**Section 300.45 Five Year Demonstration of the Differential Response Program**

a) Differential Response recognizes that there are variations in the severity of reported maltreatment and allows for an investigation or family assessment response to reports of child neglect. Both responses focus on the safety and well-being of the child; promote permanency within the family whenever possible; and recognize the authority of child protection to make decisions about protective custody and court involvement when necessary. An investigation response involves gathering forensic evidence and requires a formal determination regarding whether there is credible evidence that child maltreatment has occurred. A family assessment response involves assessing the family's strengths and needs and offering services to meet the family's needs and support positive parenting.

b) Differential Response Criteria

During the demonstration period, reports of neglect that meet all the following criteria may be assigned to an assessment pathway:

1) Identifying information for the family members and their current address, if known at the time of the report;

2) The alleged perpetrators are birth or adoptive parents, legal guardians or responsible relatives;

3) The family has no pending or prior indicated reports of abuse and/or neglect or prior indicated reports have been expunged within the timeframe or timeframes established by the Department for the indicated allegation or allegations;

4) The alleged victims, or other siblings or household members, are not currently in the care and custody of the Department or wards of the court;

5) Protective custody of the children has not been taken or required in the current or any previous case; and

6) Allegations

A) The reported allegation or allegations shall only include Mental and Emotional Impairment (neglect only), Inadequate Supervision, Inadequate Food, Inadequate Shelter, Inadequate Clothing, Medical Neglect, and Environmental Neglect. The following circumstances involving the allegations of Mental and Emotional Impairment, Inadequate Supervision, and Medical Neglect prohibit the report from being assigned to a family assessment pathway.

i) Mental and Emotional Impairment reports taken as abuse (Allegation #17) will be assigned an investigation pathway.

ii) Inadequate Supervision reports involving a child or children under the age of eight, or a child older than eight years of age with a physical or mental disability that limits his or her skills in the areas of communication, self-care, self-direction and safety will be assigned an investigation pathway.

iii) Medical Neglect reports that involve a child with a severe medical condition that could become serious enough to cause long-term harm to the child if untreated will be assigned an investigation pathway.

B) All other allegations are considered to involve substantial child abuse and neglect, and are ineligible for assignment to the assessment pathway.

c) Differential Response Team (DRT) Supervisors

Prior to assigning reports to Differential Response (DR) Specialists, DRT Supervisors will review all reports assigned to their teams within two hours after receipt in the team's electronic mailbox, excluding evenings, weekends and holidays, to determine their appropriateness for Differential Response. DRT Supervisors will also contact reporters of medical neglect reports, and may contact reporters of other allegations, to confirm the information reported to the State Central Register and obtain any additional information that will enable the supervisor to determine the appropriateness of the report for Differential Response. Reports determined to be inappropriate for Differential Response will be redirected by the supervisor to the State Central Register for investigation in accordance with subsection (e).

d) Initial and Ongoing Contacts with the Family

The initial Differential Response contact will occur in the family's home within three business days from the time the report is received at the State Central Register, excluding weekends and holidays, and the contact shall involve the DR Specialist, Strengthening and Supporting Families (SSF) worker, adult family members and all children.

1) If a family accepts assessment pathway services, the DR Specialist must do the following at the initial meeting with the family:

A) Verify identifying information and legal relationships of all household members.

B) Complete a Child Endangerment Risk Assessment Protocol Safety Assessment.

C) Obtain the names and addresses of any non-custodial parents.

D) Complete a home safety checklist.

E) Obtain consent for release of information signed by a family member with the authority to give consent.

AGENCY NOTE: If the family will not allow the DR Specialist access to the child or children, the family has declined family assessment services and the requirements of subsection (e) will be followed.

2) The SSF worker will provide intensive strength-based family-focused services during the Strengthening and Supporting Families service period, which will include the following:

A) A comprehensive and collaborative evaluation of the family's strengths and needs that will include the family's financial status, basic educational screening for the children, and physical health, mental health and behavioral health screening for all family members. Information obtained will be used to construct a Genogram and Ecomap for use with the family;

B) Services to meet any immediate needs of the family, including food, shelter and clothing;

C) A minimum of twice weekly contacts with the family, which will include the children in the household;

D) Service planning;

E) Services to mitigate or control the causes of neglect;

F) Child Endangerment Risk Assessment Protocol Safety Assessments completed in accordance with the requirements for intact families established by the Child Endangerment Risk Assessment Protocol;

AGENCY NOTE: The Child Endangerment Risk Assessment Protocol (CERAP) is used within the larger protocol of child protection practice to identify information consistent with threats to child safety; to analyze safety threats to determine how they are occurring within a particular family; and for safety planning to control identified safety threats. The major steps that are required to apply the protocol include an assessment and analysis of the safety factors using the Safety Determination Form (CFS 1441).

G) Assessment of the family's reasonable progress in resolving the issues that brought them to the attention of the Department;

H) Advocacy services; and

I) Discharge planning.

AGENCY NOTE: If at any time during the service period the family denies the SSF worker access to the child or children, the SSF worker will follow the requirements of subsection (e).

3) Strengthening and Supporting Families supervisors will provide management services that will include review and approval of assessments, service plans, Child Endangerment Risk Assessment Protocol Safety Assessments, cash assistance requests, appropriateness of service referrals, case file documentation, requests for assessment service extensions, and requests to close family assessment cases.

A) Supervisory review and approval of Child Endangerment Risk Assessment Protocol Safety Assessments will be in accordance with the Child Endangerment Risk Assessment Protocol.

B) Families receiving Family Assessment services are eligible for cash assistance through the Differential Response Cash Assistance Program. The Differential Response Cash Assistance Program provides cash assistance to families facing environmental issues (i.e., inadequate food, shelter, clothing or environmental neglect) to address an immediate need due to environmental issues that may be addressed by the delivery of some immediate cash assistance. The program provides cash assistance to families in the assessment pathway. Cash assistance requests are granted based upon the identified need of the applicant. An SSF worker submits a completed DR cash assistance form to his or her SSF Supervisor who forwards the form to the Regional DR Supervisor. Regional DR Supervisors are authorized to approve requests for $400 or less. Requests over $400 must be approved by the DCFS DR Project Director. Requests will be approved within 24 hours after application, excluding holidays and weekends.

C) Supervisory monitoring of service provider reports will be conducted to assess service delivery and appropriateness of services.

D) Approval of service extensions shall be based on the child's safety and well-being, family's needs and progress made in mitigating those conditions that contributed to its involvement with the Department.

E) The following documents must be submitted to the SSF Supervisor before formalizing case closing with the family:

i) Case Closing Summary

ii) Child and Family Service Aftercare Plan

iii) Case note documentation of required child interviews and documentation

iv) Provider treatment reports

v) CFS 1441, Safety Determination Form

vi) Completed LEADS and SACWIS/CANTS checks for all adult members of the household and all adults who are frequently in the home

e) Pathway Reassignment

1) Differential Response Specialist

If a Differential Response Specialist determines that a child is unsafe, that there is an immediate need for intervention, or that maltreatment allegations are not within the scope of differential response, the Differential Response Specialist shall contact his or her supervisor within one hour after completion of the initial contact with the family to discuss case information and possible referral to the investigation pathway. If the supervisor determines that the report should be re-directed to an investigation pathway, he or she will contact the State Central Register Supervisor without delay to have the report transferred to investigations. The State Central Register Supervisor will enter the date and time of the contact with the supervisor as the report taken date and time and enter an appropriate response code.

2) Strengthening and Supporting Families Worker

If the family refuses services anytime during the service period and/or the SSF Supervisor and worker have reasonable cause to believe that a child has been or is being abused or neglected and at risk of harm at any time during the service delivery period, the supervisor will contact the State Central Register Supervisor without delay to make a report of abuse or neglect. The State Central Register Supervisor will enter the date and time of the contact with the SSF Supervisor as the report taken date and time and enter an appropriate response code.

AGENCY NOTE: A case assigned to the investigation pathway may not be reassigned to an assessment pathway.

f) Families May Refuse Assessment Pathway Services

A family may refuse to accept assessment pathway services. However, if it is determined by the DR Supervisor after review of available assessment and safety information that the child's safety is compromised by the refusal, the DR Supervisor will re-direct the report to the investigation pathway in accordance with subsection (e)(1). If no safety concerns are identified, the case will be closed.

g) No Formal Determination of Maltreatment

Family members whose case follows an assessment pathway are not labeled as perpetrators. Children in an assessment pathway case are not labeled victims. Names of children or family members involved in the assessment pathway are not entered in the State Central Register, and services are provided without a formal substantiation of alleged maltreatment.

(Source: Added at 35 Ill. Reg. 1599, effective January 15, 2011)