

ILLINOIS SENATE BILL 378, AMENDMENT 1

PROTECTING INNOCENT FAMILIES ACT

It Protects Vulnerable Families from Injustice

When parents bring their child to a doctor or hospital, they trust that they will be provided with objective medical care that considers all possible diagnoses; however, when a child presents with specific symptoms—such as unexplained bruises, fractures, seizures, or failure to thrive—the case is often immediately brought to a medical provider who works directly with the Department of Children and Family Services (DCFS), law enforcement, prosecutors, and other entities accredited by statue to conduct investigations. The primary role of these medical providers is not to provide care, but to initiate legal proceedings against the parent.

Ethical and legal conundrums occur when these medical providers wear too many hats, simultaneously participating in the care and treatment of a child *and* as forensic consultants.¹ Current policies allow a single medical provider to make a hotline call, sit on the multidisciplinary team at the CAC that is making decisions about juvenile and criminal charges, recommend the removal of the child from the family, and even testify at trial—all without any transparency or accountability. Black families and parents of children with rare diseases are especially vulnerable to experiencing prolonged family separations and criminal convictions due to medically-based wrongful allegations of child abuse.

• Black Families are Disproportionally Targeted

Black families are far more susceptible to wrongful allegations. A shocking 53% of Black families in the nation are investigated by child welfare agencies at least once.² In Cook County alone, 68% of kids in DCFS care are Black,³ compared to 23% of the general population.⁴ Moreover, once the system intervenes against Black families, case data reveals they experience more serious charges and longer separation times than other families, even when the allegation is ultimately proven to be false.⁵

Parents of Children With Rare Diseases are Vulnerable

According to the National Organization for Rare Disorders, 25 million people in the US suffer from a rare disease—that's 1 in 10 Americans, which is the equivalent to the prevalence of type 2 diabetes. On average, a patient will suffer with a rare disease for five to ten years before getting a diagnosis, during which time children often experience otherwise unexplained symptoms including bruising, bone fragility, vascular fragility, failure to thrive, seizures, developmental delays, and more. Each of these symptoms routinely trigger child abuse investigations, which can greatly delay diagnosis and treatment, as well as cause traumatic family separation.











































Illinois Senate Bill 378, Amendment 1, also known as the Protecting Innocent Families Act, is a crucial piece of legislation aimed at safeguarding children and families from the unjust consequences of misdiagnosed child abuse cases. By addressing the inherent conflicts of interest in the current system, this bill seeks to ensure that families seeking medical care for their children are not unfairly targeted and separated. The purpose of this bill is not just to prevent the occurrence of wrongful allegations—it ensures

that valuable State resources are reserved to protect children from abuse and neglect.

SB 378, Amendment 1 will protect the constitutional rights of parents by:

- requiring medical providers who hold contractual agreements with DCFS, and other entities accredited by statute to conduct abuse investigations, to identify themselves as forensic investigators and not as members of the child's treatment team
- allowing families to seek second opinions from independent medical experts and requiring DCFS to consider those opinions
- requiring DCFS to report data and demographic statistics on outcomes of allegations stemming from the opinions of state-contracted providers and their teams to ensure accountability and accuracy in investigations

SOURCES:

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