



ANNUAL REPORT 2018

ILLINOIS GUARDIANSHIP AND ADVOCACY COMMISSION

Bruce Rauner, Governor

Dr. Mary L. Milano, Executive Director

Anthony E. Rothert, Esq., Chairman

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A Message from the Director

In the course of FY18, GAC continued to pursue its mission to fulfill specific mandates to serve citizens of Illinois with disabilities and to more broadly serve the communities of the State. As those who are part of this Agency, we see this mission as one which is integrated in purpose, activity, and is integral to the health and the social well-being of our communities in their diversity, compassion and, perhaps most importantly, potential.

We continue to be committed to providing “traditional” services of our three statutorily mandated divisions – the Office of the State Guardian, the Human Rights Authority and the Legal Advocacy Service – but we also see these mandates in what we believe are not traditional ways. More than ever, we continue to be committed and diligent to deepen, expand and reimagine our vision. In addition, we continue to explore and pursue methodologies that are responsive to our vision by keeping in mind the lives enhanced, persons empowered, and communities enriched. We are committed to demonstrating that in pursuing these paths, we intentionally model responsible use of every dollar and resource allocated to us as a public agency, and the ability to be agile, responsive and imaginative in the face of whatever economic and other challenges we face. We continue to do our work with virtually no budgetary or personnel increases and with some of the lowest costs of services of any agency in the State.

GAC’s story can be told in numbers, whether of people and communities served, alliances made, or dollars engaged. But the most telling parts of our story are those of our people, whether staff or those served or touched. As from time to time you see the narratives of those we have been privileged to serve, you will, I am convinced, be amazed just as each of us are.

We continue our pledge, renewed each year and in many ways each day, to imagine explosively, collaborate actively, and make the path we mark out to be one that knows no boundaries or walls, and represents the best that all of you – staff, commissioners, partners, clients, legislators, and sometimes critics – can imagine as well.

Sincerely,

Dr. Mary L. Milano

ABOUT THE COMMISSION

The Illinois Guardianship and Advocacy Commission safeguards the rights of persons with disabilities by providing public guardianship services, legal representation and a process to investigate alleged disability rights violations. The Commission was established by the Guardianship and Advocacy Act of 1979 (20 ILCS 3955/1 et seq.) and is governed by eleven Commissioners appointed by the Governor for three-year terms of office. Each Commissioner's selection reflects representation of an expertise, consistent with the Commission's mission to serve persons with disabilities.

The Commission carries out its mandates through the work of three primary programs, which receive support from a team of staff with expertise in areas that encapsulate the mission and vision of work for the citizens of Illinois.

Human Rights Authority (HRA)

Legal Advocacy Service (LAS)

Office of State Guardian (OSG)

OUR MISSION

To safeguard the rights of persons with disabilities by providing public guardianship services, legal representation and processes to investigate alleged rights violations.

OUR VISION

Ensure access to necessary guardianship and advocacy services for Illinois' citizens with disabilities with commitment to quality service provision by way of well- trained professional staff, dedication to public awareness of disability issues, advocacy for legislation and processes that have positive impacts on the agency, its services and its clients.

Human Rights Authority (HRA)

The Human Rights Authority investigates allegations of rights violations committed by both public and private entities that serve children and adults with disabilities. Through its investigations and negotiated case outcomes, the Authority advocates for systemic changes to provider policies, procedures and practices that improve disability rights protections. Comprised of nine regional panels, located across the State, the Authority engages Illinois' citizens who serve, voluntarily, as members on the regional Human Rights Authority panels. Each region is staffed by a Coordinator and nine volunteer members (81 total volunteers); each panel consists of three members who are service provider representatives and the remaining six members are consumers, family members or concerned citizens. The Authority provides a confidential and knowledgeable resource to refer complaints of disability rights violations and offers service-providing agencies an objective means of resolving complaints without costly litigation. HRA findings are publicly released and can be accessed through the Commission website.

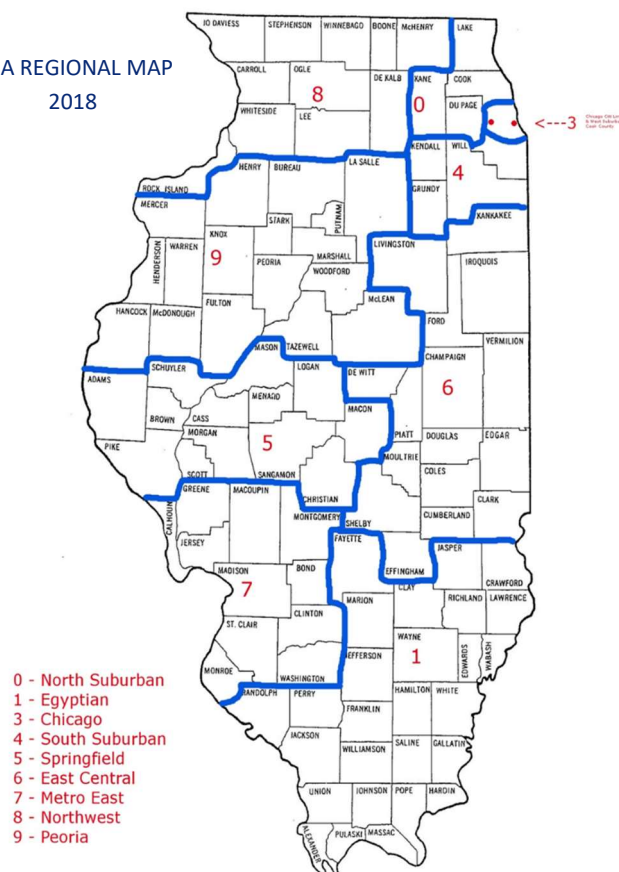
9 Regional Coordinators

FY 18 Interns—4

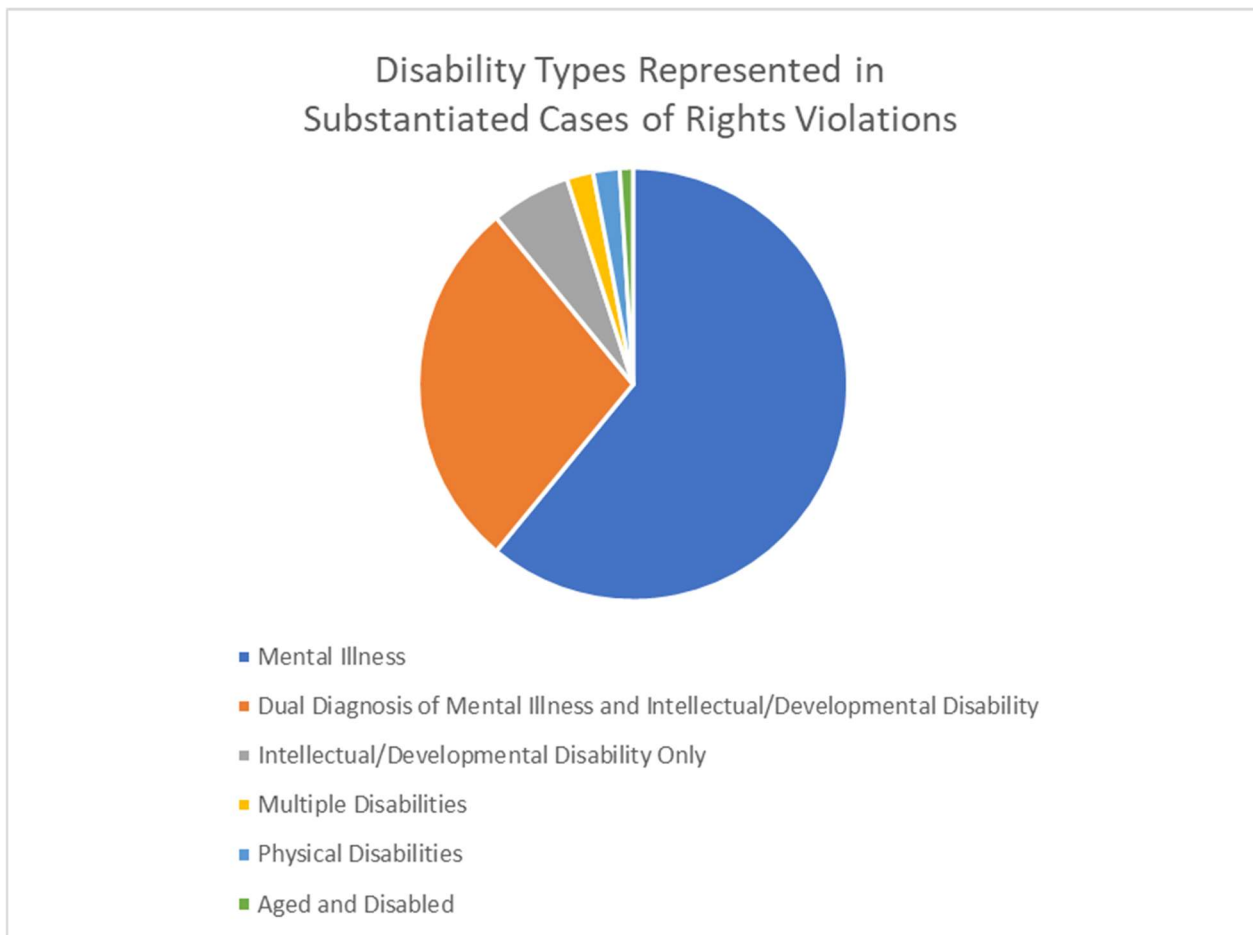
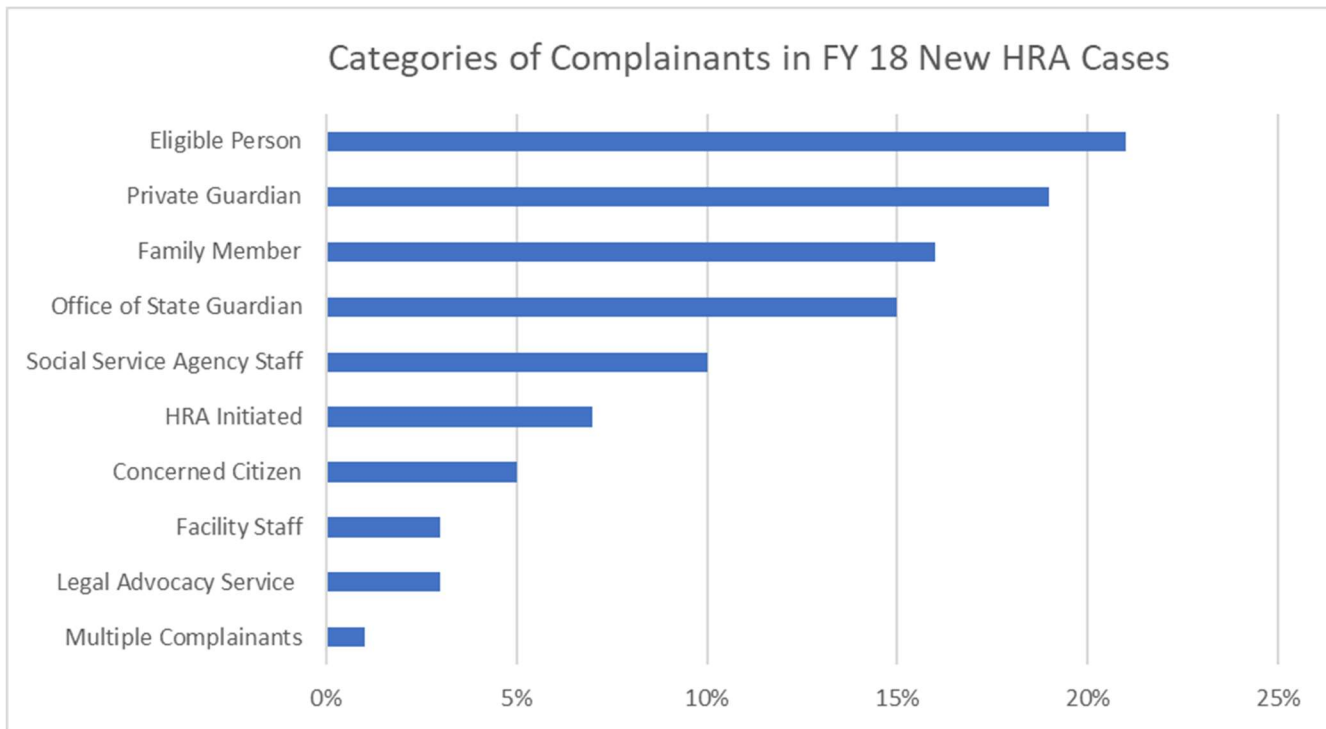
<i>Bradley University</i>	3
<i>Richwoods High School</i>	1

- ◆ 289 cases handled
- ◆ 201 intake calls
- ◆ 1448 volunteer hours
- ◆ 13,654 Individuals with Disabilities impacted by HRA recommendations and suggestions
- ◆ 85% of recommendations implemented by service providers
- ◆ \$79 cost per Individual with Disabilities impacted

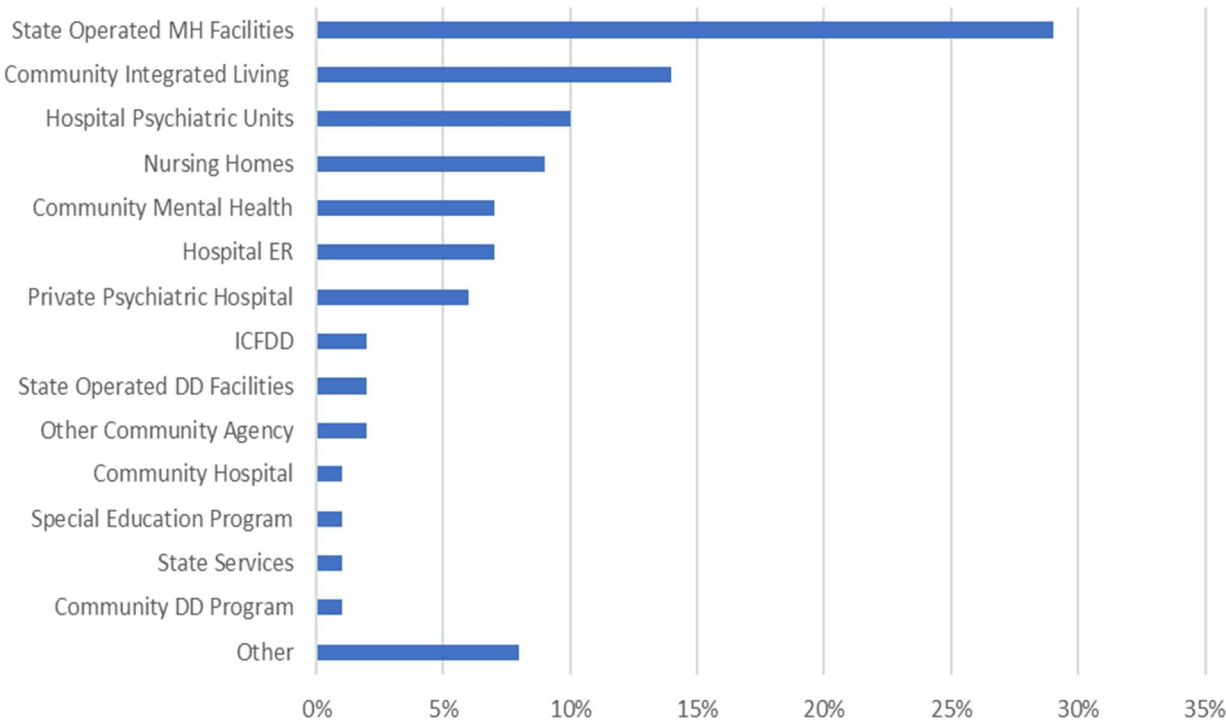
HRA REGIONAL MAP
2018



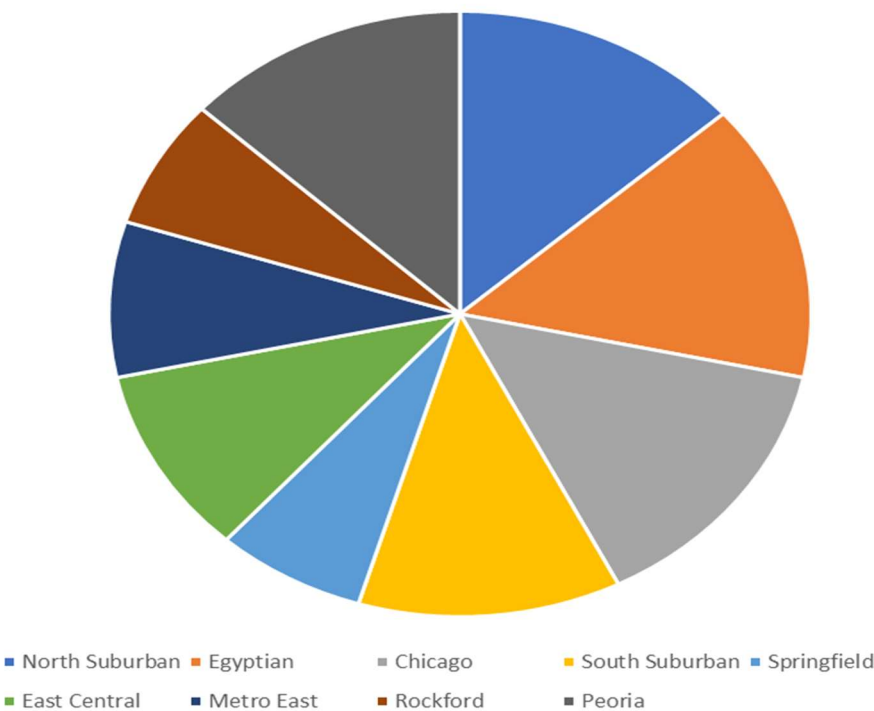
HRA CASE DATA

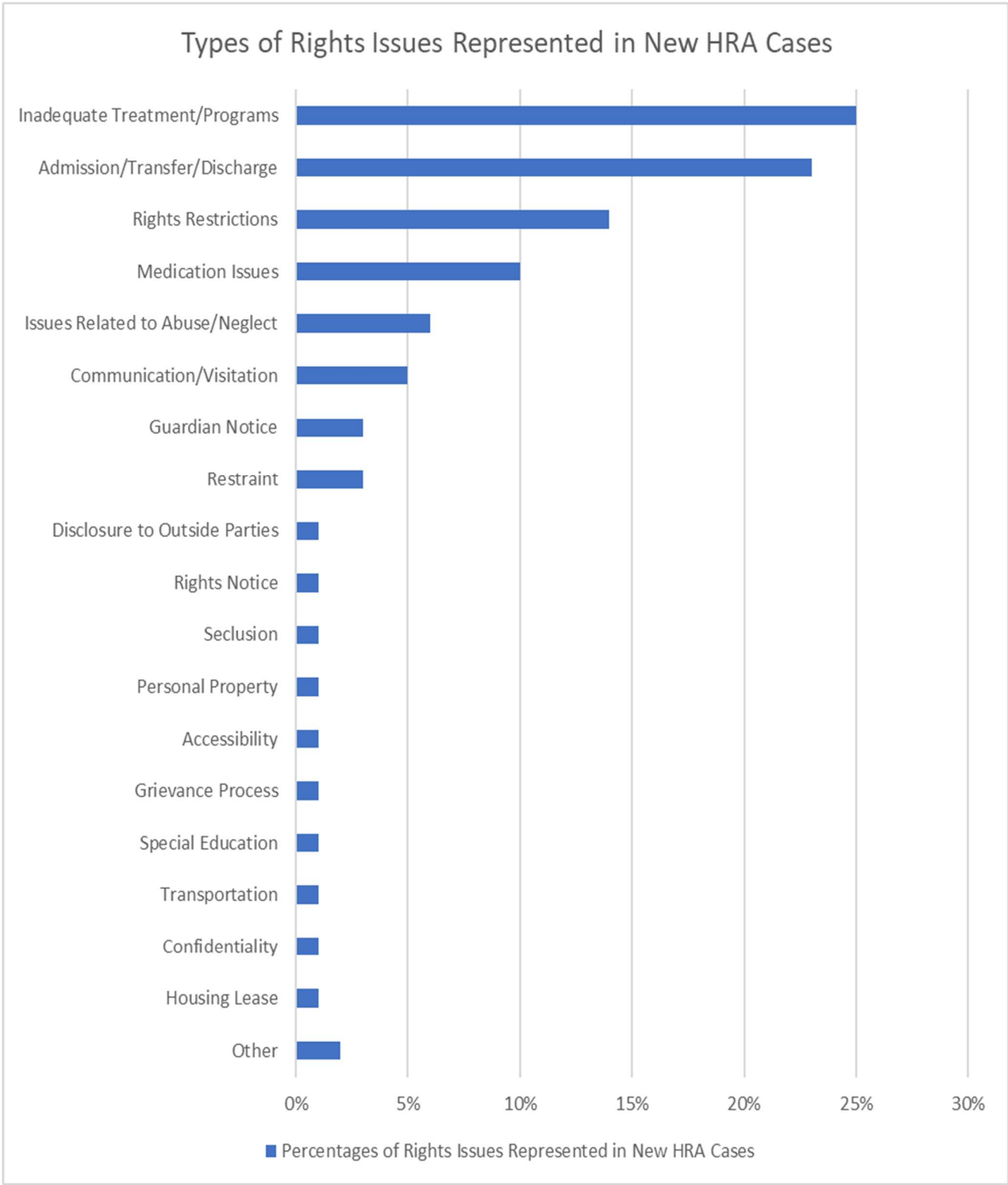


Type of Disability Provider Represented in New HRA Cases



FY 18 Cases Handled by Region of the State





Case Study #1

The South Suburban HRA substantiated a complaint stating that residents are denied rights and privileges solely because of their status as a service recipient. When the complaint was discussed with the agency's administration, the faith-based agency had a policy that prohibited consensual sexual relations among clients in the agency's residential program. The agency was not willing to refer residents to community providers for related educational or personal health needs; their only option was to be transferred to another agency if they choose to exercise their rights to sexual expression while in the agency's program. The agency's policy violates rights under the 59 Illinois Administrative Code Sections 115.200 (c) and (d) and the Mental Health and Developmental Disabilities Code Sections 5/2-100 a 5/2-102 (a) that provides for resident's autonomy, individualized needs, and total care planning in the least restrictive environment.

To correct the problem, the faith-based service provider accepted all the Authority's recommendations including a policy revision to reflect self-determination concerning sexual expression. The current case involves the same issue as a previous complaint, and revealed an on-going serious problem concerning the sexual expression rights of persons with intellectual and developmental disabilities as well as their access to sex education. This case, and other similar cases led to the development of a legislative proposal centered on access to sex education by adults with intellectual and developmental disabilities.

Case Study #2

The East Central Human Rights Authority investigated complaints involving a behavioral health school operated by a special education cooperative. The complaints were associated with an incident in which a student was restrained and arrested for fighting with an aide. The Authority found that the aide had put hands on the student to walk him to a locked time-out room when the student became upset. The behavioral school believed that they did the right thing but the HRA found that the restraint training protocol, the special education cooperative's policy on restraint and special education mandates were not consistent. In response to the Authority's findings, the special education cooperative made changes to its policy to align with mandates and subsequently retrained staff and updated the student/parent handbook and other relevant materials. The policy changes not only impacted the behavioral health school that was the subject of the complaint, but also impacted all behavioral health schools operated by the special education cooperative.

Case Study #3

The Egyptian Regional HRA initiated a case regarding inhumane care due to lack of outside/fresh air time for patients on the mental health unit at a state-operated facility. The HRA conducted three site visits over the course of seven months and interviewed thirteen patients at random regarding how often they have access to the outdoors, whether in the locked courtyard or on campus. The HRA also interviewed eight staff members from different shifts as well as administration. The patients and staff informed the HRA that patients enrolled in certain rehabilitation classes have access to the outdoors occasionally during those classes, but there was no scheduled outside time built into the unit schedule and outside access was at staff's discretion if adequate staff were present. Some patients reported going outside a few times per week while others reported only going outside 3 or 4 times in a year. The HRA soon realized through discussions that patients on "R" (restricted to the unit) level had very limited access to the outdoors. Although the courtyard was considered an extension of the unit, patients on "R" level were not allowed outside time without a physician's order. When asked, most patients were not aware that obtaining a physician's order for outside time was an option. The HRA also reviewed unit movement logs and noted that typically only a few patients went outside on most days. There were a few days when 10-16 patients of the 41-43 on the unit went outside. A frequent reason given for the lack of outside time was staff shortages. The HRA attempted several times to get clarification as to why, if there are enough staff for coverage on the unit, that the same staff level would not be adequate for supervising patients in a locked courtyard. The HRA never obtained an explanation for that, but administration stated that they would discuss it with staff to see if it would be possible to use the courtyard as a regular rotation on the unit. The HRA also reached out to the Department of Human Services and other state operated facilities and learned that there was no Department directive, but facilities are to follow the requirements of the Mental Health Code regarding guaranteed rights and restrictions. The other state operated facilities, even those with more restrictive settings than this one, had policies which *required* outside time, weather permitting, and viewed it as therapeutically beneficial rather than viewing it as a privilege to be earned as this facility's policy did.

The HRA substantiated the allegation and issued recommendations for the facility to revise its Use of Courtyards policy to be in line with other state operated facilities' policies and the Mental Health Code, which requires adequate and humane care and services in the least restrictive environment and also prohibits recipients from being deprived of any rights guaranteed by the Constitution of the State of Illinois or the United States Constitution solely because they are a recipient of services. The HRA also found that the "blanket policy" that all recipients on "R" level are not allowed use of the courtyard was inconsistent with individualized treatment planning and recommended that a restriction of rights form be utilized in the future if it is determined that an individual should be restricted from outside access for a brief period. As a result of the investigation, the facility revised its Use of Courtyards policy and now requires individuals to have access to the courtyard at a minimum of once on day shift and once on evening shift, weather permitting. Restriction of courtyard access now requires issuance of a Restriction of Rights based on a physician's order and should never exceed 24 hours and shall be re-evaluated by the treatment team at the earliest possible juncture.

Legal Advocacy Service (LAS)

Securing individuals with disabilities their constitutional and statutory rights.

The Legal Advocacy Service was created so that eligible children and adults could obtain legal advice and representation to protect and enforce their rights guaranteed by Illinois' mental health laws. LAS attorneys provide needed assistance to persons with disabilities in a variety of settings: mental health facilities, residential programs, community placements and nursing homes. Issue addressed include but are not limited to involuntary admission to and treatment in hospitals, discharge from hospitalization, adequate treatment, refusal of unwanted services and confidentiality of mental health records. Illinois courts often appoint LAS to represent persons with disabilities. Many cases result in published opinions which educate other mental health law attorneys, shape the way future hearings are conducted and create precedents for future court decisions. The Legal Advocacy Service provides assistance to thousands of individuals with disabilities each year. This assistance takes the form of information, referrals and legal representation in court hearings and administrative proceedings.

14 staff attorneys, 3 interns

- **7830 clients served**
- **9043 cases handled**
- **835 intake calls**
- **767 Lee Wesley Consent Decree referrals**
- **437 hearings held**
- **233 requests for Advanced Directives Assistance**
- **18 new appeals**
- **75% of cases referred to higher courts**

2018 Notable Accomplishments

Barbara Goben, Staff Attorney

President, Illinois State Bar Association
Mental Health Law Committee

Andreas Liewald, Staff Attorney

Secretary, Illinois State Bar Association
Mental Health Law Committee

Inez Toledo, Staff Attorney

Kane County Bar Association Seminar

Legal Advocacy Service

- Within the past year the Legal Advocacy Service helped two patients at DHS mental health facilities move to a facility closer to their family. Both residents were from the Cook county area, but for various reasons DHS placed them in facilities in Alton and Chester Illinois. This made continued visitation hard, if not impossible, for their families especially for one consumer whose father was diagnosed with terminal cancer. We advocated with DHS and was able to have both patients moved back to Cook County area DHS facilities and thereby closer to their support systems.
- In representing DCFS wards in the Metro East area who are in the psychiatric facilities beyond medical necessity, we advocated for their prompt release to the least restrictive alternative other than hospitalization that could safely address their mental health needs. We also realized that while they were being hospitalized, the minors were not receiving education; we spoke with the local school district, the hospital and DCFS in establishing tutoring for the wards during their behavioral health hospitalization.
- IGAC/LAS relationship with the Springfield Police Department's Crisis Intervention Team (CIT). We provide recurring annual training for the SPD CIT and have developed a cooperative, collegial, relationship with SPD. They utilize us for information and assistance when they have difficult challenges dealing with persons in our community with mental illness. The SPD has made a concerted effort to divert persons with mental illness from the criminal justice system and into the civil commitment process. The training we provide stresses the importance of treatment over punishment. The synergy created has gotten the State's Attorney's Office onboard and they regularly will suspend criminally charging persons with mental illness in favor of civil commitment proceedings. The net result is more people getting medical treatment and less people being diverted into our jails and prisons.
- **LAS helps client get her advance directive restored**
A 56-year-old LAS client in Winnebago County had executed a Power of Attorney for Health Care some years earlier, naming her mother as her agent. The client was hospitalized with symptoms of a mental illness that had recurred, and LAS was appointed to represent the client in proceedings for involuntary admission.

Meanwhile, the mother (and agent under the Power of Attorney) had hired an attorney to seek guardianship of her daughter. The mother told LAS she was "scared," as it had been difficult to get hospitals to acknowledge her daughter's Power of Attorney in the past. The mother said her daughter had been "overmedicated" during a past hospitalization in a different county and had had seizures as a result. The mother thought that, as legal guardian, the current hospital's treatment providers would recognize her standing and would seek her input and knowledge about medications for her daughter.

The mother's attorney filed a guardianship petition although aware of the valid Power of Attorney for Health Care. The attorney sought, and obtained, an order for temporary guardianship of the person. The attorney also sought, and obtained an order suspending the Power of Attorney for Health Care.

LAS was able to work with both the mother and the hospital treatment team to make sure correct dosage information was shared, and LAS's client was able to avoid too high a dosage of medication during her admission. Upon learning of the Power of Attorney for Health Care, the LAS attorney met with the mother's guardianship attorney and with the guardian ad litem appointed by the probate court, explaining that an advance directive like a Power of Attorney for Health Care can obviate a need for guardianship. This is because the person who executes the document (the principal) puts an agent in her shoes to be able to make treatment decisions to the same extent the principal could. The LAS attorney provided statutes and case law to the guardianship attorney and guardian ad litem. Subsequently, the guardianship attorney and guardian ad litem presented an order to the probate court withdrawing the guardianship petition, vacating the temporary guardianship order, and reinstating LAS's client's Power of Attorney for Health Care.

The agent – LAS's client's mother – also learned what to do in the event a hospital ignores a valid Power of Attorney for Health Care. She now knows there is a legal organization – LAS – charged with protecting the rights of persons like her daughter.

- Ms. R. is a retired medical researcher who was brought to a hospital after allegedly damaging neighbors' property, resulting in criminal charges. As this was Ms. R.'s second hospitalization in a short span of time and given the concerns about her actions in the community, her doctor was hesitant to discharge Ms. R. to her home. Another factor for the doctor was that Ms. R. didn't take her prescribed medication at home after her previous discharge. The doctor was also admittedly worried about her own liability in the event that Ms. R. might harm someone or herself after discharge. Thus, the doctor recommended placing Ms. R. in a nursing home. But being forced into a nursing home would have been devastating to Ms. R., who owns her small and meticulously maintained home, where she has lived for decades. Plus, we learned the reason Ms. R. did not take the medication at home was because the doctor prescribed a medication that was not fully covered by Ms. R.'s insurance, and Ms. R. couldn't afford the copayment of about \$500 a month. LAS suggested an agreed court order, under which Ms. R. would live at home and agree to take an affordable and effective medication and to participate in outpatient treatment, while avoiding nursing home placement as well as rehospitization. Ms. R. and the doctor agreed to this plan, and the agreed order has been working out well. Ms. R. calls LAS regularly to say she is doing well and keeping her appointments.

Legal Advocacy Service

- LAS was appointed to represent “Linda”, who is in her late fifties. Linda was diagnosed with bipolar disorder. Prior to the onset of Linda’s illness 5 years ago, she had worked as a housekeeper for a hotel.

Although Linda had signed herself into a hospital for treatment, she was presently declining psychotropic medication. The treating psychiatrist opined that Linda presently lacked the capacity to make a reasoned decision about psychotropic medication and consequently filed a petition for involuntary treatment. After LAS attorney was assigned to represent Linda, there was a discussion and LAS discovered Linda had been previously represented by a different LAS attorney about two years prior.

A look through past records of client revealed that client’s mental health symptoms two years ago may have been at least partly as a result of a medical condition and that she had suffered extrapyramidal symptoms from medications that she received at that time. Furthermore, two to three years prior to LAS’s previous representation of Linda, that she suffered neuroleptic malignant syndrome from one the medications requested in the current involuntary treatment petition. After receiving the medication, Linda had to be rushed to an emergency room to receive treatment. Neuroleptic malignant syndrome is a life-threatening reaction that can occur in response to antipsychotic or neuroleptic medication. Linda’s current psychiatrist was not aware of her past medical and psychiatric history since he was not able to obtain consent from her for releases of medical records. However, Linda consented for attorney to discuss her past psychiatric and medical history with her current treating psychiatrist.

The LAS Attorneys communicated with the treating psychiatrist and state’s attorney about Linda’s past medical history and reactions to psychotropic medications on an ongoing basis. The psychiatrist obtained a second medical opinion regarding her past medical condition that may have contributed to mental health symptoms and was able to rule it out. He also removed the medication from the petition that caused Linda to suffer neuroleptic malignant syndrome. Finally, the psychiatrist recommended a lower dosage of medication as a result of Linda’s past extrapyramidal symptoms.

After a full hearing, the court ordered that Linda receive psychotropic medication. Linda received the proper medication and dosage, and within two weeks was discharged and presently lives with her daughter.

APPELLATE COURT DECISION

In re Wilma T., 2018 IL App (3d) 170155

Within a week of Wilma T.'s voluntary hospitalization for Mental Health she started complaining she wanted to leave the hospital, but she refused to sign a request for discharge. Hospital staff completed a request for discharge on Wilma T.'s behalf. Thereafter, the hospital petitioned for Wilma T.'s involuntary commitment and treatment. Both petitions were heard and granted. On appeal, the Third District held the order granting the 90-day involuntary commitment was improper because Wilma T. was a voluntary patient and did not provide her intent to be discharged in writing. Although this issue was not raised at the hearing it was reviewed under a civil doctrine analogous to plain error in criminal proceedings. The commitment order was voidable for noncompliance with section 3-403 of the Code. 405 ILCS 5/3-403 (West 2016), because noncompliance with the statutory prescribed involuntary commitment procedures renders the judgment entered erroneous and of no effect. The Third District likewise overturned the treatment petition because Wilma T. did not receive written information regarding alternatives to the proposed treatment as required by section 2-102 (a-5) of the Code, 405 ILCS 5/2-102(a-5). (West 2016).

OFFICE OF STATE GUARDIAN (OSG)

The Office of State Guardian is the largest public guardianship agency of its kind in the United States with cases located in 94 out of 102 Illinois counties. The purpose of adult guardianship is to provide substitute decision making for medical treatment, medication, residential placement, money management and direct care planning. Appointed by the court, OSG is responsible for the affairs of nearly 5,200 wards and serves approximately 8,000 clients annually who have a wide range of disabilities including chronic mental illness, developmental disabilities, age-related disabilities or profound illness. In addition, OSG manages over \$3 million of its ward's assets, ensuring appropriated expenditures and investments of their funds. Many wards live in community settings for persons with mental illness or developmental disabilities, others live in nursing homes or State operated institutions throughout the State. The expertise of OSG allows it to monitor and advocate for residential, appropriate medical and rehabilitative services unique to each disability and each client.

5 Attorneys

4 Intake Representatives

5 Guardianship Representatives for Estate cases

36 Guardianship Representatives for Person cases

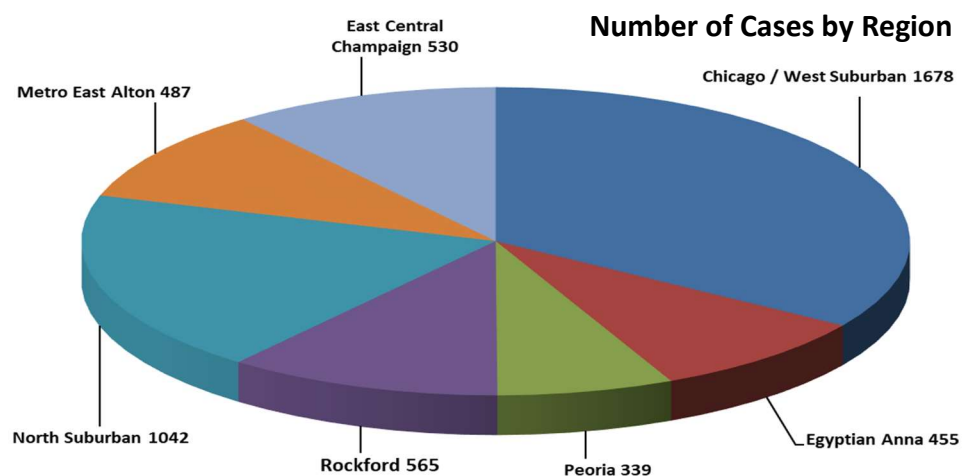
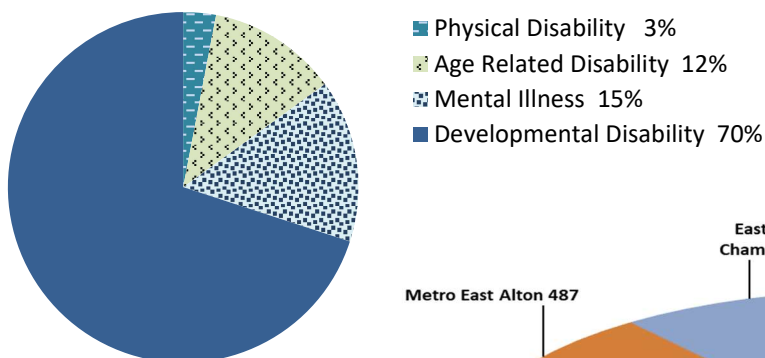
♦ **Total number of wards served, 5,725**

(Includes those who are listed as deceased in FY18)

♦ **Average caseload 134; 1.245 intakes**

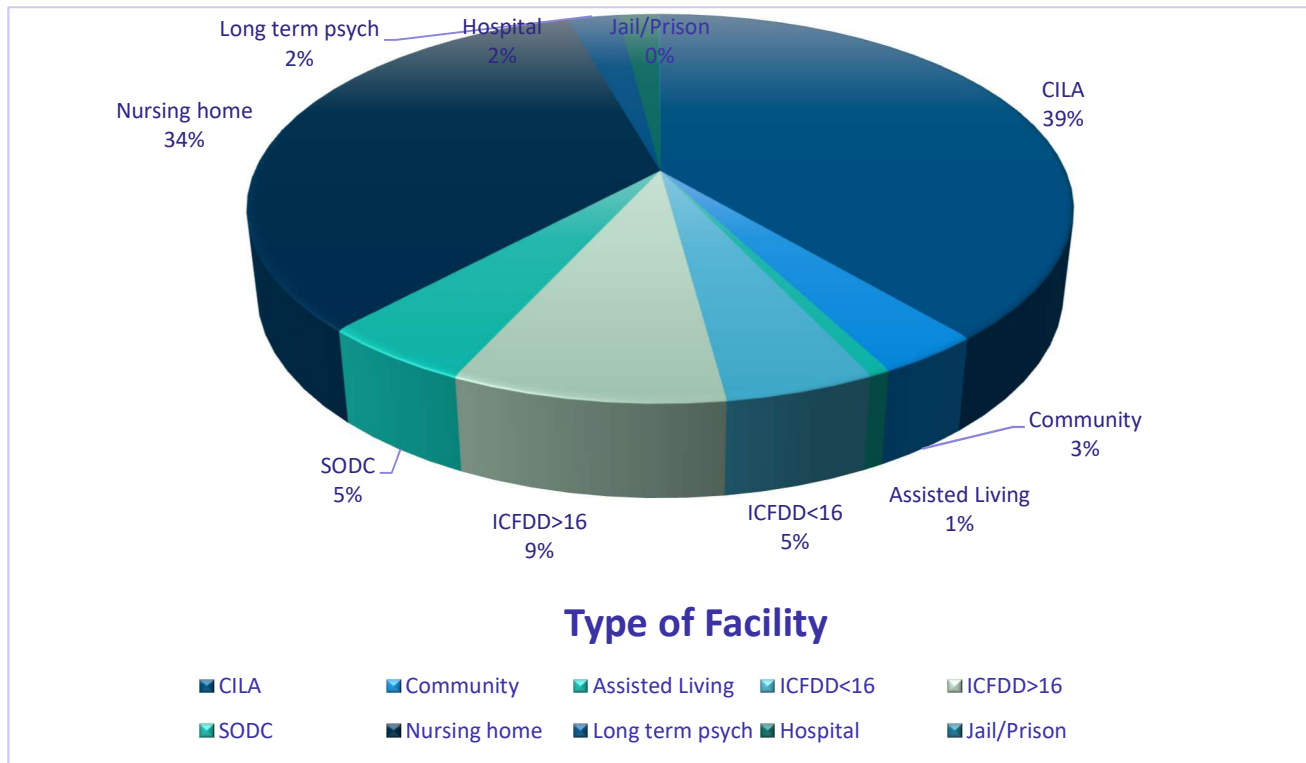
♦ **14,116 medical and other consent activities**

Ward Profiles



OFFICE OF STATE GUARDIAN (OSG)

Cases by Type of Facility



<u>Type of Facility</u>	<u>Number of Wards</u>	<u>Comparison to February 2018</u>
CILA:	1995	+32
Community	178	-25
Assisted/Supportive Living	36	+11
ICFDD<16	254	-9
ICFDD>16	463	-41
SODC	253	+4*
Nursing Home (inc. ICF)	1731	+73
Hospitalized (inc. Psych.)	96	+19
Long term psychiatric (IMDs)	124	+22
Jails/DOC	6	No change
Total wards	5144	+40

(*there were 27 SODC discharges and 31 SODC admissions with one being a re-admission)

2018 FISCAL SUMMARY

FUND	Enacted Appropriations	Appropriations After Transfers	Expenditures	Lapse
GRF Fund	\$ 9,041,000	\$ 9,041,000	\$8,522,466	\$ 518,534
GAC Fund	\$ 2,177,400	\$ 2,177,400	\$ 1,264,081	\$ 913,319
TOTAL	\$ 11,218,400	\$ 11,218,400	\$ 9,786,547	\$ 1,431,853

Lapsed funds were largely due to the delay in IT Infrastructure project to upgrade agency's Case Management System. This project has been delayed until Fiscal Year 2019.

Additional lapse due to lower headcount as retirement outpaced hiring.

Details of the expenditures by category are as follows:

Category of Expenditure	GRF	GAC Fund
Payroll	\$8,522,466	\$332,878
Contractual		\$543,255
Travel		\$98,923
Printing		\$8,636
Commodities		\$8,356
Equipment		\$44,246
EDP		\$17,159
Telecom		\$205,163
Auto		\$5,465
Total Expenditure by Fund	\$8,522,466	\$1,264,081

BUDGETING FOR RESULTS

Illinois Guardianship and Advocacy Commission					
Performance Measures Reporting					
FY18					
CRO: Gia T. Orr					
General Cross-Divisional Projects (Increase ind. & family stability + self-suff)	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Totals:
Number of programmatic or overarching internal trainings offered	45	28	37	43	153
Ward eligibility for "Restoration of Rights"	25	24	26	24	25
Predictive analytics of persons needing services from IGAC	24,000	24,000	24,000	24,000	24,000
Outreach activities and publications	114	94	127	111	446
Human Rights Authority (Meet the needs of the most vulnerable)	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Totals:
Percent of HRA recommendations accepted by service providers and investigated	Annual	Annual	Annual	Annual	85%
Number of persons with disabilities that benefit from HRA recommendations	1142	2144	7655	2713	13654
Number of volunteer hours contributed to HRA	216	457	730	118	1521
Number of investigation reports of findings per region	16	19	11	13	59
Increase the combined number of internal referrals cross-divisionally (LAS to HRA and OSG to HRA)	6	2	5	12	25
Legal Advocacy Services (Increase ind. & family stability + self-sufficiency)	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Totals:
Training for Special Education	0	0	0	0	0
Number of appeals based on merit	4	7	8	7	26
Number of advanced directives interactions	26	58	53	96	233
Office of State Guardian (Meet the needs of the most vulnerable)	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Averages:
Percentage of wards in community-based placements	43	49	48	48	47%
Percentage of guardianship referrals where an alternative to state appt. was found	46 * 42.5		50	10	37%
Acceptance rate	54 * 57.5		50	90	63%

STRATEGIC PARTNERSHIPS

-  18th Ward Senior Fair
-  Alderman Derrick Thomas
-  Alzheimer Disease Committee
-  Arab American Network of Resources
-  ARC of Illinois
-  ASCD formerly Association for Supervision, Curriculum and Development
-  Blue Island Police Department
-  Bradley University
-  CARPLS
-  Central Illinois Transition Planning Committee
-  Chicago Public Schools
-  City of Blue Island
-  Congressman Dan Lipinski
-  Cook County Commission on Human Rights
-  Cook County Justice and Mental Health Commission
-  Cook County Office of the President Policy Roadmap Committee
-  Cook County Public Guardians Office
-  Cook County Sheriff's Office
-  Cook County Veterans Administration
-  Criminal Justice Discussion Groups
-  DD Provider Network Meetings
-  Disability Expo in Champaign
-  Family Matters Parent Information and Training Center
-  Foster Progress
-  Glenwood School
-  Governors State University – Office of Development
-  Governors State University – College of Arts and Sciences
-  Greater Peoria Works
-  Harvey Park District
-  Harvey Senior Center
-  Illinois Attorney General
-  Illinois Campaign for Political Reform
-  Illinois Center for Civics Education
-  Illinois Department of Human Services
-  Illinois Department of Innovation and Technology (DoIT)
-  Illinois Department of Public Health
-  Illinois Guardianship Association
-  Illinois Imagines
-  Illinois State Board of Education
-  Illinois State Police
-  Illinois State University
-  Lake Forest College – Office of Development and Career Advancement
-  Local Interagency Council on Early Intervention
-  Mental Health Provider Network Meetings

STRATEGIC PARTNERSHIPS

-  Molina Health Care
-  National Louis University
-  Office of the Cook County Public Safety Officer
-  Orland Park Police Department
-  Park Forest Police Department
-  Peoria High School
-  Perspectives Charter Schools
-  Primo Center for Women and Children
-  Rapid Results
-  Representative Emmanuel Welch – District Office
-  Representative Fran Hurley
-  Residences for Patriots
-  Robbins Job and Resource Fair
-  Senator Bill Cunningham
-  St. Coletta Resource Fair
-  St. Louis Area Metropolitan Planning Council
-  Statewide Referral Network
-  Tazewell County Program for Inclusive Employment
-  The Department of Human Services, Recovery Specialists
-  The Illinois Department of Corrections Summit of Hope
-  Travis Mentoring Foundation
-  United States Department of Education- Office of Safe and Healthy Students
-  University of Chicago- School of Social Services and David Axelrod Policy Department
-  University of Illinois- Chicago
-  University of Illinois- Springfield
-  University of Illinois- Urbana Department of Special Education
-  Veterans Administration
-  Volunteer Advocacy Project
-  Westside Institute for Veterans

COMMISSIONERS

Anthony E. Rothert, Chairman

Legal Director, ACLU of Eastern Missouri

Honorable Andrea M. Schleifer, Vice Chairman

Judge, Circuit Court of Cook County

Rev. Barbara Berry-Bailey

Program Director, Companionship for Africa
Evangelical Lutheran Church in America

Representative William Q. Davis

Democrat, 30th District

Inez Torres Davis

Director for Justice

Women of the Evangelical Lutheran Churches of America

Senator Don Harmon

Democrat, 39th District

Dr. Sharon Jenkins-Collins

Doctor of Chiropractic and Naprapathy

Representative Michael McAuliffe

Republican, 20th District

Brian N. Rubin

Rubin Law, A Professional Corporation

Senator Ira Silverstein

Democrat, 8th District

EXECUTIVE LEADERSHIP

Dr. Mary L Milano, Executive Director

Mary L. Milano has served as Executive Director of GAC since October of 2005. Immediately prior, and in her initial State service, she spent two years as Associate Director and Chief of Staff of the Illinois Criminal Justice Information Authority, with responsibility for federal programs and grants. With a lifelong commitment to social justice, her professional background has intentionally crossed traditional professional barriers and includes appointments to the Executive Staff in World Hunger of the Evangelical Lutheran Church in America, as Full Professor of Christian Social Ethics in the graduate program in pastoral ministry at Saint Mary of the Woods College, and the private practice of law in the international firm of Baker & McKenzie. She holds degrees in both law and theology through the post-doctoral level, at institutions including Mundelein College of Loyola University, Northern Illinois University College of Law, McCormick Theological Seminary, Graduate Theological Foundation and the University of Leicester. She has held fellowships in law and international human rights at Northwestern University, Universite Libre de Bruxelles, and the Institute for Higher Studies in International Criminal Justice in Siracusa, Sicily. She has been active in substantive work in the Chicago, Illinois and American Bar Associations, as well as service in the Italian American community. She is also an ordained priest of the Episcopal Diocese of Chicago.

Teresa Parks, Director, Human Rights Authority

Ms. Parks is the statewide Director of the Human Rights Authority. She holds a Master's Degree in Social Work from the University of Illinois in Champaign/Urbana and is a National Certified Guardian through the Center for Guardianship Certification. Parks has been with the Commission for twenty-eight years starting as a Guardianship Representative and then a Regional Human Rights Authority Coordinator before becoming the Human Rights Authority Director. Parks has prior work experience as a Nursing Home Ombudsman, as a Case Coordinator for the Department on Aging's Community Care Program and as a Program Director for the Mental Health Association of Illinois Valley. She has served on various disability related boards, including the Heart of Illinois Down Syndrome Association, the Peoria chapter of the Alzheimer's Disease Association, a Parent Advisory Committee for the Peoria Local Interagency Council for Early Intervention, the Illinois Guardianship Association, Family Matters Parent Training and Information Center, Illinois Imagines Public Policy Committee and the Commission Representative for the Alzheimer's Advisory Committee.

Veronique Baker, Director, Legal Advocacy Service

Ms. Baker has been with the Commission for twelve years and served on the Board of the National Guardianship Association for three years. Prior to her employment with the Commission, she was employed by the Chicago Legal Clinic as a staff attorney and then a Supervisory Attorney. Baker's legal practice was concentrated in the areas of family law, probate law and bankruptcy. She holds a Doctor of Jurisprudence from Vanderbilt Law School, Nashville, TN and a Bachelor of Science from Tennessee State University, Nashville, TN. She is the mother of a teenage son.

Barry Lowy, Director, Office of State Guardian

Barry G. Lowy assumed a position with the Illinois Guardianship and Advocacy Commission as Director of its Office of State Guardian Barry G. Lowy beginning January 2017. Prior to this position, he had been with Equip for Equality from February 1999, initially as a senior attorney, then a project manager and supervising attorney. He has litigated individual disability discrimination cases arising under the ADA ranging from individual employment discrimination matters to class action litigation on behalf of adults seeking developmental disability services in community settings and was part of the Ligas class counsel team. He has litigated multiple adult guardianship cases on behalf of individuals with developmental and psychiatric disabilities including the appellate decision of Guardianship of Muellner v. Blessing Hospital, which prevents guardians from compelling wards with mental illnesses into nursing homes against their wishes. He has also litigated adult DD Medicaid waiver claims at the administrative and appellate level. Barry served as an adjunct professor at SIU School of Medicine, Department of Psychiatry from 2002-2012, is a member of the Illinois State Bar Association's Disability Law Committee and participates in training law enforcement Crisis Intervention Teams in central Illinois.

EXECUTIVE LEADERSHIP

Gia T. Orr, Director, Community Rights, Relationships and Resources

Ms. Orr holds a Bachelor of Science in Political Science/Criminal Justice, a Master of Science in Human Services Administration and a Master of Education in Leadership/Organizational Structure. Gia began her tenure as the Director of Community Rights, Relations and Resources in July 2013. Her responsibilities are centered on agency public awareness, programmatic support to communities/service entities, and advocacy in areas underserved/underrepresented. Additionally, she is the coordinator of statewide human rights panel members who focuses on research, collaboration, advisement, education and resolutions in the areas of safeguarding the rights of persons with disabilities in both traditional and non-traditional settings. Her advocacy, policy and organizational structure roots date back to career ventures in other state and state supported systems as well as fifteen-year tenure in education. She is currently a legislative advocacy appointee for ASCD based in Arlington, VA, a Commissioner for Cook County Commission on Human Rights and an advisory board member for Illinois Center for Civics Education.

Gloria Lasley, Chief Fiscal Officer and Chief Information Officer

Ms. Lasley has a Bachelor of Science in Business Administration from Loyola University of Chicago; an MBA from Keller Graduate School of Management, and certification from DePaul University's Computer Career Program. She joined GAC's executive team in 2011. Her prior experiences include 10 years as the Director of Finance and HR for L-Technology Enterprises, an IT Consulting Firm; 3 years with Oracle Corp where she worked as a Technical Sales Consultant helping clients find the right technical solutions for their business needs; and 5 years with Heller Financial, (now part of GE Credit) where she started as a mainframe programmer, and moved up to a Business Analyst and then a Database Administrator. Ms. Lasley lives in Chicago with her husband and three children.

Bobbie Fox, Director of Human Resources

Ms. Fox is the Director of Human Resources for Guardianship & Advocacy Commission. She has over thirty years of dedicated state service in Human Resources. Prior to coming to Guardianship & Advocacy Commission, she was the Associate Director of Human Resources for the Criminal Justice Information Authority. Her extensive experience includes the areas of workers compensation, labor relations, interview & selection, FMLA, classifications and CMS personnel rules and regulations.

Constance Umbles-Sailers, Confidential Assistant to the Director and Director of Labor Relations

Ms. Umbles-Sailers, brings to the agency many years of supervisory and leadership experience, which includes program design, implementation, management and analysis; organizational strategic planning; grant writing, budget management; and recruitment. Prior to working for the State, Ms. Umbles-Sailers accumulated more than twenty years of experience in higher education. The bulk of her professional career was serving as the Assistant Dean of the Urban Health Program at the University of Illinois, College of Medicine. After leaving the College of Medicine, Constance spent several years at UIC as a Research Analyst in the Chancellor for Human Resources office, monitoring, analyzing and reporting to the Chancellor and auditors, the hiring practices of the University's numerous colleges. Constance holds a Bachelor of Science degree in Biology and a Master of Science in Biology Pre-Medical Studies, both from Chicago State University.

EXECUTIVE LEADERSHIP

Kenya Jenkins-Wright, General Counsel

Ms. Jenkins-Wright is the General Counsel for the Illinois Guardianship and Advocacy Commission. She received her Juris Doctor, magna cum laude, from Northern Illinois University College of Law, DeKalb, IL and her Bachelor of Arts, magna cum laude, from Valparaiso University, Valparaiso, IN. Ms. Jenkins-Wright joined the Commission February 2015. Prior to her employment with the Commission, Ms. Jenkins-Wright was a civil litigation attorney at the law firm of Greene and Letts. Ms. Jenkins-Wright is active in the legal community. She is Ex-Officio of the Black Women Lawyers' Association of Greater Chicago, Inc. She is a Board Member of the Chicago Bar Foundation, the Illinois State Bar Association (ISBA) Assembly and a past member of the ISBA Board of Governors.

Michelle Braker, Private Secretary to the Executive Director (Springfield)

Ms. Braker has worked for the Commission for three years. Her prior work experience was in the Illinois House of Representatives from 1985 to 2015, with eleven of those years serving as Executive Assistant to the House Republican Leader.

Florence Martin, Private Secretary to the Executive Director (Chicago)

Since 2008, Ms. Martin has provided administrative support to IGAC's Executive Director and Executive staff. She came to the Agency after a lengthy tenure as Executive Director of the Chicago Multi-Cultural Dance Center, a not-for-profit arts organization in Chicago's South Loop. She has extensive experience in the areas of customer relations and communication having worked with a client base of students ages three through adult, parents, and coordinating schedules for the Artistic Director, Board of Directors, faculty and staff. She holds a Bachelor of Arts from Mundelein College, now of Loyola University.

ORGANIZATIONAL STRUCTURE

