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IN THE  
APPELLATE COURT OF ILLINOIS  
FIRST DISTRICT

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<i>In re</i> J.L., a Minor	)	
	)	Appeal from the Circuit Court
	)	of Cook County.
(The People of the State of Illinois,	)	
Petitioner-Appellee,	)	No. 14 JA 115
	)	
v.	)	The Honorable
	)	Peter J. Vilkelis,
Tameka C.,	)	Judge Presiding.
Respondent-Appellant).	)	
	)	

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JUSTICE GORDON delivered the judgment of the court.  
Justices McBride and Reyes concurred in the judgment.

**ORDER**

¶ 1 *Held:* The juvenile court's entry of an adjudication order finding the 13-year-old minor abused and neglected is affirmed where the medical records as well as testimony, admitted into evidence at the adjudication hearing, established that the minor had several physical injuries that corroborated his account of respondent's actions.

¶ 2 The instant appeal arises from the juvenile court's entry of an adjudication order finding 13-year-old J.L. abused and neglected due to an injurious environment and substantial risk of physical injury and making him a ward of the court. Respondent Tameka C., J.L.'s mother,

argues that there was no evidence to support the juvenile court's findings. For the reasons that follow, we affirm.

¶ 3

### BACKGROUND

¶ 4

On February 4, 2014, the State filed a petition for adjudication of wardship, asking for J.L. to be adjudicated a ward of the court; the State also filed a motion for temporary custody the same day. The adjudication petition claimed that J.L. was neglected in that he was a minor under 18 years of age “whose environment [was] injurious to his welfare.” The adjudication petition also claimed that J.L. was abused in that his parent or an immediate family member “[c]reate[d] a substantial risk of physical injury to such minor by other than accidental means” which (1) caused or (2) would be likely to cause “death, disfigurement, impairment of emotional health, or loss or impairment of any bodily function.”

¶ 5

The facts underlying all three claims are the same. J.L. stated that on January 31, 2014, respondent, his mother, threatened to harm him with a knife and also pushed and choked him. J.L. was observed to have a healing burn and old scars on his arm, as well as a swollen lump on his shoulder. J.L. explained that respondent caused his injuries, and medical personnel stated that the explanation was consistent with the injuries observed. J.L. stated that his sibling was with respondent as of January 31, but the Department of Children and Family Services (DCFS) was unable to locate respondent or J.L.'s sibling.<sup>1</sup>

¶ 6

On the same day, the DCFS investigator assigned to J.L.'s case filed an “Affidavit Documenting DCFS Efforts,” which stated that this case was brought to DCFS' attention when J.L. ran out of his house to Holy Cross Hospital. There, J.L. reported being choked by

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<sup>1</sup> There were adjudication proceedings for J.L.'s brother, as well, but they are not at issue in the instant appeal. Similarly, the adjudication proceedings in J.L.'s case involved J.L.'s father in addition to respondent, but J.L.'s father is not a party to the instant appeal. Accordingly, we only relate facts concerning J.L.'s brother and father where necessary to the understanding of respondent's appeal in J.L.'s case.

respondent and chased with a knife by her. J.L. had old burn marks on his body said to be caused by respondent and also had a healing burn mark on his left forearm and scars on his right forearm. J.L. had swelling on his right shoulder, which he reported as being due to respondent hitting him with an object, and J.L. indicated that he was “afraid to go home.”

¶ 7 Based on the facts alleged in the State’s petition for adjudication of wardship, on February 4, 2014, the juvenile court found probable cause that J.L. was abused or neglected and that immediate and urgent necessity existed to support his removal from the home. The court granted temporary custody to the DCFS guardianship administrator, with the right to place J.L. and the authority to consent to major medical care on his behalf. The court also entered an order denying respondent visitation because “mother needs to be assessed for services and make herself available to the agency and the court.”

¶ 8 On January 7, 2015, the parties came before the juvenile court for an adjudication hearing.<sup>2</sup> The only witness to testify was Janice Ware, a child protection investigator for DCFS, who testified that on January 31, 2014, she was assigned to investigate allegations of “[c]uts, welts, and bruises” involving J.L. Ware visited J.L. at Mount Sinai Hospital, where he had been admitted as a patient. Ware observed a lump on J.L.’s right shoulder, as well as “numerous marks and bruises that were older, some appeared to be scars and \*\*\* some appeared to be burn marks.” Ware discussed those injuries with J.L., who “said that the injury that he sustained prior to hospitalization” was due to his mother hitting him with an iron. J.L. explained to Ware that “he was kidding around and told his brother that he was going to hit his mother” and, in response, respondent “grabbed him and hit him with an iron.

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<sup>2</sup> Comments made during the hearing indicate that J.L. was psychiatrically hospitalized and respondent was incarcerated in Indiana at the time of the adjudication hearing. There is no detail about either of these events in the record on appeal.

Then he ran in the room and she started choking him.” Respondent told J.L. that “I’m going to kill this boy,” and then grabbed a knife.

¶ 9 Ware testified that J.L. had initially gone to Holy Cross Hospital, but was later transferred to Mount Sinai Hospital, where she met him. Ware went to respondent’s home to attempt to establish contact, but was unable to do so. After her initial handling of the case, it was transferred to a follow-up investigator, Beverly Pugh. At about the time the case was transferred, DCFS generated an “all shift alert” to attempt to locate J.L.’s younger brother, whom J.L. had mentioned during his interview with Ware. Ware was never able to establish contact with either respondent or J.L.’s brother.

¶ 10 On cross-examination, Ware testified that she did not have medical training making her an expert on burns but that she had received “MPEEC training.”<sup>3</sup> Ware explained that MPEEC training was “a training that all [child abuse] investigators are required to take to understand serious harm cases such as how to identify an accidental bruise or an intentional mark and to observe different injuries at different phases.” She further testified that all of the marks she observed on J.L.’s body, other than the lump on his shoulder, were old marks and not fresh.

¶ 11 On redirect, Ware testified that she had been employed as an investigator of child abuse and neglect for two years and had investigated “[h]undreds” of cases. Prior to her work as an investigator, she worked in the child welfare system for 20 years.

¶ 12 Admitted into evidence, with no objection by respondent’s counsel, were two exhibits: J.L.’s medical records from Holy Cross Hospital and J.L.’s medical records from the Mount Sinai Hospital Medical Center. J.L.’s records from Holy Cross Hospital indicate that J.L. was

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<sup>3</sup> According to the public guardian’s brief on appeal, MPEEC stands for “Multidisciplinary Pediatric Education and Evaluation Consortium.”

admitted to the emergency room on November 19, 2013, and that the reason for his visit was that “patient states he was choked by mother.” There are also several nurse’s notes from the same visit. The first states:

“Patient received alert and oriented appropriate for age. Patient states he got in trouble at school and was suspended. After being suspended mother picked patient up from school and patient states ‘she broke my coat zipper and tried to choke me so I ran away’. [No] physical injuries noted to patient. Patient clothing clean and no signs of abuse noted. Patient states he ran from 69th and Artesian to Holy Cross Hospital.<sup>[4]</sup>”

Another, entered 11 minutes later by the same nurse, states:

“Patient[']s father Gerald L\*\*\* states patient ‘runs away whenever he is going to get a spanking’. States patient was taking medication for ADHD but no longer wants patient to be on medication. After re-interviewing patient, patient states mother did not try to choke him[,] he just did not want to be spanked. Father states he is 4 hours away and cannot pick up patient. Mother not available.”

¶ 13

The Holy Cross Hospital records indicate that J.L. was again admitted to the emergency room on January 31, 2014, with the reason for his visit being “alleged child abuse.” The “Initial Comments” for the visit provided:

“Child ran from house after mother Temicka [*sic*] chased him with a knife and he ran to hospital. He states several years of abuse from her and he was living with dad until a few months ago when mom came and picked him up. Child seems very intelligent and articulate and appears to be very credible. He has burn mark on volar

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<sup>4</sup> The juvenile court’s findings indicate that this distance is “only about five or six blocks away.”

left forearm that he said his mom burned him with an iron, he also has two superficial laceration[s] right forearm where he said she tried to cut him.”

A “triage note” prepared by a nurse at the same visit states:

“Pt came in with CPD [beat] 855 states ‘my mother was choking me, she said she was going to kill me and went to grave [*sic*] a knife and I ran out of the house.[’] Pt also states ‘my mother burned me to left forearm with a iron,’ (old scar at site) also states ‘she burned me with a cigar to right arm,’ (with out scar.) Pt states ‘I have not been to school since the first five weeks of school because my mother doesn’t want me to go.’ ”

A nurse’s note from the same visit indicates that the police officer who brought J.L. to the hospital contacted respondent by phone and “mother states she does not live at home with children and is in a rehab facility, mother will not tell officer or RN which rehab facility she is in.” The note also indicates that J.L. was to be transferred to Mount Sinai Hospital.

¶ 14 The Mount Sinai Hospital records indicate that J.L. was admitted on January 31, 2014, due to “physical abuse.” The notes from the “history and physical examination” provided:

“12 y/o male who was upset with mom in the morning today because he was told to clean the house. He said ‘I want to hit her (mom)’, and mom pushed him against the wall then pushed him to the floor and using both hands tried to ‘choke me’ for a couple of seconds and ‘I could escape, but mom threw an iron to me, that hit me in the right shoulder’, then ‘she went to look for a knife saying I am going to kill this boy’. Pt ran away and after walking, arrived to [Holy Cross] ER. \*\*\* DCFS was called, and mother was called by ER doctor to let her know about the possibility that pt will be transferred to [Mount Sinai Hospital].”

A similar note was completed approximately five hours later, with “unreliable” listed next to a space at the top of the page stating “Reliability.”

¶ 15 Another note was completed at some time on January 31, with an “assessment/plan” of overnight observation until DCFS provided a safety plan. The same note indicated that personnel “called mom to obtain consent. Mom was hypervertbal and irritated on phone saying her son does not need any treatment and therefore was not giving any consent. She stated we will hear from her lawyers on Monday.”

¶ 16 After hearing argument from the parties, the court found that Janice Ware was “a credible witness,” based on her demeanor while testifying. The court further noted that it had reviewed the medical records admitted into evidence, and that the November 19, 2013, incident “does not reflect well on [J.L.’s] credibility because at first he said his mom tried to choke [him]. Then 11 minutes later he admits that his mother did not try to choke him.” As to the incident on January 31, 2014, the court noted that the records from Holy Cross stated that J.L. appeared to be credible, but that “the Court is not relying on any doctors or author of this document[] [as a] determination of his credibility.” The court noted that the records from Mount Sinai were similar to those from Holy Cross on January 31, with “both indicat[ing] that the minor stated that this all started when his mom wanted him to do a chore. He didn’t want to do the chore and things went south from there.”

¶ 17 The court found it “troubling” that on January 31, personnel from Mount Sinai called respondent to obtain consent, but “[t]he note reflects that she said that her son does not need any treatment and therefore she was not giving any consent. [The mother] said that they were going to hear from her lawyers[,] indicating a serious problem the mom had with the child being in the hospital.” The court noted that Ware testified that she observed J.L. at Mount

Sinai and observed the lump on his shoulder as well as numerous older “marks and bruises and scars and burn[] marks.” The court found that “based on the evidence it seems that it was a really chaotic domestic situation. And whether it was corporal punishment which is allowed in the state of Illinois, it seems that it went beyond that.”

¶ 18 The court found that “[t]he child was observed to have cuts, welts, and bruises and injuries and scars and burns. The child told more than one person that the injuries were caused by his mother. There is no other explanation being offered as to where the child got those cuts, welts, bruises and burns. The State has filed a petition alleging that [J.L.] is neglected because he is in an injurious environment. He is abused because of actual physical abuse and abuse because of a substantial risk of physical injury.”

¶ 19 The court entered an adjudication order finding J.L. abused or neglected due to an injurious environment and substantial risk of physical injury because “minor presented at hospital indicating mother inflicted injuries.”

¶ 20 On February 6, 2015, the juvenile court held a dispositional hearing. Stacy Adams testified that she was an employee of the UCAN agency and was assigned to J.L.’s case. J.L. was currently located in a nonrelative adolescent foster home, where he had been since December. Adams last visited J.L. at the home the day before the dispositional hearing, where she found everything to be safe and appropriate, with no signs of abuse or neglect and no signs of corporal punishment. Adams testified that on January 1, J.L. was very aggressive with his foster parent and was psychiatrically hospitalized for three weeks. Prior to being hospitalized, J.L. had been diagnosed with oppositional defiant disorder, mood disorder, and ADHD; J.L. was on medication and was compliant with his medication. J.L. returned to the foster home on January 23 and “[e]verything [was] going well so far” since his return.



¶ 21 Adams testified that J.L. was in the eighth grade and attending special education classes. He had only been in school for a few weeks because he had been “going in and out of the hospital,” so he had an incomplete IEP (individualized education program); a staffing was scheduled later in February “to determine what we need to do as far as his education is concerned.”

¶ 22 Adams testified that J.L. had been moved to his current foster home in December because his previous foster home “refused to take him back because of the behavior that he was displaying,” namely, “[b]eing very aggressive; fighting other children in the home; threatening tearing up T.V.s and stuff like that.” J.L. was currently receiving individual therapy and psychiatric treatment, had a mentor that picked him up every week, and was enrolled in UCAN’s “Future Leaders Now” program. J.L. was compliant with his therapy, which he received once a week; was being monitored psychiatrically once a month; and his mentor reported his relationship was “[s]o far so good” since December, when the mentorship began. J.L. was not in need of any other services.

¶ 23 Adams testified that respondent was in need of a psychiatric evaluation, a psychological exam evaluation, a substance abuse evaluation, and individual therapy. Respondent was currently incarcerated, and Adams was not sure whether respondent could participate in any services while incarcerated and needed to reach out to the social worker at the prison. Adams testified that there was a no contact order between respondent and J.L. but that respondent had recently sent a letter to J.L. through UCAN. Adams gave the letter to J.L.’s therapist to determine if it was appropriate for J.L. to receive it, and “[c]onsidering the behaviors that he has been displaying after reading the letter, the therapist felt that it wasn’t in his best interests to—it wasn’t in [J.L.’s] best interests to have the letter because it was kind of doing some

blaming; and that's not good for [J.L.] right now." Adams was recommending that J.L. be adjudicated a ward of the court, in part because "currently mom is incarcerated so she's unable to care for him at this moment."

¶ 24 On February 6, 2015, the juvenile court entered a dispositional order finding it in J.L.'s best interest to be adjudged a ward of the court and finding both respondent and J.L.'s father unable for some reason other than financial circumstances alone to care for, protect, train, or discipline him. The court ordered J.L. placed in the custody of the DCFS guardianship administrator with the right to place him. This appeal follows.

¶ 25 ANALYSIS

¶ 26 On appeal, respondent challenges the juvenile court's finding that J.L. was abused and neglected.<sup>5</sup> "A proceeding for adjudication of wardship 'represents a significant intrusion into the sanctity of the family which should not be undertaken lightly.' " *In re Arthur H.*, 212 Ill. 2d 441, 463 (2004) (quoting *In re Harpman*, 134 Ill. App. 3d 393, 396-97 (1985)). It is the State's burden to prove allegations of neglect or abuse by a preponderance of the evidence. *In re A.P.*, 2012 IL 113875, ¶ 17. "In other words, the State must establish that the allegations of neglect [or abuse] are more probably true than not." *In re A.P.*, 2012 IL 113875, ¶ 17. A reviewing court will reverse the juvenile court's determination "only if the factual findings are against the manifest weight of the evidence or if the court abused its discretion by selecting an inappropriate dispositional order." *In re Kamesha J.*, 364 Ill. App. 3d 785, 795 (2006); see also *In re Malik B.-N.*, 2012 IL App (1st) 121706, ¶ 56; *In re J.C.*,

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<sup>5</sup> Respondent's brief states that she is appealing both the adjudication and dispositional orders, but in her discussion of the dispositional order, she makes no argument that the order was erroneous and instead recognizes that "it is undisputed that mother was incarcerated at the time of the hearing. Therefore it cannot be reasonably argued that the finding that mother was unable to care for the minor was against the manifest weight of the evidence." Accordingly, we discuss only the adjudication order and have no need to consider the propriety of the dispositional order.

396 Ill. App. 3d 1050, 1060 (2009); *In re Gabriel E.*, 372 Ill. App. 3d 817, 828 (2007). “A finding is against the manifest weight of the evidence only if the opposite conclusion is clearly evident.” *In re Arthur H.*, 212 Ill. 2d 441, 464 (2004) (citing *In re Edward T.*, 343 Ill. App. 3d 778, 794 (2003)). “Because a trial court is in a superior position to assess the credibility of witnesses and weigh the evidence, a reviewing court will not overturn the trial court’s findings merely because the reviewing court may have reached a different decision.” *In re April C.*, 326 Ill. App. 3d 245, 257 (2001) (citing *In re Lakita B.*, 297 Ill. App. 3d 985, 994 (1998)). “Ultimately, there is a ‘strong and compelling presumption in favor of the result reached by the trial court’ in child custody cases.” *In re William H.*, 407 Ill. App. 3d 858, 866 (2011) (quoting *Connor v. Velinda C.*, 356 Ill. App. 3d 315, 323 (2005)).

¶ 27 Respondent recognizes that generally, a juvenile court’s findings regarding abuse or neglect will not be reversed unless they are against the manifest weight of the evidence. See *In re A.P.*, 2012 IL 113875, ¶ 17. However, in her case, she argues that the standard of review should be *de novo* because “[i]n this case the sole issue to be determined is whether the statements made by the minor regarding the allegations of abuse by his mother are credible,” and since J.L. did not testify and all of his statements came from medical records, “the trial court was not in a better position to assess the minor’s credibility than is the reviewing court.”<sup>6</sup> We do not find this argument persuasive.

¶ 28 Respondent’s argument fails to consider the fact that, in addition to the medical records, the juvenile court also heard the testimony of Ware, the DCFS child protection investigator, during the adjudication hearing. Ware testified as to her conversation with J.L. as well as to

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<sup>6</sup> We note that respondent did not object to the admission of the medical records and raised no hearsay objections, either at trial or on appeal, concerning the use of J.L.’s statements as substantive evidence.

her observations of injuries on his body. Thus, the juvenile court was presented with more than merely documentary evidence and deference to its factual determinations is proper.

¶ 29 Moreover, even if *de novo* review applied, we would agree with the juvenile court's determination that the State demonstrated by a preponderance of the evidence that J.L. had been abused and neglected. Respondent appears to believe that "there is [no] basis for the reviewing court to evaluate whether any of the minor's statements made to third parties are credible" and that "[s]ince the burden of proof lies with the People, without the minor statements being deemed credible, there is no basis for determining that the minor was subjected to an injurious environment or that he was subjected to a substantial risk of physical abuse." However, respondent overlooks the physical injuries on J.L.'s body that served to corroborate his statements.

¶ 30 Ware, who the juvenile court expressly found to be a credible witness, testified that she observed a lump on J.L.'s right shoulder, as well as "numerous marks and bruises that were older, some appeared to be scars and \*\*\* some appeared to be burn marks." These injuries were consistent with the medical records and served to corroborate J.L.'s account of events. As the juvenile court noted, J.L. informed more than one person that the injuries were caused by respondent, and respondent offered no other explanation for the injuries. The Mount Sinai medical records also indicated that when respondent was informed that her child was in the hospital, respondent refused to consent to any treatment and threatened to contact an attorney.

¶ 31 Our supreme court has recognized that, while it is "an amorphous concept that cannot be defined with particularity," generally, the term "injurious environment" "has been interpreted to include the breach of a parent's duty to ensure a safe and nurturing shelter for his or her

children.” (Internal quotation marks omitted.) *In re Arthur H.*, 212 Ill. 2d at 463. Similarly, an abused child includes a minor whose parent “creates a substantial risk of physical injury to such minor by other than accidental means which would be likely to cause death, disfigurement, impairment of emotional health, or loss or impairment of any bodily function.” 705 ILCS 405/2-3(2)(ii) (West 2012). In the case at bar, we cannot find that the juvenile court erred by finding that the State had proven that J.L. was subjected to an injurious environment and was subject to a substantial risk of physical injury based on Ware’s testimony and the medical records admitted into evidence.

¶ 32

#### CONCLUSION

¶ 33

The juvenile court properly determined that J.L. was an abused and neglected child due to an injurious environment and a substantial risk of physical injury.

¶ 34

Affirmed.