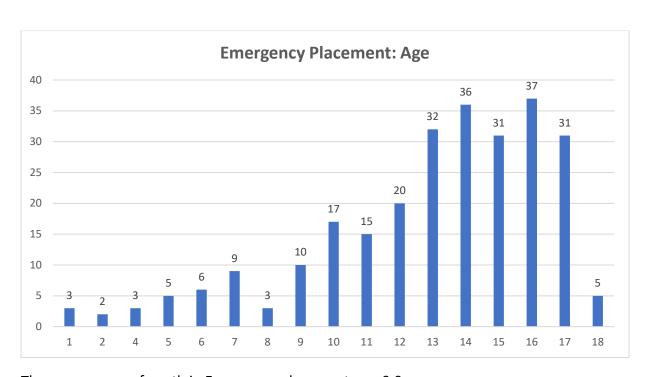
15.09% were in emergency placement for 61-90 days.

10.94% were in emergency placement for 91-120 days.

36.98% were in emergency placement for 120+ days.



61.13% were male and 38.87% were female.



The average age of youth in Emergency placement was 9.9.

There were 35.09% youth from the ages of 0-12 in emergency placement.

There were 63.02.18% youth from the ages of 13-17 in emergency placement.

There were 1.89% youth who were 18 years old in emergency placement.

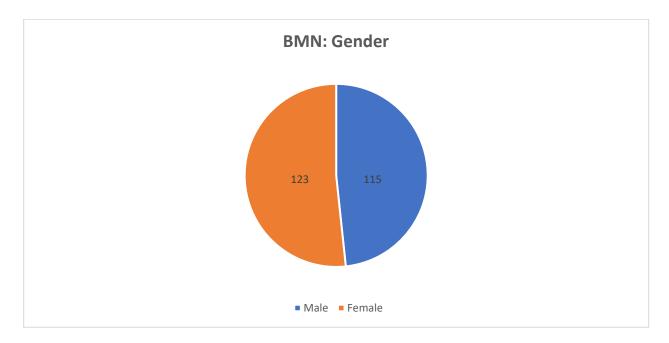
Youth in emergency placements are most placed in either an emergency foster home, or an emergency shelter when there are significant barriers to placements. The top barriers affecting timely placement are behavior disorders including physical and verbal aggression, cognitive abilities including level of IQ and developmental delays; as well as specialized treatment needs including substance abuse, domestic violence, and sexual behavior problems.

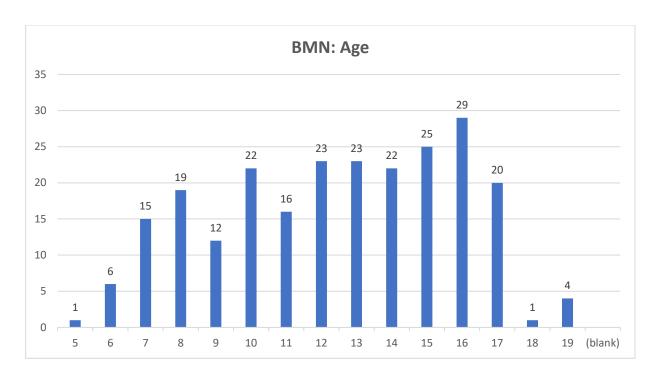
The Department continues efforts to reduce the length of stay in emergency and temporary placements. During FY24, the Department continues to utilize the Emergency Services Team within Child Placement to monitor the use of emergency placement services and work closely with permanency staff to move youth from emergency placement into appropriate longer term living arrangement. Additionally, the Department has continued to develop specific resources for emergency placements.

In FY24 the Department developed 10 new shelter beds for males in the Central Region. The Department also initiated contract negotiations with two Cook providers to develop 17 additional shelter beds, 7 for males and 7 co-ed beds for specialty needs, DD, Autism and medical and 3 for youth who required 1:1 support while awaiting placement. During the budget and contract development process with both providers (that extended into FY25), the Department was able to access these beds as the space was licensed and the provider had staffing capacity.

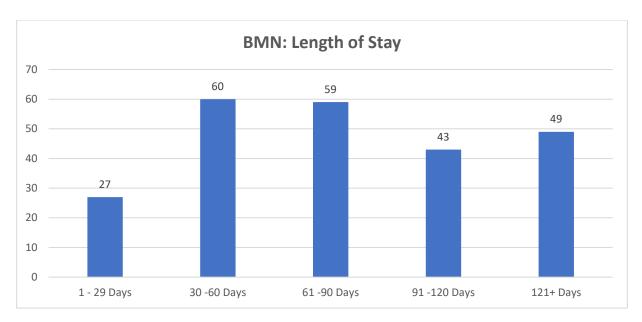
#### Youth Who Remained in Psychiatric Hospitals Beyond Medical Necessity

In FY24, there were 238 instances hospitalized in psychiatric hospitals beyond medical necessity (BMN). 51.68% of youth were female, and 41.58% of the youth were between the ages of 13 and 16 years old. The average age at the end of FY24 was 12.5 years old.

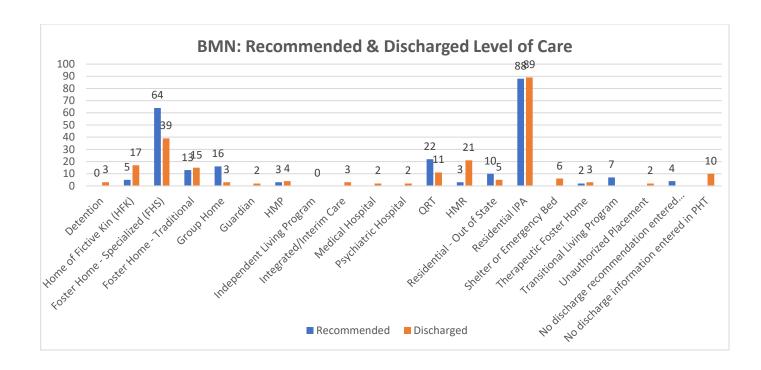




The average length of stay for BMN was 86.7 days in FY24, with 61.3% of youth staying less than 90 days. Barriers to timely placement included youth having intellectual and developmental disabilities, sexually problematic behaviors, history of aggression and property destruction, high end psychiatric acuity and presenting with continued need for intensive mental health treatment or education monitoring; staff shortages; and extensive waitlists.



During FY24, the top recommended and actual placements for level of care were Residential Treatment Centers (38%) and Specialized Foster Homes (16%).



| Level of care                              | Recommended | Discharged |
|--|-------------|------------|
| Detention                                  | 1           | 3          |
| Home of Fictive Kin (HFK)                  | 5           | 17         |
| Foster Home - Specialized (FHS)            | 64          | 39         |
| Foster Home - Traditional                  | 13          | 15         |
| Group Home                                 | 16          | 3          |
| Guardian                                   |             | 2          |
| НМР  | 3           | 4          |
| Independent Living Program                 |             | 1          |
| Integrated/Interim Care                    |             | 3          |
| Medical Hospital                           |             | 2          |
| Psychiatric Hospital                       |             | 2          |
| QRT  | 22          | 11         |
| HMR  | 3           | 21         |
| Residential - Out of State                 | 10          | 5          |
| Residential IPA                            | 88          | 89         |
| Shelter or Emergency Bed                   |             | 6          |
| Therapeutic Foster Home                    | 2           | 3          |
| Transitional Living Program                | 7           |            |
| Unauthorized Placement                     |             | 2          |
| No discharge recommendation entered in PHT | 4           |            |
| No discharge information entered in PHT    |             | 10         |

The Department is taking several steps to reduce the length of time BMN including working with providers to develop additional therapeutic placements and specialized foster care resources for youth. Therapeutic Bed Development included:

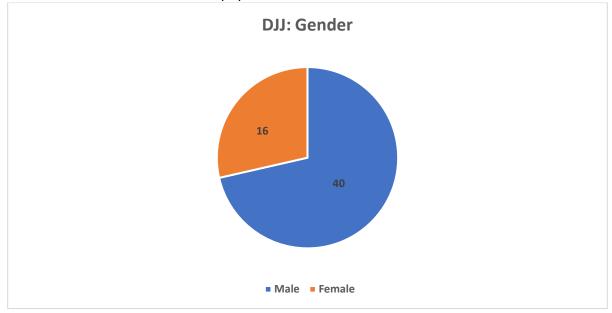
| DD Intensive Group Home | 14 Beds |
|-------------------------|---------|
| TLP Girls               | 8 Beds  |
| QRTP - Intensive        | 3 Beds  |
| YV Lifeset (ILO / TLP)  | 50 Beds |

During FY24, the Department engaged with 4 providers and continue with activities developing 3 contracts to serve youth in Therapeutic Foster Care homes and 1 provider to develop intensive in-home stabilization services.

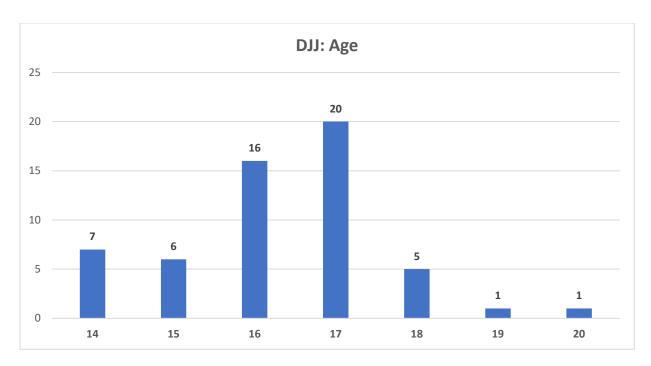
DCFS is active in working with sister agencies via the Children's Behavioral Health Transformation to fully utilize and develop resources to avoid youth being BMN.

### Youth in Detention Center/DJJ Beyond the Release Date

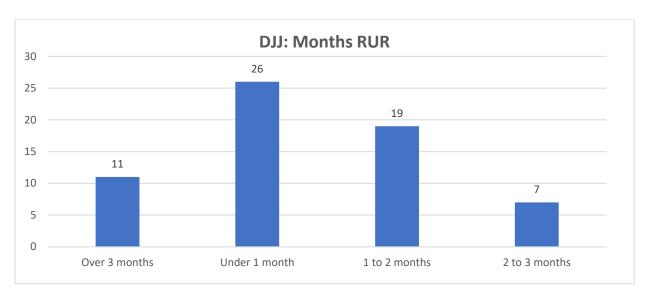
In FY24, there were 56 instances (41 youth) where youth were held in detention beyond their release date. 71.43% of the RUR population were male while 28.57% were female.



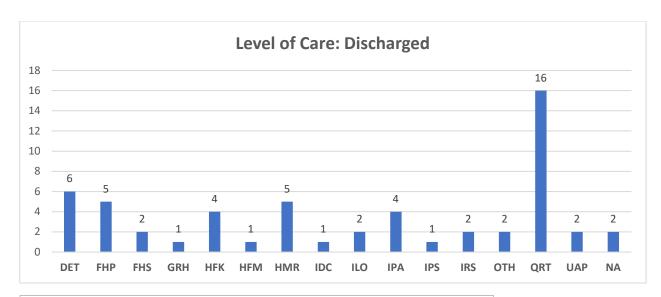
74.99% were between the ages of 15-17 years old. The average age at the end of FY24 was 17 years old.



The total length of time each RUR youth remains in a DJJ or DOC facility varies depending on many factors such as: age, gender, time of release, youth behavior, medical needs, and more. During FY24, approximately 69.64% of the total population were placed within three months of their release date. 35.71% of this population were placed less than one month after their release date, and 53.57 were placed within two months. Aggressive behavior, extensive criminal involvement, acute mental health needs and substance abuse are the primary barriers to timely placement for this population of youth in care.



In FY24, 30.36% of youth were placed in foster homes (traditional, specialized, fictive kin, and relative – FHP, FHS, HFK, HFM, HMR); and 28.57% of the population were placed in Qualified Residential Treatment Programs/PRTFs (in and out of state).

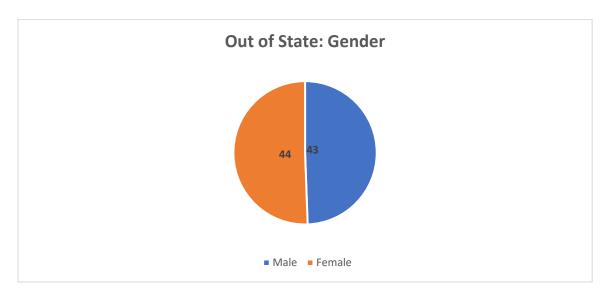


| Level of Care: Discharged |    |  |
|---------------------------|----|--|
| DET                       | 6  |  |
| FHP                       | 5  |  |
| FHS                       | 2  |  |
| GRH                       | 1  |  |
| HFK                       | 4  |  |
| HFM                       | 1  |  |
| HMR                       | 5  |  |
| IDC                       | 1  |  |
| ILO                       | 2  |  |
| IPA                       | 4  |  |
| IPS                       | 1  |  |
| IRS                       | 2  |  |
| OTH                       | 2  |  |
| QRT                       | 16 |  |
| UAP                       | 2  |  |
| NA                        | 2  |  |

The Department is taking several steps to reduce the length of time in detention/DJJ including; working with providers to offer services to youth while they are placed in detention centers so they are better prepared for placement interviews; working with providers to develop updated procedures for accepting DJJ youth into their facilities; developing Dually Involved specific placements to successfully place this population of youth.

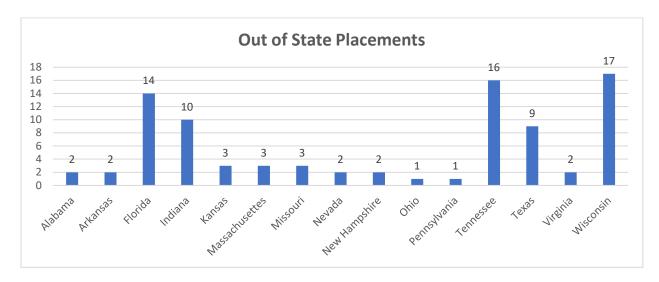
#### Youth in Out-of-State Residential Treatment Facilities

In FY24, there were 87 instances (85 youth) of youth placed in out-of-state residential treatment facilities. 49.43% of youth were male and 50.57% were female.



Age range for youth placed out-of-state range between 7 and 21 years old; 42.5% of these youth are in between the ages of 16 and 17 years old. The average age at the end of FY24 was 14.5 years old.

Youth were referred in-state prior to being referred out-of-state in 86 of the 87 instances (one youth went from one out-of-state program directly to another out-of-state program). Youth were placed in the following 15 states: Alabama, Arkansas, Florida, Indiana, Kansas, Massachusetts, Missouri, Nevada, New Hampshire, Ohio, Pennsylvania, Tennessee, Texas, Virginia, and Wisconsin, with 54% being placed in Florida, Tennessee and Wisconsin.

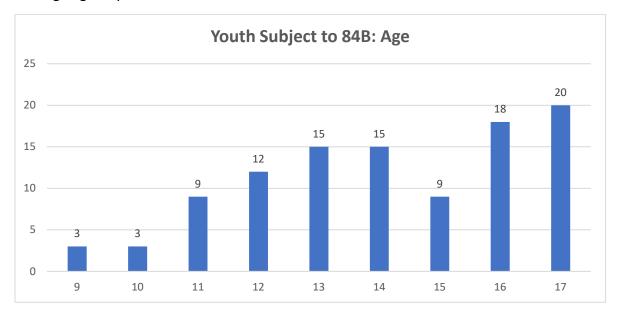


The Department is focused on increasing therapeutic programs that address the needs of our high acuity youth. The Department has made efforts by releasing requests for proposals and seeks program enhancements through existing providers for specialized services. These efforts shall impact services for children who are more likely to be sent out of state because of limited resources within the State of Illinois. The Department believes that as it increases specialized resources within the State, the number of youth needing to receive services out of state will then be reduced.

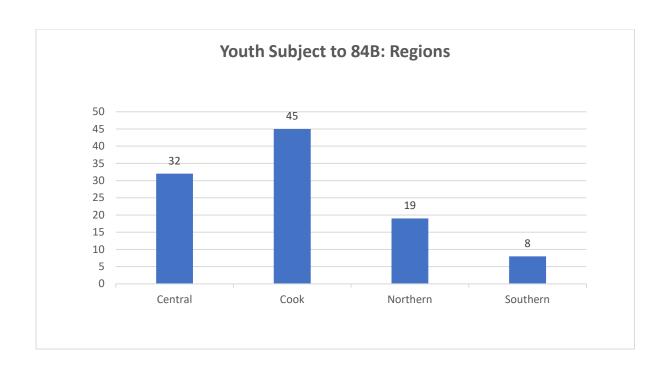
## Youth Subject to 84b Child Protection Investigations

From July 1, 2023 to June 30, 2024 a total of 104 reports involving allegations of Psychiatric Lock-Out were received statewide, due to parent or caregiver denying youth access back home, refusing or failing to make provisions for alternative living arrangements for the youth prior to the youth discharge from psychiatric hospitalization. Of the 104 youth, there were 8 in Southern Region, 19 in Northern Region, 45 in Cook Region and 32 in Central Region.

Average age of youth was 14.11.

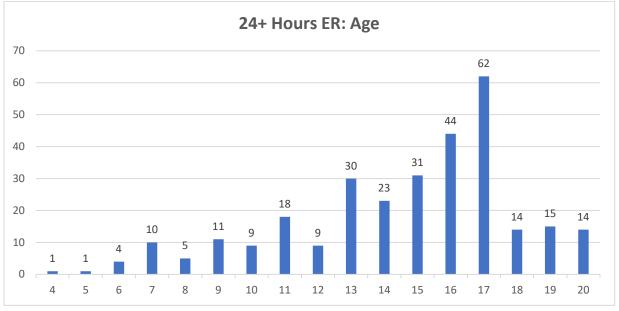


Of the 104 Psychiatric Lock-Out reports, 80 were presented for screening to the State's Attorney's Office and 22 involved referrals to Intact Family Services based on identified needs for service intervention.

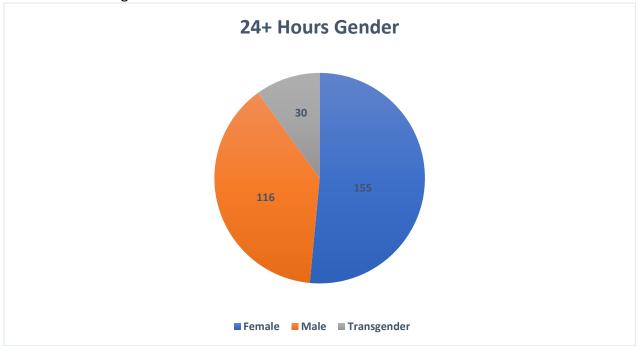


# Youth 24+ Hours in Emergency Rooms Awaiting Psychiatric Hospital Bed Admission

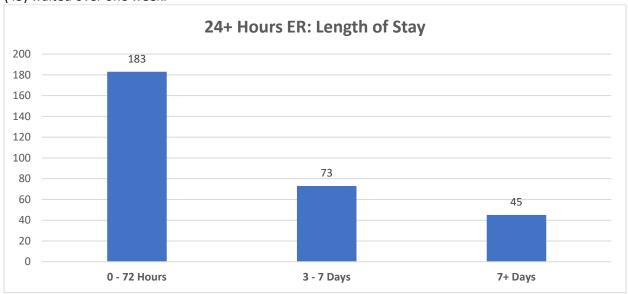
In FY24 there were 301 youth in care who waited over 24 hours in emergency rooms. The average age at the end of FY24 was 12 years old, and the age range of youth was between 4 and 21 years of age, with 63.13% being between the ages of 13 and 17 years old.



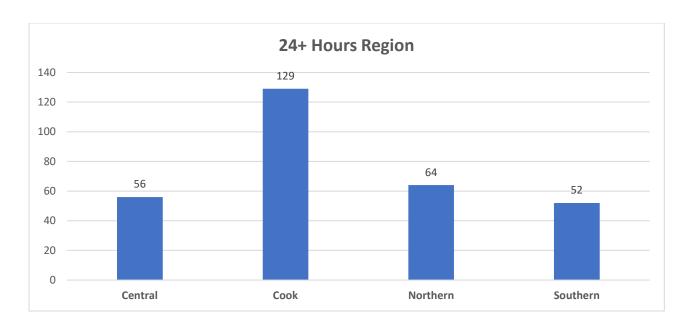
When evaluated by gender, 51.50% of youth were female, 38.54% were male, and 9.97% youth identified as transgender.



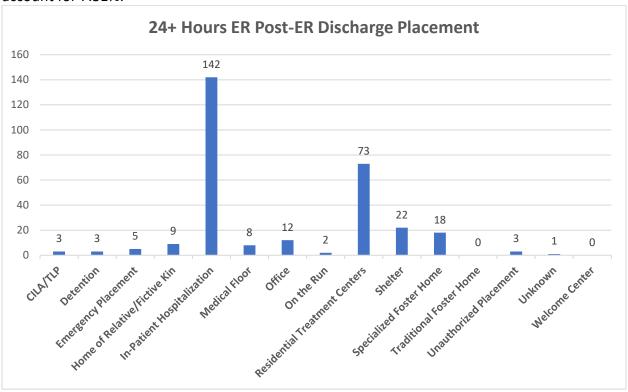
There were 60.80% (183) who waited under 72 hours, 24.25% (73) waited between 3-7 days and 14.95% (45) waited over one week.



Cook region accounted for 42.86% of the total number of youth awaiting hospitalization with the remainder of the youth residing in the Central, Northern, and Southern regions respectively.



The top placements for youth after their time in emergency rooms were In-Patient Hospitalization (47.18%), followed by Residential Treatment Centers (24.25%), and Shelters account for 7.31%.



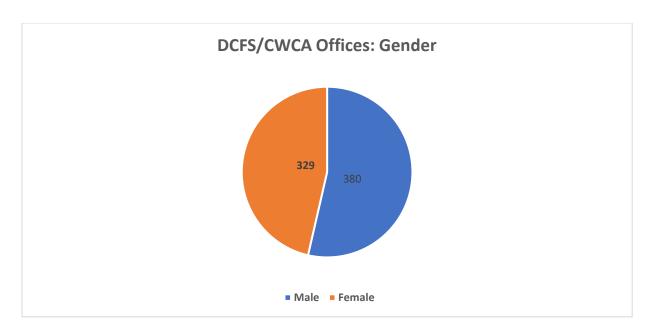
24+ Hours ER: Post-Emergency Room Placement

| CILA/TLP                      | 3   |
|-------------------------------|-----|
| Detention                     | 3   |
| Emergency Placement           | 5   |
| Home of Relative/Fictive Kin  | 9   |
| In-Patient Hospitalization    | 142 |
| Medical Floor                 | 8   |
| Office                        | 12  |
| On the Run                    | 2   |
| Residential Treatment Centers | 73  |
| Shelter                       | 22  |
| Specialized Foster Home       | 18  |
| Traditional Foster Home       | 0   |
| Unauthorized Placement        | 3   |
| Unknown                       | 1   |
| Welcome Center                | 0   |
|                               | 301 |

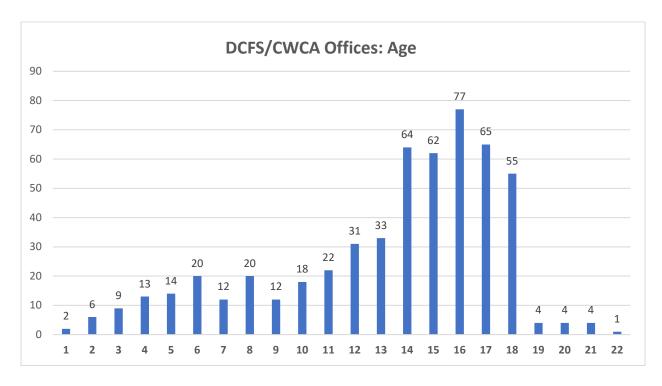
The phenomenon of children waiting for hospitalization in ERs remains an ongoing challenge. There remains to be limited to no data about the "critical incidents to include reporting about PRN medications or restraints" for the following reasons: While ERs are supposed to notify DCFS about the use of Emergency medications and restraints, it is rarely done according to the DCFS Guardian's Office and Dr. Naylor at University of Illinois at Chicago who oversees the Psychotropic Medication Consent line. This could occur because most medical facilities are not well versed in the DCFS policies and protocols. DCFS does use the capacity of our Mobile Crisis Response Administrator to receive information regarding youth in ER including use of Emergency medication, though again, reporting in not consistent.

# Youth Who Remained Overnight in DCFS, Child Welfare Contributing Agency Offices or Welcome Centers

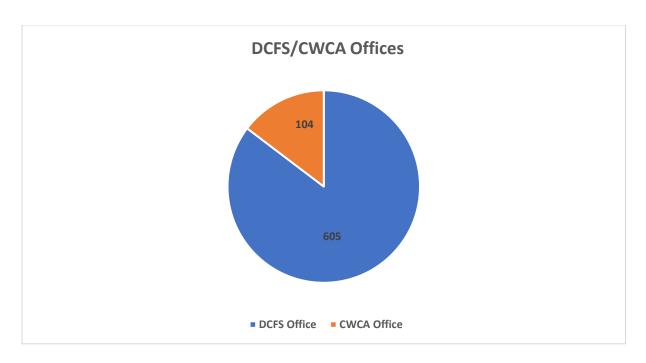
In FY24 there were 709 instances (549 youth) who remained overnight in DCFS or child welfare contributing agency offices or welcome centers. 53.60% of youth were male while 46.40% were female. Of note the Department no longer uses the Welcome Center for emergency placement and did not have a youth in that setting type during FY24.



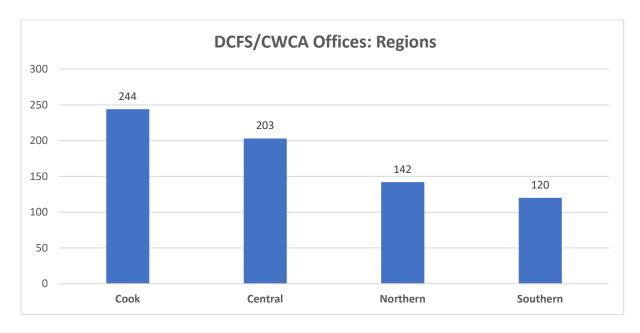
The average age of youth at the end of FY24 was 12 years old, and the age range of youth was between 1 and 22 years of age, with 58.94% being between the ages of 14 and 18 years old.



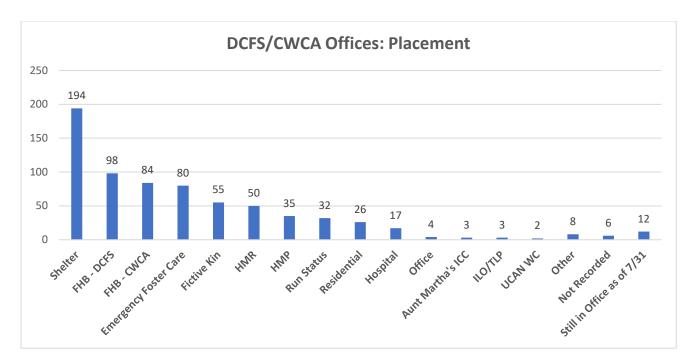
The average length of stay for all youth was 4.87 days. 85.33% (605 youth) stayed in DCFS Offices, while 14.67% (104 youth) stayed in Child Welfare Contributing Agency (CWCA) offices overnight.



Cook region accounted for 34.41% while Central Region accounted for 28.63% of the total number of youth who remained overnight in DCFS or child welfare contributing agency offices or welcome centers, with the remainder of the youth in the Northern and Southern regions respectively.



The top placements for youth after staying overnight in DCFS or child welfare contributing agency offices or welcome centers were Shelter (27.36%), DCFS-FHB (13.82%), POS-FHB (11.85%), and Emergency Foster Care (11.28%).



| Shelter                    | 194 |
|----------------------------|-----|
| FHB - DCFS                 | 98  |
| FHB - CWCA                 | 84  |
| Emergency Foster Care      | 80  |
| Fictive Kin                | 55  |
| HMR                        | 50  |
| НМР                        | 35  |
| Run Status                 | 32  |
| Residential                | 26  |
| Hospital                   | 17  |
| Office                     | 4   |
| Aunt Martha's ICC          | 3   |
| ILO/TLP                    | 3   |
| UCAN                       | 2   |
| Other                      | 8   |
| Not Recorded               | 6   |
| Still in Office as of 7/31 | 12  |

## How the Department Collects Information for Report

| Information  | Sources  |
|--|--|
| Youth in Emergency Placements (Shelters/Foster Homes) 30 Days or More                                | Multiple systems housed in various system  |
| Youth Who Remained in Psychiatric Hospitals<br>Beyond Medical Necessity                              | DCFS Psychiatric Hospitalization Database; Child and Youth Information System (CYCIS).   |
| Youth in Detention Center/DJJ Beyond the Release Date  | Child and Youth Information System (CYCIS),<br>Statewide Automated Child Welfare System<br>(SACWIS), and supplemental email<br>correspondence. |
| Youth in Out-of-State Residential Treatment Facilities   | Multiple systems housed in various system.   |
| Youth Subject to 84b Child Protection Investigations   | Statewide Automated Child Welfare System (SACWIS)  |
| Youth 24+ Hours in Emergency Rooms Awaiting Psychiatric Hospital Bed Admission                       | YouthCare; Multiple systems housed in various system.  |
| Youth Who Remained Overnight in DCFS or child welfare contributing agency offices or welcome centers | Multiple systems housed in various system.   |

As data is housed in various service systems and by various divisions within DCFS, each system is independent of the other, and in some instances DCFS depends on other state agencies for needed data for this report. Therefore, for the most part, the process of constructing the Annual Youth in Care Report is manual data integration by several staff, leading to the entire data and final report being put together by the designated staff.

# **Summary**

The Department continues to work diligently to improve the process at each level of care to ensure that youth are matched and moved to an appropriate placement. Additionally, the Department continues with resource development targeting both out of home therapeutic placements as well as programs and services to maintain youth in family settings. The goal is when youth are matched, to have available resources so they can be moved expediently. In addition, the Department continues to work on ways to provide services and support to maintain youth in their current placements and to work with foster parents and caseworkers on an individual basis to address their needs and avoid placement disruptions. Though the Department takes the leads on many of these initiatives, the Department is only successful when stakeholders and partners can support and execute interventions being developed to meet the needs.