

No. 1-25-1675

IN THE
APPELLATE COURT OF ILLINOIS
FIRST JUDICIAL DISTRICT

<i>In re</i> N.W., Minor-Appellee	)	Appeal from the
	)	Circuit Court of
	)	Cook County.
	)	
(The People of the State of Illinois,	)	
	)	No. 25JA490
Petitioner-Appellee,	)	
	)	
v.	)	
	)	
N.D.,	)	Honorable
	)	Patrick T. Murphy,
Respondent-Appellant).	)	Judge Presiding.
	)	

JUSTICE McBRIDE delivered the judgment of the court, with opinion.
Justices Ellis and Van Tine concurred in the judgment and opinion.

OPINION

¶ 1 Respondent N.D. appealed the juvenile court’s orders adjudicating the minor, N.W., to be abused and neglected under the Juvenile Court Act of 1987 (Act) (705 ILCS 405/1-1 *et seq.* (West 2024)) and finding that it was in N.W.’s best interests to be adjudged a ward of the court. In an earlier appeal, this court affirmed the trial court’s adjudication findings and remanded for the entry of an order providing the factual basis supporting the trial court’s dispositional

findings. *In re N.W.*, 2026 IL App (1st) 251675-U (*N.W. I*). This appeal arises following that remand.

¶ 2 The record shows that respondent is the natural mother of N.W., a female child who was born on February 20, 2025. N.W.'s natural father, Ni.W., is not a party to this appeal.

¶ 3 The State filed a petition for adjudication of wardship for N.W. on June 11, 2025. The petition alleged that N.W. was physically abused, abused by being placed at a substantial risk of physical injury, and neglected in that her environment was injurious to her welfare. The petition alleged the following factual basis supporting a finding that N.W. was abused and neglected:

“In April of 2025 this minor presented at the hospital after [respondent and Ni.W.] were involved in a domestic altercation with each other. [Ni.W.] threw this minor over a fence during this incident which resulted in minor sustaining several injuries. Per medical personnel, in April of 2025 this minor was diagnosed with bilateral skull fractures and intracranial bleeding. [Ni.W.] has been incarcerated at Cook County Jail since the April of 2025 incident. On June 8, 2025, this minor presented at the hospital and was observed with human bite marks on her chest. Per medical personnel, this minor was also diagnosed with a new acute focal intracranial hemorrhage. Medical personnel state[d] that this [wa]s concerning for recurrent trauma. Per medical personnel, [respondent] ha[d] no plausible explanation as to how this minor was injured.”

¶ 4 Based on the above, the State requested that N.W. be adjudged a ward of the court and that the court “enter such orders as are in the best interest of the minor.”

¶ 5 On June 13, 2025, the juvenile court held a temporary custody hearing, where it found probable cause that N.W. had been neglected and that urgent and immediate necessity existed to

remove N.W. from respondent's care. The juvenile court placed N.W. in the temporary custody of the Department of Children and Family Services (DCFS).

¶ 6 The State was granted leave to amend the petition for adjudication of wardship on July 22, 2025, adding to the allegations that there was "an ongoing issue of domestic violence between [the] parents" and that respondent had "untreated mental health issues."

¶ 7 On August 20, 2025, the court held an adjudication hearing. The State began by introducing various documentary evidence, including certified medical records from Lurie Children's Hospital, University of Chicago Hospital, and Comer's Children's Hospital, which were admitted without objection. Those medical records primarily related to two hospital visits—the first for an April 18, 2025, incident, during which the then two-month-old N.W. was thrown over a six-foot fence, and the second on June 8, 2025, when then-four-month-old N.W. received treatment for various injuries including a bite mark to her chest.

¶ 8 The medical records relating to the April 18, 2025, incident included notes from Lurie Children's Hospital social worker Jazmine Ford, who stated that respondent alleged that Ni.W. took N.W. out of her car seat and ran off with N.W. in his arms. Respondent stated that she "did not see exactly when [Ni.W.] took the baby, but someone at the train station informed her of the direction he ran." Respondent chased Ni.W. for several blocks while on the phone with the Chicago Police Department. When the police arrived, Ni.W. threw N.W. over a tall fence, then hopped over the fence himself before picking N.W. up off the ground and continuing to run away. Respondent reported that police officers were able to recover N.W. and that Ni.W. was arrested.

¶ 9 Respondent also reported various incidents of domestic violence between her and Ni.W. to the hospital staff and stated that there was an order of protection entered in January 2025, but

respondent only “found out about the order of protection” in March 2025. Respondent stated that her guardian *ad litem* (GAL) filed for the order of protection due to “multiple police reports [respondent] filed because of domestic violence involving” Ni.W. Respondent also confirmed that Ni.W. cared for N.W two or three times per week and that he last cared for N.W. two or three days before the April 18, 2025, incident.

¶ 10 The records also included notes from Dr. Annie Torres, N.W.’s attending physician at Lurie Children’s Hospital. Dr. Torres stated that N.W.’s “medical evaluation has been significant for bilateral parietal skull fractures, focal extra-axial hemorrhage, and healing [Classic Metaphyseal Lesions] to the left distal femoral diaphysis and left proximal tibial diaphysis.” N.W.’s skull fractures and focal extra-axial hemorrhage could not be “dated with specificity,” although they were “reasonabl[y] attributed” to the “witnessed trauma,” which was “consistent with child physical abuse.” N.W. also had “healing fractures” that “would not be consistent with the trauma observed today given their stage of healing.” The records stated that the “type of fractures identified, Classic Metaphyseal Lesions (CMLs), are highly specific for abusive trauma in the context of [N.W.]’s age and development. At this time, these additional findings are most concerning for prior child physical abuse.”

¶ 11 Records from the June 8, 2025, visit indicate that respondent reported that she had been “out of town in Wisconsin from June 1-6 for a funeral” and that N.W. was staying with respondent’s mother, C.D. When respondent returned on June 6, 2025, she was told that N.W.’s “3 [year old] cousin with autism had pushed [N.W.] off the bed earlier that day.” Respondent noticed bite marks and told the medical staff that N.W.’s cousin “often goes up to people and bites them.”

¶ 12 Respondent reported to a different medical provider that N.W. was “allegedly pushed out of bed” and bitten by an “autistic 2 year old relative.” After respondent returned, she noticed that N.W. was “not herself” and saw evidence of the bite. Respondent applied A&D ointment and “did not initially seek care, believing that the bite would heal on its own.” Respondent became concerned, however, when N.W. “continued to feed poorly,” and respondent brought N.W. to the emergency department.

¶ 13 Dr. Jill Glick and Dr. Burak Arikon both provided care to N.W. related to her June hospitalization.

¶ 14 Dr. Glick set out N.W.’s medical history, including that she was seen at a clinic on May 9, 2025 “with healing left 8, 9, 10 rib fractures.” Dr. Glick also stated that on May 23, 2025, “Per DCFS [N.W.] was seen and [respondent] smelled of [tetrahydrocannabinol (THC)], [N.W.’s] pacifier smelled of THC.”

¶ 15 Dr. Glick noted that the “perpetrator of the recent injuries is a major concern.” Although respondent stated that they “were due to a[n] autistic child pushing the baby off the bed, and bit[ing] her,” the bite injury was “generous in size,” and N.W.’s “scleral hemorrhage [sic] bilateral are highly suspicious of inflicted injuries, the baby has lots of skin injuries—this baby has not been protected.”

¶ 16 During a physical exam, Dr. Arikon noted a scar on N.W.’s right ear, “[s]cleral hemorrhage more prominent on the right,” “Human bite marks without drainage or swelling on chest,” “Ecchymoses and healing scars on left abdomen,” “Bruising on right lower eyelid,” and “Healed scratch marks on right cheek.” “Given [N.W.]’s significant prior history of abuse, concerning injuries, and inconsistencies in the history, [the medical] team pursued further workup.” Two CT scans were conducted. The first showed new acute focal intracranial

hemorrhage, which was “concerning for recurrent trauma, as well as “Linear lucencies *** in keeping with fractures” in N.W.’s parietal bones. The second head CT included, “Stable subdural and subarachnoid blood products as compared to prior CT. No new hemorrhage” and “Stable biparietal calvarial fractures.”

¶ 17 Dr. Arikon issued the following findings:

- “1. bilateral scleral hemorrhages—from blunt trauma to face
2. Left lower eyelid bruising
3. Large ovoid healing lesion concerning for a bite
4. CT positive for acute blood in the frontal area
5. Scratches to the face, chest, and abdomen
6. History of separate event of abuse, from being thrown over fence in April by [Ni.W.], resulting in bilateral cranial fractures, left sided CML to the left femur and tibia said to be healing by Lurie intracranial bleeding and healing rib fractures.”

¶ 18 Dr. Arikon further noted that the timeline of N.W.’s injuries showed that she had “bilateral skull fractures” from the April 18, 2025, incident, as well as other fractures that were seen on May 9, 2025. Dr. Arikon stated that the fractures were “probably” from the April 18, 2025, incident, but the doctor could not “state with certainty” when they occurred. N.W. also had evidence of healing knee injuries when she was seen on April 18, 2025, and those injuries were “therefore older.” Finally, N.W. had evidence of “facial injuries” and a “bite to [the] chest” on June 8, 2025.

¶ 19 Drs. Glick and Arikon diagnosed N.W. with “child abuse prior and current”; “bilateral scleral hemorrhages and left eye lower lid bruising from blunt trauma”; a “history of prior NAT

[non-accidental trauma] with bilateral calvarial fractures, intracranial bleeding, rib fractures diagnosed in April-May 2025”; “healing CML at presentation April 2025”; and “DV history known then and continues.”

¶ 20 The State also introduced certain medical records of respondent, relating to incidents of domestic violence involving Ni.W. On September 25, 2024, respondent was seen at Comer Hospital, when respondent was 17 weeks pregnant with N.W. She reported that she was walking home from school when her “ex-boyfriend” attacked her. He choked her, took her to an alley, and hit her “in the face with possibly a pole.” Respondent could not see out of her swollen right eye. Respondent also had pain in her abdomen and in her facial area.

¶ 21 Thereafter, on March 28, 2025, respondent’s medical records indicate she was seen at Ingalls Memorial Hospital, reporting that she was “attacked by her child’s father,” who “punched [respondent in the] face multiple times.” Respondent also reported that he “wrapped a belt around her neck and choked her for a few minutes,” until she passed out.

¶ 22 After the above medical records were introduced, the State called DCFS investigator David Ruano, who testified that he was assigned to work on the investigation on April 18, 2025. On that date, Ruano spoke to respondent at Lurie Children’s Hospital, where N.W. was being treated. Respondent reported that she was standing at the train station with N.W., when a man ran up, grabbed N.W. out of her car seat, ran off, and threw N.W. over a six-foot fence. Respondent stated that the man had a mask on, but she believed the man was N.W.’s father. Ruano asked respondent how the man threw N.W., and respondent used a pillow to indicate throwing N.W. “like a baseball player might throw a ball.” N.W. landed on grass on the other side of the fence.

¶ 23 Respondent indicated to Ruano that she and Ni.W. co-parented N.W. and that there was an order of protection in place. Respondent did not have a copy of the order of protection, and Ruano never saw the order of protection. Respondent explained that her godmother, Ms. W., helps to transfer N.W. from respondent's care to Ni.W.'s care and vice versa.

¶ 24 Ruano took protective custody of N.W. when he was at Lurie Children's Hospital, and he did not know why N.W. was returned to respondent. Ruano worked the "evening shift" and transferred the case to a different investigator, who worked the "day shift." Ruano was not assigned to the case after that night, and he did not follow or have any other involvement with it.

¶ 25 DCFS Investigator Tenisha Cathey testified that she was first assigned to the case on March 19, 2025. Cathey made "ongoing attempts" to contact respondent at her transitional living program (TLP), but respondent "wasn't there." Cathey was finally able to speak to respondent on March 26, 2025. Cathey informed respondent that DCFS had opened an investigation due to "concerns of domestic violence" in respondent and Ni.W.'s relationship. Respondent confirmed that "domestic violence was present" and that respondent was "in process of removing herself from the situation." Respondent told Cathey that there was an "incident the week prior at [Ni.W.]'s cousin's home in Alsip, Illinois," when respondent had to call the police because she could not get N.W. back from Ni.W. Respondent further explained that respondent's GAL secured an order of protection in January 2025, due to domestic violence in respondent's relationship with Ni.W. Respondent told Cathey that the January 2025 order involved respondent and Ni.W. Cathey never was able to see an order of protection from January 2025.

¶ 26 Respondent further told Cathey she was using family members, including Ms. W. and respondent's sister, to facilitate communication and co-parenting between respondent and Ni.W., but co-parenting was still "not working out."

¶ 27 Cathey was assigned to the family for a second time on April 19, 2025, to investigate the allegation of domestic violence between respondent and Ni.W. at a train station, when Ni.W. threw N.W. over a fence, causing multiple injuries. N.W. was later discharged from Lurie Children's Hospital and returned home with respondent pursuant to a safety plan.

¶ 28 Cathey testified that an order of protection was obtained on June 3, 2025, to protect respondent and N.W. The juvenile court asked Cathey who sought that order of protection. Cathey stated that she was not sure who had sought the order, she just "kn[e]w we were able to locate it in our system." At that point, counsel for respondent stated that it was respondent who "went and got the order of protection." Respondent also stated, "I went to go get the order of protection in June. We *** went to court."

¶ 29 Cathey then continued her testimony. Cathey stated that she spoke with respondent over the phone on June 10, 2025. Respondent told Cathey that she had been in Wisconsin for her sister's funeral and left N.W. in the care of a friend. Respondent told Cathey that when respondent returned home and picked up N.W., N.W. was not "acting normal." Respondent described that she was having trouble feeding N.W., so respondent took N.W. to the hospital. At the hospital, medical personnel discovered injuries on N.W. including a bite mark, scratches, and a new head injury.

¶ 30 Respondent told Cathey that she noticed the bite mark while respondent was changing N.W., but respondent could not give Cathey "any details in regards to" N.W.'s head injury and swollen eye.

¶ 31 Respondent told Cathey that she "need[ed] help" with N.W. and was "willing to go do a guardianship" with her godmother, Ms. W. Cathey testified that she was told that respondent "goes AWOL" and "runs" from her TLP, and when she does, she goes to Ms. W.'s home.

¶ 32 Cathey “unfounded” the initial March 2025 investigation, but “indicated” the second investigation and took protective custody of N.W. when N.W. was ready to be discharged from the hospital in June. Cathey explained that she “indicated” the second investigation and took protective custody of N.W., based on the “amount of injuries the minor had suffered within *** four month[s] of her being alive.” Cathey elaborated that this “was the second time” N.W. had a head injury and that she had a history of “broken bones *** [and] scratches.” Cathey believed that respondent was “willing but unable to protect” N.W.

¶ 33 Cathey also testified that there was a “companion case” that she also “indicated,” involving respondent’s adult friend, C.S., who cared for N.W. while respondent was in Wisconsin. Cathey explained that a “companion case” involved situations when there were two perpetrators, but they do not live in the same home.

¶ 34 On cross-examination, Cathey confirmed that protective custody was taken of N.W. because there were “no safety measure[s]” in place to keep N.W. safe in respondent’s care, there was an order of protection in place, and nothing else could prevent N.W. from ongoing harm. Cathey also stated that she believed respondent’s “timeline was inconsistent” and that the versions of events provided by respondent and C.S. to the medical professionals were inconsistent with N.W.’s injuries.

¶ 35 Respondent told Cathey that C.S. told respondent that C.S.’s three-year-old son bit N.W. while C.S. was in the shower. Cathey noted that the doctors “were unable to provide an estimate” of when N.W.’s injuries occurred, so Cathey could not determine whether N.W. was injured in respondent’s or C.S.’s care.

¶ 36 The medical personnel confirmed to Cathey that the bite marks on N.W. were human, but they were unable to confirm whether they were from a child or adult. Although C.S. and

respondent told Cathey that the bite marks were from a three-year-old child, the doctors “said that was inconsistent” with N.W.’s injuries. Cathey noted that N.W. had additional injuries and that the doctors could not tell when those injuries occurred.

¶ 37 Cathey also stated that she was not sure if respondent would have been required to “go to court to get an order of protection,” but confirmed that respondent had custody of N.W. at the time the June 3, 2025, order of protection was entered.

¶ 38 Cathey further testified that she learned that Ms. W. provides support to respondent, and that respondent would sometimes stay with Ms. W. instead of at respondent’s TLP. Ms. W. lived closer to respondent’s school and helped respondent with N.W.’s care. Respondent told Cathey that Ni.W. did not know where Ms. W. lived, so respondent felt safer there.

¶ 39 Cathey affirmed that respondent was cooperative throughout the investigation. When Cathey initially sought to find placement for N.W., Cathey tried to place N.W. with Ms. W. However, respondent was living at Ms. W.’s home at that time, so Cathey did not feel that Ms. W.’s home was a safe placement for N.W.

¶ 40 Cathey made multiple attempts to contact Ni.W., but she was unable to do so. Cathey was aware that Ni.W. was incarcerated in relation to the second investigation. Cathey made efforts to place N.W. with paternal family members but was unsuccessful.

¶ 41 Following the above testimony, the State and the GAL rested.

¶ 42 Respondent testified that she was born and raised in Chicago. Respondent gave birth to N.W. on February 20, 2025, at Comer Children’s Hospital. Respondent testified that she loves N.W. and is very attached to her.

¶ 43 Respondent testified that N.W. was hospitalized for the first time in April 2025, after respondent and Ni.W. “got into a fight,” and Ni.W. took N.W. from respondent. Respondent

testified that she “believe[d] [N.W.] was thrown over a fence” because a “lady had witnessed him throwing her over a fence” and told respondent. Respondent knew that the man who took N.W. was Ni.W.

¶ 44 Respondent explained that she and Ni.W. were staying at a temporary shelter at the time, and they got into an argument because respondent did not want to stay there anymore.

Respondent stated that she, Ni.W., and N.W. went to a Dunkin Donuts, so respondent could charge her phone, and Ni.W. “ran off with” N.W. Respondent called the police and reported that Ni.W. took N.W. Ni.W. told respondent that he was at the Thorndale Red Line station, so respondent went there, where she and Ni.W. began fighting again. Ni.W. then “ran off” with N.W. again.

¶ 45 Respondent testified that N.W. was taken to Lurie Children’s Hospital. Respondent spoke to “about 20 people” that day, and she would recognize those people if she saw them. She specifically remembered speaking to “a lady,” but she denied ever seeing or speaking to Ruano at the hospital. Respondent remembered speaking to a DCFS investigator that day, but she remembered the investigator being a woman. Respondent did recall speaking to Cathey at the hospital.

¶ 46 Respondent explained that she brought N.W. to the hospital in June because N.W. seemed to be in pain and was not eating normally.

¶ 47 Before she took N.W. to the hospital, respondent was in Racine, Wisconsin, because she was attending the funeral and other services for respondent’s “God sister.” Respondent testified that she checked on N.W. every day while she was out of town and was not informed of anything concerning while she was gone. Respondent also “FaceTime[d]” with N.W., and N.W. “seemed fine.” Respondent did not see any physical injuries or bruises.

¶ 48 On the day respondent returned home to Chicago, she was changing N.W.'s diaper when she noticed a bite mark. Respondent took N.W. to Olympia Fields Hospital on June 8, 2025, where they did an X-ray. Respondent asked for N.W. to be seen at Comer Children's Hospital because they were "better at equipping her and *** had her history." When respondent went to leave with N.W., a security guard told her she had to return, and respondent complied.

¶ 49 N.W. was later treated at Comer Children's Hospital. DCFS called respondent and asked respondent to have a conversation with a counselor about what happened to N.W. Respondent had a conversation with someone who asked her questions about what happened, and then respondent "had to leave the hospital."

¶ 50 On cross-examination, respondent explained that she believed Ni.W. was the masked man who took N.W. from her because respondent and Ni.W. were "still in an argument" from the night before about N.W. "falling out of the bed." Respondent thought that Ni.W. intended to "take [N.W.] to the hospital or to the doctor" because Ni.W. "had concerns about [N.W.'s] safety," but Ni.W. "never communicated that."

¶ 51 Respondent testified that she did not bring N.W. to Wisconsin with her because she was emotional and did not know if she could "hold it together."

¶ 52 Respondent then rested her case.

¶ 53 Ni.W. testified that he was 19 years old. In March 2025, Ni.W. had N.W. in his care for a few days, and he decided to go to his cousin's house with N.W. Ni.W. tried to communicate with respondent about this, but respondent later told him that her phone had been broken for two days. Once Ni.W. was able to communicate with respondent, he and N.W. were already at his cousin's house.

¶ 54 Ni.W. explained that respondent was irritated and upset by this and that they verbally argued. Ni.W. told respondent that he did not have a car and that buses were no longer running, so respondent would have to wait until the next day for him to return N.W. to her. Respondent did not “want to do that,” so she called the police. The police and respondent came to Ni.W.’s cousin’s house, and the police told Ni.W. that he had to return N.W. to respondent. Ni.W. said he “had no problem doing that” and that he could not return N.W. earlier because he did not have a car. Respondent verbally argued with Ni.W. and his cousin, and respondent and Ni.W. argued over text messages, but Ni.W. testified that there were never “any physical altercations.”

¶ 55 Ni.W. testified that he had concerns about N.W.’s safety while she was in respondent’s care. Ni.W. had been unable to see N.W. since he became incarcerated, but Ni.W. was aware that N.W. had been “hurt and injured.” Ni.W. had “no clue how [N.W.] got hurt and got all of these excessive injuries,” and he was learning about even more injuries in court on that day.

¶ 56 Ni.W. testified that he was not currently in contact with respondent and that he was abiding by the order of protection. He and respondent communicated through his mother. Ni.W. testified that he loves N.W. and would do whatever was necessary to keep N.W. safe. When asked by the juvenile court whether he threw N.W. over a fence, Ni.W. responded by saying that those were “false allegations.” Ni.W. denied ever taking N.W. from the train station.

¶ 57 On cross-examination, Ni.W. explained that, prior to their communication breakdown, he and respondent did not have a “structured” childcare plan. Respondent would call him to pick up N.W. whenever respondent “had something to do or wanted a break.” Ni.W. watched N.W. when respondent was attending school, and he would drop N.W. back with respondent when he needed to go to work.

¶ 58 Ni.W. then rested his case.

¶ 59 Thereafter, the juvenile court entered an order finding that N.W. was physically abused, abused by being placed at a substantial risk of physical injury, and neglected because her environment was injurious to her welfare. The juvenile court stated:

“I’ve heard the evidence here. What I’m shocked at is that DCFS didn’t take in custody in April. You had a kid that had all these significant injuries and Ruano testified that he took custody and then someone overruled him apparently later.

[Respondent] says Ruano never talked to her, and that’s a matter of *** credibility. I found *** [respondent] not [to] be a credible witness in a lot of points. I found [Ni.W.] to be more credible on many points than [respondent], and, you know, a mask[ed] man takes the kid and then it’s him. We don’t know if anything happened. Who threw the kid over the fence. It’s—and did the mother to go [sic] Wisconsin?

She said she’s getting an order of protection on June 3rd. The hospital record says she told them she was in Wisconsin from June 1 to June 6[] so she apparently came in and got the [order of protection] while she was [in] Wisconsin *** and then the second set of injuries she blames on [a] two or three *** year [old] kid. Come on.

You’re talking about a two or three [year] old kid. *** [T]he evidence is overwhelming here that the child was neglected and physically abused and I accept the State’s evidence.

It’s clearly beyond a preponderance.”

¶ 60 The court then proceeded to the dispositional hearing.

¶ 61 Case worker Angela Watts testified that she is employed by Shelter, Inc. Watts stated that N.W. is in a nonrelative, Safe Families home in Volo, Illinois. Watts testified that Shelter, Inc. “consistently looked for relatives” for N.W.’s placement, but they had not been able to find one. N.W.’s paternal grandmother was unable to care for N.W. because she had not found stable housing in the Chicago area since moving from Memphis. Ni.W.’s grandmother was also explored as an option, but she said that she was unable to care for N.W. because she did not want “anything to do with” respondent, and she did not want respondent at her home. Respondent’s godmother, Ms. W., was not considered for placement because when respondent “goes AWOL,” she goes to Ms. W.’s home.

¶ 62 Watts believed that it was in N.W.’s best interests for her to become a ward of DCFS. Watts explained that N.W. “sustained several injuries” from April to June 2025, when protective custody was taken. After protective custody was taken, N.W. was placed with a “Safe Family home who has been taking care of her [for] approximately two months.” Watts last visited N.W. on August 6, 2025, in the foster home where N.W. lives with her foster mother, foster father, and their three biological children. N.W. had been safe, healthy, and progressing well in this home, and she was “bonded with the family.”

¶ 63 Ni.W. was compliant and had completed the integrated assessment, although he had “limitations being incarcerated.” Respondent also completed her intake assessment, but Watts had not yet received results to know what services were recommended. Respondent had indicated that she was willing to participate in services.

¶ 64 Watts explained that respondent was originally scheduled to visit with N.W. three times per week for one hour each. Respondent recently informed Watts that she got a job working with Amazon, and respondent requested that visits be changed to one day per week for three hours.

Watts adjusted the visitation schedule accordingly, and respondent visited with N.W. the Monday before the dispositional hearing. That visit “went well,” although respondent “ended the visit an hour early.” N.W. fell asleep during the visit. Once N.W. was asleep, respondent told the supervising case aide that she “could take N.W. home,” even though one hour of the three-hour visit remained. The case aide told respondent that she could continue the visit. If N.W. woke up before the visit ended, respondent could care for N.W. or respondent could just sit and bond with N.W. while she slept. Respondent declined the offer and reiterated that the case aide “could just take [N.W.] home.”

¶ 65 Prior to the most recent visit, respondent was scheduled to visit N.W. on more than eight occasions, and she had completed two visits. Respondent missed the visits because she did not confirm them pursuant to the agency’s policy.

¶ 66 On cross-examination, Watts explained that when N.W. was with respondent, they lived at the transitional living center (TLC) at Thresholds Mother’s Project (Thresholds), a mental health organization that assisted those with mental health concerns. Watts was not aware of whether respondent was prescribed or taking any mental health medications. Watts understood that respondent had refused, and would not comply with, services offered to her by Thresholds, and that she needed to complete a psychiatric evaluation to determine if she needed medicine and/or therapeutic services. Respondent would “go on [the] run for extended periods of time” from Thresholds, and she was currently “on [the] run” at the time of the dispositional hearing.

¶ 67 After the parties rested, the juvenile court stated, “So, we’re going to make the child a ward of the Court and of DCFS, and I find both parents unable at this point.” Thereafter, the juvenile court entered a written form order, which checked the following boxes: (1) that N.W. “is adjudged a ward of the court, it being in the best interest and welfare of the minor”; (2) that both

respondent and Ni.W. were “unable for some reason other than financial circumstances alone to care for, protect, train, or discipline the minor”; (3) that “[r]easonable efforts have *** been made to prevent or eliminate the need for removal of the minor from the home”; (4) that “[a]ppropriate services aimed at family preservation and family reunification have been *** unsuccessful”; and (5) that it “is in the best interest of the minor to remove the minor from the custody of the parents, guardian or custodian.” N.W. was placed in the guardianship of “a DCFS Guardianship Administrator with right to place the minor.”

¶ 68 Respondent filed a timely notice of appeal.

¶ 69 As this court explained in our prior decision, the Act provides a two-step process that the juvenile court must utilize to decide whether a minor child should become a ward of the court. *In re A.P.*, 2012 IL 113875, ¶ 18. The first step is the adjudicatory hearing, at which the court considers only whether the minor child is abused, neglected, or dependent. *Id.* ¶ 19; 705 ILCS 405/2-18(1) (West 2024). If the circuit court determines at the hearing that the minor child is abused, neglected, or dependent, then the court holds a dispositional hearing, in which the court determines whether it is consistent with the health, safety, and best interests of the minor child and the public for the minor child to be made a ward of the court. *A.P.*, 2012 IL 113875, ¶ 21; see 705 ILCS 405/2-22 (West 2024). In any proceeding brought under the Act, the paramount consideration is the best interest of the child. *A.P.*, 2012 IL 113875, ¶ 18.

¶ 70 In our prior decision, respondent challenged both the trial court’s adjudicatory and dispositional decisions. This court affirmed the trial court’s findings that N.W. was abused and neglected at the adjudicatory hearing. The full analysis of that issue can be found in this court’s prior decision. See *N.W. I*, 2026 IL App (1st) 251675-U. In sum, we found “substantial evidence supporting the trial court’s finding that N.W. was physically abused,” particularly in light of the

significant medical evidence showing that N.W. was observed on separate occasions with multiple injuries, including skull fractures, intracranial bleeding, leg fractures, bruising, lesions, and a bite mark. *Id.* ¶ 75. And although a single finding of neglect, abuse, or dependency would have been enough to affirm the trial court’s adjudicatory decision (*In re V.S.*, 2025 IL 129755, ¶ 57), we also concluded that the court’s findings that N.W. was abused, in that she was placed at a substantial risk of physical injury, and neglected, in that her environment was injurious to her welfare, were not against the manifest weight of the evidence. *N.W. I*, 2026 IL App (1st) 251675-U, ¶ 89.

¶ 71 Turning to the court’s dispositional decision, however, this court found that the trial court had failed to state the factual basis for its finding that respondent was unable to care for N.W., in violation of section 2-27(1) of the Act (705 ILCS 405/2-27(1) (West 2024)). *N.W. I*, 2026 IL App (1st) 251675-U, ¶ 99. As this court explained, section 2-27(1) of the Act provides that the circuit court may place a child outside the parental home “[i]f the court determines and puts *in writing* the factual basis supporting the determination of whether the parents *** of a minor adjudged a ward of the court are unfit.” (Emphasis added.) 705 ILCS 405/2-27(1) (West 2024). In *In re Madison H.*, 215 Ill. 2d 364, 371, 377 (2005), our supreme court concluded that an oral finding on the record, once transcribed, may satisfy the writing requirement of section 2-27(1), but only if “it is explicit and advises the parties of the basis for the court’s decision.” In *N.W. I*, we found that neither the trial court’s written order nor its comments at the dispositional hearing provided any factual basis for the court’s decision. *N.W. I*, 2026 IL App (1st) 251675-U, ¶ 99. Accordingly, we retained jurisdiction over this appeal and ordered a limited remand for the entry of an order providing the express factual basis supporting the trial court’s findings. *Id.* ¶ 100.

¶ 72 In compliance with our instructions, the circuit court articulated its findings in an order

dated June 17, 2026. That order was filed as a supplemental record in this appeal.

¶ 73 In that order, the trial court recognized the requirement for the written factual basis of its dispositional determination and apologized for failing to issue such findings. It explained:

“In some cases, such as this, the evidence in the adjudication phase of the proceeding is so overwhelming and egregious that the disposition follows as night the day. In the present case the evidence clearly demonstrated that both parents are immature and reckless (and, at least the mother, seems to have significant health issues) with no understanding of how the recklessness would negatively impact upon their infant child. And, of course, the evidence showed that the child did suffer enormously because of the negligence of the parents who, according to the evidence, were so focused on their own needs that they not only ignored the child but injured the child.”

¶ 74 The trial court reiterated its comments during the dispositional decision, particularly regarding N.W.’s “significant injuries” and its assessment that respondent was not credible. The court expressed doubt about several aspects of respondent’s version of events, including the circumstances of N.W. being thrown over the fence, whether respondent sought an order of protection against Ni.W., and respondent’s claim that a two- or three-year-old child caused the second set of injuries.

¶ 75 The court further explained that during the dispositional hearing,

“the DCFS worker again emphasized the immaturity of both parents. At the time of disposition, the father was incarcerated. The mother had eight opportunities to visit her child but only did on two occasions. At least during one of these occasions the mother dozed off. The worker testified cogently and credibly that

the child should become a ward of the court because neither parent was safely able to care for the child. The mother does have serious mental health issues and the father was incarcerated during at least part of the proceedings.”

¶ 76 The court found that it was

“clear from the evidence that both parents require intensive services so that they can understand the seriousness of raising the child. The court relies on the guardian to determine the services but at a minimum the parents should engage in parenting classes, therapy and psychological testing. The parents should never miss a visit which should be supervised in the beginning and thereafter unsupervised at DCFS discretion. Given the significant injuries to this infant and the gross immaturity of the parents the court could not by any reasonable standard of evidence return this infant to them. Under the specific circumstances of this case, this court believes that neither parent is presently able to provide even the most minimal care for this child. Therefore, the court appointed DCFS the guardian and made the child a ward of the court.”

¶ 77 Following the trial court’s order, this court gave both parties the opportunity to file supplemental briefs. We will consider both the parties’ initial briefs and supplemental briefs in reviewing the trial court’s dispositional decision.

¶ 78 The purpose of the dispositional hearing is to determine whether it is in the best interest of the minor and the public for the minor to become a ward of the court. *A.P.*, 2012 IL 113875,

¶ 21. The trial court may make the minor a ward if it finds that the parent at issue is unable, unwilling, or unfit, for some reason other than financial circumstances alone, to care for, protect, train, or discipline the minor and that the health, safety, and best interests of the minor will be

jeopardized if she remains in her parent’s custody. *In re Harriett L.-B.*, 2016 IL App (1st) 152034, ¶ 30. A finding on any one of the grounds is sufficient to make the minor a ward of the court. *Id.* At a dispositional hearing, the court may rely on all evidence that is “helpful in determining these questions,” even if such evidence was “not competent for the purposes of the adjudicatory hearing.” 705 ILCS 405/2-22(1) (West 2024); see *In re D.L.*, 226 Ill. App. 3d 177, 187-88 (1992) (“Although hearsay and other types of incompetent evidence may not be admissible at the adjudicatory hearing, they are admissible at the dispositional hearing.”). We will reverse the trial court’s dispositional ruling “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 Daniel G.*, 2021 IL App (1st) 210640, ¶ 54. “A finding is against the manifest weight of the evidence when the opposite conclusion is clearly evident or if the finding itself is unreasonable, arbitrary, or not based on the evidence presented.” *Id.*

¶ 79 As an initial matter, respondent contends that this court erred in remanding to allow the trial court to make factual findings, and that we should have instead ordered a new dispositional hearing. Respondent does not cite any authority for her contention that this court was required to order a new dispositional hearing on remand, and we could find her argument forfeited. See *Atlas v. Mayer Hoffman McCann, P.C.*, 2019 IL App (1st) 180939, ¶ 33. Nonetheless, we are unpersuaded by respondent’s argument, particularly because, in our prior decision, this court cited three cases which found that the proper remedy for a court’s failure to include the factual basis for its decision in violation of the Act is a limited remand for the trial court to do so. See *In re K.G.*, 2024 IL App (1st) 240792-U, ¶ 44 (when “neither the written adjudication order nor the oral pronouncement of the circuit court provides any factual basis for its decision,” the appellate court remanded “for the entry of the express factual basis supporting the circuit court’s

findings of abuse and neglect”); *In re Abel C.*, 2013 IL App (2d) 130263, ¶ 22 (“Neither the written order of adjudication nor the trial court’s oral pronouncement provided any factual basis for the trial court’s decision. Accordingly, this court retained jurisdiction over the appeal and entered a limited remand for the entry of the express factual basis supporting the trial court’s finding of neglect.”); *In re B’Yata I.*, 2013 IL App (2d) 130558, ¶ 41 (where the trial court “failed to set forth any factual basis for its decision,” the appellate court “enter[ed] a limited remand, strictly for the entry of the express factual basis supporting the trial court’s finding of unfitness, not for the taking of evidence or for additional argument”).

¶ 80 Respondent also contends that the court improperly relied on evidence that was elicited at the adjudication hearing, when the State “did not incorporate [that evidence] into the disposition” hearing. Respondent acknowledges that “the adjudication hearing was relevant” to the trial court’s decision regarding disposition; however, she maintains that it “was the State’s burden at the disposition to incorporate the adjudication into the disposition, and it did not do that.”

¶ 81 Respondent does not cite any authority for her suggestion that the court could not rely on evidence elicited during the adjudication hearing, unless the State explicitly incorporated that evidence at the dispositional hearing. To the contrary, this court previously rejected a similar argument in *In re A.U.*, 2024 IL App (1st) 231727. In that case, the respondent argued that a trial court erred in considering a report during a dispositional hearing that “ ‘was never admitted into evidence.’ ” *Id.* ¶¶ 55, 61. The court explained that during an adjudicatory hearing, the “ ‘standard of proof and the rules of evidence in the nature of civil proceedings’ apply.” *Id.* ¶ 64 (quoting 705 ILCS 405/2-18(1) (West 2022)). However, at a dispositional hearing, when a court determines if it is in the minor’s and the public’s best interests that the minor be made a ward of the court, “ ‘the rules of evidence are substantially relaxed.’ ” *Id.* (quoting *In re Ca. B.*, 2019 IL

App (1st) 181024, ¶ 56). Section 2-22 of the Act explicitly provides that “[a]ll evidence helpful in determining these questions *** may be admitted and may be relied upon to the extent of its probative value, even though not competent for the purposes of the adjudicatory hearing.” 705 ILCS 405/2-22(1) (West 2024).

¶ 82 In this case, the dispositional hearing immediately followed the adjudicatory hearing, at which the trial court heard substantial testimony and evidence regarding N.W.’s injuries and hospitalizations. Although adjudicatory and dispositional hearings are separate, we do not find that the State’s alleged failure to strictly follow the rules of evidence, by requesting that the adjudicatory evidence be “incorporate[d]” into the later dispositional hearing, requires the court to ignore evidence that was just elicited. See *In re D.M.*, 2024 IL App (1st) 230508, ¶ 42 (“An adjudicatory hearing does not need to be lengthy or a burdensome process because the dispositional hearing may be held immediately after the adjudicatory hearing.”). As stated above, the rules of evidence are “substantially relaxed” at the dispositional hearing. Accordingly, formal adherence to those rules is not required. (Internal quotation marks omitted.) See *A.U.*, 2024 IL App (1st) 231727, ¶ 75; see also *In re M.D.*, 2022 IL App (4th) 210288, ¶ 63 (“Essentially, there are no rules of evidence governing what the court may receive and consider at the dispositional hearing.”).

¶ 83 As the trial court explained in its order following remand, it found respondent to be “immature and reckless,” and unable to “provide even the most minimal care” for N.W. The court found that N.W. “suffer[ed] enormously,” because both respondent and Ni.W. were “so focused on their own needs that they not only ignored the child, but injured the child.” The court noted that respondent has “serious mental health issues” and that she needs “intensive services” to “understand the seriousness of raising [the] child.” The court also referenced Watt’s testimony

at the dispositional hearing that respondent had eight opportunities to visit N.W., but she only did on two occasions. The court stated that this testimony “emphasized” respondent’s “immaturity.”

¶ 84 Respondent, however, argues that she “took many steps to care for and protect” N.W., including “obtain[ing] two orders of protection against the baby’s father.” This contention is not supported by the record. The record suggests there may have been an order of protection entered in January 2025, but no one had been able to confirm its existence. Moreover, even if that order of protection exists, the testimony established that respondent claimed that the order was sought by her GAL on her behalf and that respondent was not aware of it until months later.

¶ 85 Regarding the June 3, 2025, order of protection, DCFS investigator Cathey confirmed that there was an order entered on that date, but she did not know who sought the order.

Although respondent claimed to have gone to court to seek that order of protection, the court found respondent was not credible on this point, in particular because respondent told one of N.W.’s medical providers that she was in Wisconsin from June 1 through 6, 2025. The trial court’s credibility assessments are entitled to “broad discretion,” as it was in the best position to “observe the demeanor and conduct of the parties and witnesses” and to “determine the credibility and weight to be given to the witnesses’ testimony.” *In re Davon H.*, 2015 IL App (1st) 150926, ¶ 47.

¶ 86 Respondent also asserts that the record shows that she cared for N.W. by “regularly stay[ing] with her godmother to avoid domestic violence.” The record showed, however, that when respondent claimed to go to her grandmother’s home, she was “run[nin]g” away from her TLC run by Thresholds, a mental health organization that assists those with mental health concerns. Despite respondent’s significant mental health issues, respondent would often “go AWOL” from the program, and she refused all services offered to her, including a necessary

psychiatric evaluation to determine if she needed medicine and/or therapeutic services. In such circumstances, the court was not required to credit respondent's explanations for her absences from her TLC.

¶ 87 Respondent also disputes the trial court's findings regarding missed visitation opportunities and the trial court's characterization of DCFS worker's testimony about those missed visits as showing respondent's "immaturity." She contends that it was the foster agency who created "hurdles" to her visitation by requiring her to confirm the visit by a particular time or the scheduled visit would be canceled. As the trial court noted, the record shows that respondent was offered eight opportunities to visit N.W. Respondent, however, only visited N.W. on two occasions, and she ended one of those visits early. Even if we agreed that all of respondent's missed visits with N.W. were a result of her failure to confirm those visits in accordance with the foster agency's policy, that failure supports the trial court's finding regarding respondent's immaturity. In these circumstances, we certainly cannot conclude that the opposite conclusion is clearly evident or that the court's finding is unreasonable, arbitrary, or not based on the evidence presented. *Daniel G.*, 2021 IL App (1st) 210640, ¶ 54.

¶ 88 Finally, respondent asserts that in the trial court's June 17, 2026, order, it commented that respondent "dozed off" during one of the visits with N.W., when the evidence presented at the dispositional hearing established that N.W., not respondent, fell asleep during the visit. We agree that the trial court conflated respondent and N.W. in this single sentence of its lengthy order. However, the court's minor misstatement of the evidence on this point did not affect its ultimate conclusion that respondent had failed to take advantage of the many opportunities she had been offered to visit with N.W. See *In re M.W.*, 2025 IL App (1st) 242532-U, ¶ 58 ("[M]inor misstatements of the evidence that do not affect the foundation of the trial court's ruling are not a

basis for reversible error” (citing *People v. Williams*, 2017 IL App (1st) 150795, ¶ 39)).

¶ 89 Finally, respondent argues that the trial court erred in relying on respondent’s failure to engage in reunification services at the time of the dispositional hearing, when the record shows that she was willing to participate in those services, but had not yet been offered any. While respondent’s willingness to engage in services is commendable, the fact remains that respondent has not yet engaged in services that the trial court found were “require[d]” to help her understand “the seriousness of raising the child.” See *In re A.T.*, 2015 IL App (3d) 140372, ¶ 15 n.3 (affirming the trial court’s dispositional finding that a parent was unfit where the parent had not yet begun services, the parent was willing to engage in services, and the appellate court did not “attribute th[e] delay to respondent,” but where, “[n]onetheless, her progress in the services cannot be ‘satisfactory,’ because she has not begun any of them”).

¶ 90 Based on the record in this case, we do not find trial court’s findings that respondent was unable to care for N.W. and that it was in N.W.’s best interest that she be made a ward of the court were against the manifest weight of the evidence.

¶ 91 For the foregoing reasons, the judgment of the circuit court of Cook County is affirmed.

¶ 92 Affirmed.

In re N.W., 2026 IL App (1st) 251675-B

Decision Under Review: Appeal from the Circuit Court of Cook County, No. 25-JA-490; the Hon. Patrick T. Murphy, Judge, presiding.

**Attorneys
for
Appellant:** Sharone R. Mitchell Jr., Public Defender, of Chicago (Rebecca A. Cohen, Assistant Public Defender, of counsel), for appellant.

**Attorneys
for
Appellee:** Eileen O'Neill Burke, State's Attorney, of Chicago (John E. Nowak, Gina DiVito, and Marina C. Para, Assistant State's Attorneys, of counsel), for the People.

Jeffrey W. Gunn, of Tapia-Ruano & Gunn P.C., of Chicago, for other appellee.
