

**IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF ILLINOIS**

JILLIAN ROBINSON, individually and as next)
friend and parent of J.R., a minor,)
)
Plaintiff,)

) Case No. 1:22-cv-2058

v.)

ADVOCATE HEALTH AND HOSPITALS)
CORPORATION d/b/a Advocate Christ Medical)
Center, ADVOCATE CHILDREN’S MEDICAL)
GROUP, DR. BILL SCHROEDER, and DR.)
EMILY SIFFERMANN,)
)
Defendants.)

) JURY TRIAL DEMANDED

COMPLAINT

Plaintiff, Jillian Robinson, individually and as next friend and parent of J.R.,¹ by and through her undersigned attorneys, complains against Defendants, Advocate Health and Hospitals Corporation, Advocate Children’s Medical Group, Dr. Bill Schroeder, and Dr. Emily Siffermann, and states:

INTRODUCTION

1. In late April 2021, Jillian Robinson, a Black woman, sought medical care for her infant son J.R. after noticing a mark on his outer ear. What began as a routine visit for medical care at Advocate Christ Medical Center in Oak Lawn, Illinois (“ACMC”) — and should have likewise ended as a routine visit — instead turned into a more than 24-hour traumatic ordeal in which J.R. was subjected to numerous medically unnecessary tests, and Ms. Robinson was forced to desperately fight to prevent hospital staff, working in conjunction with the Illinois Department of Children and Family Services (“DCFS”), from removing J.R. from her custody and care.

¹ Pursuant to Fed. R. Civ. P. 5.2(a)(3), the minor child’s initials are used to protect privacy.

2. The mark on J.R.'s ear turned out to be a hemangioma, in other words, a harmless birthmark, and an unbiased differential diagnosis would have reached that conclusion. Instead, ACMC and its staff made false assumptions about Ms. Robinson based on her race. Based solely on those assumptions and **before** conducting a medical examination to confirm, ACMC and its staff jumped to the conclusion that the mark was an intentionally inflicted injury by Ms. Robinson and initiated complaint proceedings against her with DCFS.

3. ACMC's differential treatment of Ms. Robinson, referral to DCFS based on her race, and assumptions about her socioeconomic status mirror both national and local trends of disproportionately subjecting Black parents and children to child welfare investigations. In the Chicagoland area, half of all Black children are subjected to a child welfare investigation before the age of 18, and studies nationally have documented that hospitals and health care systems have been far more likely to make abuse referrals to child welfare agencies for children from racial and ethnic minority groups.

4. ACMC's abuse referral set in motion a series of traumatic events for both J.R. and Ms. Robinson, including medically unnecessary hospital admission and invasive tests performed on J.R., for the sole purpose of attempting to justify its racially biased abuse allegation. Ms. Robinson and her son were also forced to move out of their home and live under supervision pending a DCFS investigation that rightfully concluded that the ACMC child abuse report was unfounded.

5. Ms. Robinson brings this lawsuit to recover damages and seek redress under federal civil rights laws and Illinois tort law for the racially motivated actions of ACMC and its staff that resulted in the false accusation of child abuse, the threat of the removal of her son from her care

and custody, the medically unnecessary tests performed upon J.R., and the traumatic investigation and events set in motion by ACMC's actions.

PARTIES

6. Plaintiff Jillian Robinson and her infant son J.R. are Illinois citizens and residents.

7. Defendant Advocate Health and Hospitals Corporation is an Illinois Not-for-Profit Corporation with its principal place of business located in Downers Grove, DuPage County, Illinois. Advocate Health and Hospitals Corporation uses numerous assumed names to own and operate hospitals and other medical facilities, including doing business as Advocate Christ Medical Center located in Oak Lawn, Cook County, Illinois ("ACMC").

8. Defendant Advocate Children's Medical Group is a subsidiary and/or assumed name of Advocate Health and Hospitals Corporation, an Illinois Not-for-Profit Corporation, located in Oak Lawn, Cook County, Illinois. Advocate Children's Medical Group, together with Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center, are collectively referred to as "ACMC."

9. Defendant Bill Schroeder is a doctor employed by ACMC and, upon information and belief, is a citizen and resident of Illinois.

10. Defendant Emily Siffermann is a doctor employed by ACMC and, upon information and belief, is a citizen and resident of Illinois.²

JURISDICTION AND VENUE

11. This Court has jurisdiction over Plaintiff's federal claims under 28 U.S.C. §§ 1331 and 1343. The Court has supplemental jurisdiction over Plaintiff's state law claims under 28 U.S.C. § 1367.

² Defendants Schroeder and Sifferman are collectively referred to as "Individual ACMC Staff Members."

12. Venue in this district is proper pursuant to 28 U.S.C. § 1391 because the underlying events giving rise to Plaintiff's claims occurred within the boundaries of the United States District Court for the Northern District of Illinois and, on information and belief, all of the parties reside within these boundaries.

STATEMENT OF FACTS

1. The Racially Motivated DCFS Report.

13. On the evening of April 25, 2021, Ms. Robinson noticed a mark on the back of her then 10-month-old son J.R.'s outer ear.

14. She called a nurse hotline at Lawndale Christian Health Center ("LCHC"), where J.R. received his regular pediatric care. LCHC advised her to take J.R. to a clinic for an examination.

15. Because of the late hour and concern for her son's immediate well-being, she traveled to the nearest hospital with an emergency department, OSF Little Company of Mary Medical Center ("OSF LCM").

16. After waiting several hours to be seen, a healthcare provider examined J.R.'s ear and advised Ms. Robinson that he looked fine and to "leave it alone." Ms. Robinson and J.R. returned home. Ms. Robinson continued to observe J.R.'s ear.

17. By midweek, Ms. Robinson observed that the mark was not improving and the area around it appeared more irritated. As such, she again called LCHC and scheduled a telehealth appointment for April 28, 2021.

18. On April 28, 2021, an LCHC medical provider instructed Ms. Robinson to text her photos of the area and indicated she would consult with a physician prior to advising. The medical provider then called Ms. Robinson and directed her to take J.R. to either Lurie Children's Hospital or Comer Children's Hospital.

19. Ms. Robinson asked if she could instead take him to ACMC, which was closer to her home and which also had a children's hospital. The provider advised this would be fine.

20. Upon arriving at ACMC around 6:00 p.m. on the evening of April 28, 2021, Ms. Robinson and J.R. were placed in an exam room.

21. Two medical providers — Defendant Schroeder and Dr. Agnieszka Radziszewska, a medical resident — entered and asked Ms. Robinson how J.R. got the mark. Ms. Robinson responded that she did not know, recounted having noticed it the previous Sunday, and stated what she had done to follow up.

22. Schroeder and Radziszewska, without determining the nature of the mark, then performed a full physical exam on J.R. to look for “any other wounds.”

23. Schroeder and Radziszewska did not find anything atypical on J.R.'s body aside from the ear mark.

24. Without any further examination or inquiry, Schroeder and Radziszewska memorialized in the medical record a conclusion that the mark appeared to be a “hematoma,” or bruise, stating it was “suspicious for a pinching of the ear, nonaccidental trauma.”

25. At the time these ACMC staff members memorialized their belief that the mark was a hematoma, no ACMC staff had recorded or had any evidence that J.R. had, in fact, suffered any injury, inflicted or accidental, nor did any ACMC staff, including, but not limited to, Schroeder and Radziszewska, commence or complete an investigation to determine whether the mark was a hematoma or, as it later was determined to be, an harmless birthmark.

26. Despite having failed to commence or conduct any medical examination to confirm the nature of the mark on J.R.'s ear, ACMC staff soon thereafter reported to DCFS a suspected case of child abuse by Ms. Robinson.

27. After deciding to involve DCFS and the hospital's child protection team, ACMC staff, including, but not limited to, Schroeder, further examined the mark to determine if it was, in fact, a "hematoma," or bruise. To do so, ACMC staff sliced into, attempted to drain the mark, and ordered an "occult injury work up," which included bloodwork, a head CT, and a full body bone scan. They also alerted a pediatrician Defendant Emily Siffermann, who purports to have a child abuse board certification, and who agreed with the plan, and a pediatric otolaryngologist (*i.e.*, an ENT) ("ENT"), who would examine J.R. the following day.

28. Upon injecting, slicing into, and attempting to drain the mark on J.R.'s outer ear, the medical records establish that ACMC staff, including the Individual ACMC Staff Members, found no drainage, which "would have been expected with a hematoma."

29. Despite evidence the "hematoma" was not a bruise after all — but already having made a call to DCFS based on the purported existence of the "hematoma" and cutting into J.R. — Schroeder advised Ms. Robinson that they needed a complete lab work and other tests from J.R., to which Ms. Robinson consented, believing she needed to do so for her son's well-being. J.R. was then forcibly restrained for staff to be able to complete a COVID-19 test and more than one blood draw, causing pain and distress with each procedure performed.

30. J.R.'s medical records establish that there was no medical necessity to perform the lab work or other tests - a head CT and bone scan.

31. The absence of any medical rationale leaves one reason for this battery of tests. ACMC staff was attempting to generate *post hoc* justification for their unsupported assumption that Ms. Robinson had intentionally harmed J.R.

32. If Schroeder had told Ms. Robinson the true reason why he and other ACMC staff wanted to conduct these procedures on J.R. — to investigate and/or generate *post hoc* evidence to

support their presumption of child abuse after making a DCFS report — she would have refused consent.

33. Schroeder then advised Ms. Robinson that the lack of drainage may indicate that the mark was some form of cyst and not an injury at all, but that since DCFS had already been called, she would have to speak with those individuals and the additional tests — the head CT and bone scan — would be performed.

34. J.R. was then admitted to the hospital for no medically necessary reason, but rather to hold and examine him, or as the records indicated, “admit to hospitalal [*sic*] for DCFS workup,” and to continue to question Ms. Robinson in a fruitless attempt to support ACMC’s baseless assumptions of intentional harm and to justify the inquiry by DCFS initiated as a result of its referral.

35. The actions by ACMC and its medical staff following its report of suspected abuse to DCFS, including the examinations and hospital admission that followed, were investigatory in nature and performed as state agency functions of DCFS and/or by the ACMC medical staff acting as agents of DCFS.

36. At this time, Ms. Robinson still did not realize that ACMC staff was attempting to justify their DCFS report and assumption of child abuse with these *post hoc*, medically unnecessary procedures. Yet, Ms. Robinson expressed her concern and confusion about how the medical visit was evolving to the ACMC staff member who was working with the family on the hospital admission. This provider told Ms. Robinson that she was “not surprised.”

37. The ACMC staff member went on to say that she had worked at ACMC for several years and “seen their racist practices before,” adding that, “[a] white parent come[s] in here with a

child with a bruise, they give them the tests, and send them home. But a Black family? Whew, girl....”

38. Additionally, throughout the hospital stay, Ms. Robinson was subjected to invasive, race-based comments from a number of staff who repeatedly commented on J.R.’s curly hair and how “fair-skinned” he was and asked questions about his father, including, but not limited to, such questions from the healthcare worker accompanying Ms. Robinson during J.R.’s bone scan.

39. Ms. Robinson, who is darker skinned than her son, experienced these comments as not only racist and offensive but also as micro-aggressive challenges to her parentage of her child.

40. As each test was performed that evening and through the next day — the head CT at approximately 9 p.m., lab work at approximately 10 p.m., a bone scan the next morning at approximately 10 a.m., and persistent vitals checks that interfered with J.R.’s ability to rest or sleep — each came back with no indication of illness, injury, or abnormality.

41. Nonetheless, ACMC staff persisted in questioning Ms. Robinson about her care of her child and their living environment and in involving DCFS.

42. On April 29, 2021, after all medical exam results came back negative for any signs of harm, Ms. Robinson was also interviewed extensively by hospital social work staff.

43. In responding to these interviews, and particularly ACMC staff’s repeated questioning about her residence, Ms. Robinson shared that she and her son have lived in Chicago with her family since August 2020.

44. Despite Ms. Robinson’s consistent information that she had lived in a stable family home since August 2020, ACMC staff memorialized in the medical record, without any evidence, that Ms. Robinson was “homeless.”

45. Ms. Robinson never stated or implied that she was “homeless.”

46. That ACMC staff recorded Ms. Robinson as “homeless” despite Ms. Robinson repeatedly stating otherwise provides further evidence of ACMC’s staff’s assumptions based on racial bias.

47. Also on April 29, 2021, the ENT examined J.R. in person, or attempted to, but found it difficult to examine the underlying mark because of the incision and attempted drainage by Schroeder that had been done in the ER the night before. the ENT instructed Ms. Robinson to return for a follow-up in a week.

48. By late morning on April 29, 2021, with all of the medical examinations completed, Ms. Robinson then began asking about the procedure for discharge. Despite all test evidence indicating her son was in perfect health and evidence that the mark on the ear was not a bruise, she was informed by ACMC staff that she would have to speak with DCFS and the hospital caseworkers.

49. When the DCFS caseworker initially spoke to Ms. Robinson on April 29, 2021, she indicated that she would need to speak with hospital staff before asking Ms. Robinson some follow-up questions. Ms. Robinson and her son were then made to continue waiting without any additional medical attention or clear indication as to why they could not be discharged.

50. The caseworker then returned and questioned Ms. Robinson extensively, using a variety of terms about whether Ms. Robinson had “permanent housing,” and made references to whether Ms. Robinson could “afford to feed her child.”

51. This latter contention seemingly arose from Ms. Robinson’s sharing that she had previously received Special Supplemental Nutrition Program for Women, Infants and Children benefits to assist with purchasing the specialized formula that was best for J.R.

52. This intrusive questioning occurred despite the fact that a panel of bloodwork taken the night before indicated J.R. was in good health and did not demonstrate any signs of poor nutrition.

53. In the early afternoon on April 29, 2021, the DCFS caseworker informed Ms. Robinson that a “safety plan” would have to be put in place for J.R.

54. DCFS implements a “safety plan” in instances where it is deemed potentially unsafe for a child to be placed with a certain adult.

55. The DCFS caseworker told Ms. Robinson to identify a family member who did not live with her and would be willing to submit to and pass a background check so J.R. could be placed with them. If she refused or was unable to find such an individual, DCFS would, forcibly if necessary, take J.R. from Ms. Robinson and place him in foster care.

56. Shocked, Ms. Robinson repeatedly asked for the doctors who had examined her son and found all the tests negative for any medical signs of injury to confirm that the mark was not, in fact, a bruise.

57. In addition, Ms. Robinson expressed her concern to the DCFS caseworker that she was being unfairly targeted due to her race, sharing the APMC staff’s micro-aggressive comments and what the admitting staff member had said about the treatment of Black families.

58. The DCFS caseworker did not respond to these comments, and Ms. Robinson again insisted on speaking with Schroeder, who had advised her the evening before that the area “did not act like a bruise” but rather might be a cyst.

59. Instead, Siffermann came to speak with her with a nurse from APMC’s child protection team. Siffermann said she was “also a doctor” and could review the other doctors’ notes.

60. In that conversation, Siffermann also attempted to convince Ms. Robinson to allow J.R. to enter into foster care, stating “[i]t would only be for three days.”

61. Ms. Robinson emphatically declined and again insisted on seeing Schroeder or the ENT, at which point Siffermann and the ACMC child protection nurse said they would review the chart and left the room.

62. While Ms. Robinson faced the possibility that her infant son would be taken from her and placed in foster care for absolutely no legitimate reason, Siffermann and the ACMC child protection nurse laughed outside her door, presumably about the conversation they had just had with Ms. Robinson.

63. Ms. Robinson redoubled her efforts to find another doctor who had examined her son that would clear things up with DCFS.

64. The ENT returned, and Ms. Robinson had a conversation with him and Siffermann, along with other hospital staff.

65. Ms. Robinson beseeched the ENT to call DCFS and express that the mark had not behaved like a bruise or any other type of inflicted injury.

66. Siffermann interjected that it would not matter, and that Ms. Robinson should just let DCFS proceed with their protocol, including removing J.R. from Ms. Robinson’s care.

67. In response to Ms. Robinson’s strenuous requests, the ENT expressed support for Ms. Robinson, indicating he could not say what the mark was and adding that he was impressed with her parental care. He further stated he would place a phone call to DCFS sharing this position.

68. Around late afternoon on April 29, 2021, DCFS continued to insist upon a safety plan but modified it so that Ms. Robinson could remain with her son under the supervision of her uncle whom she had identified as available and willing to undergo the background check.

69. Ms. Robinson and her son were only allowed to leave the hospital around 6:00 p.m. that evening, approximately 24 hours after their arrival at ACMC, under the care of her uncle.

70. The DCFS caseworker admonished Ms. Robinson and the family members with whom she and J.R. were staying that she could not be alone with her son.

71. Ms. Robinson and her son stayed with her uncle and his family, whom her son had previously only met once and in a house her son had never visited, until the “safety plan” was terminated on May 6, 2021.

72. While on the “safety plan,” Ms. Robinson and her family members, including her mother, sister, and brother, were interviewed regarding her parenting.

73. Ms. Robinson’s mother was so distressed at the developments that on the date the safety plan was initiated, and Ms. Robinson was prohibited from returning to their home, her mother had a medical event that led her to be taken to the hospital in an ambulance. She continued to suffer from negative medical consequences associated with a pre-existing high blood pressure condition throughout this family ordeal.

74. Also in the course of the investigation, J.R.’s primary pediatrician provided a statement confirming her prior care of J.R. and indicating her support of Ms. Robinson’s parenting.

75. Tellingly, DCFS sought no additional medical evidence before it terminated the safety plan and permitted Ms. Robinson to return home with her child.

76. In connection with this invasive and unnecessary DCFS investigation, Ms. Robinson was also referred to the Chicago Police Department (“CPD”) for investigation for child abuse.

77. The CPD inquiry also yielded no evidence of intentional harm to J.R., and in fact, no evidence that J.R. had been harmed at all.

78. However, this result did not occur before Ms. Robinson was subjected to questioning by a CPD detective and further traumatized by the creation of a police record of the unsubstantiated and patently false allegation that she had harmed her son.

79. Subsequent to being released from the safety plan, Ms. Robinson brought her son to each of his scheduled follow-up medical appointments.

80. Multiple doctors, including the ENT who had seen J.R. at the hospital, quickly concluded that the mark behind his ear was never a bruise or injury of any kind but rather a hemangioma or venous malformation, each of which are congenital conditions — *i.e.*, a birthmark.

81. This again confirmed J.R. had never suffered any injury.

82. In the course of completing the required follow-ups, Ms. Robinson was required to bring her son to Siffermann, who Ms. Robinson had experienced as most aggressively pushing for the involvement of DCFS and removal of J.R. from her care, causing her further pain, anguish and trauma.

83. On July 19, 2021, DCFS closed the report of intentional harm to J.R. by ACMC staff as “unfounded.”

84. Nonetheless, even the form letter closing the unsubstantiated investigation inflicted additional harm and distress to Ms. Robinson by stating that the unfounded finding “does not necessarily mean that an incident did not occur. An incident may have occurred but the evidence did not rise to the level required to indicate for abuse or neglect as dictated by state law and DCFS Administrative Rule.”

85. The very language of the closing letter further emphasized the peril in which Ms. Robinson’s parental rights were placed throughout this process — a process based on little more than a prejudgment infused with racial bias and without any medical investigation.

86. Ms. Robinson never harmed her son and instead did what any attentive parent would have done in seeking medical care for a novel issue that her son presented.

87. Critically, that ACMC staff called the DCFS hotline before performing the basic diagnostic work necessary to provide even a modicum of evidentiary support for an abuse explanation was indicative of racial bias towards Ms. Robinson.

88. No person from ACMC contacted DCFS to correct ACMC's fundamental error and, instead, the entire DCFS investigation proceeded based on the faulty prejudgment that Ms. Robinson had intentionally bruised J.R., which, based on the admitting staff member's comments, is an ongoing racially discriminatory practice at ACMC.

89. Throughout this experience, and since its occurrence, Ms. Robinson, J.R., and their extended family suffered physical and emotional distress, mental anguish, and trauma.

90. Prior to the incident at ACMC, J.R. had an established sleeping pattern and rarely exhibited sleep disturbances. Beginning with the disrupted sleep of the overnight hospitalization, abrupt relocation to Ms. Robinson's uncle's home, and the subsequent relocation back to their home, J.R. began suffering from disrupted and inconsistent sleep. He became unable to fall asleep without Ms. Robinson, requiring them to co-sleep so they could rest. Since the hospitalization, J.R. has experienced frequent and intense nightmares, further disrupting his and Ms. Robinson's rest.

91. In addition to experiencing ongoing sleep disturbances, J.R. now demonstrates intense and negative reactions when entering medical facilities, including the offices he has been examined in for follow up care. This has added complexity to well-child healthcare and generates anguish and trauma for Ms. Robinson, who has to continue to bring him into these spaces that obviously cause him distress.

92. Ms. Robinson has experienced significant and persistent physical and mental health issues since this incident. She has had to seek mental health care at great emotional and financial cost and to deal with overwhelming anger and trauma that this experience caused and continues to cause. She has persistent fears of having her son taken away from her and experiences an elevated awareness of the biased perceptions around her that suggest racialized questions about her parentage of her son due to their differences in physical appearance. In addition, she has experienced significant and persistent physical health issues, most notably requiring ongoing healthcare and medication to address high blood pressure that has arisen as she attempts to process the fear, pain, and trauma generated from this experience.

2. Systemic Racial Bias in the Healthcare and Child Welfare Systems.

93. While Ms. Robinson's experience of the healthcare and child welfare systems was traumatic and unwarranted, it unfortunately reflects a much broader, pervasive pattern of systemic injustice perpetrated against Black families.

94. In addition to other traditional indices of intentional discrimination, racially discriminatory actions may also be driven by implicit biases — often defined as socially entrenched stereotypes and attitudes toward historically marginalized groups that affect the perception of individuals within those groups without conscious knowledge — which exist across systems and institutions, including healthcare, courts, and day-to-day life.³

95. Academic research demonstrates that healthcare professionals exhibit the same level of implicit racial bias as the wider population. Studies show that in some circumstances these biases are likely to influence diagnosis, treatment decisions, and levels of care.⁴ Further, studies

³ Perception Institute, *Implicit Bias*, <https://perception.org/research/implicit-bias/>.

⁴ See generally Chloe Fitzgerald et al., *Implicit bias in healthcare professionals: a systematic review*, BMC Medical Ethics (2107) 18:19, <https://bmcomedethics.biomedcentral.com/articles/10.1186/s12910-017-0179-8>.

have specifically found that healthcare providers' biases are likely to influence diagnosis and treatment decisions and levels of care.⁵

96. In instances where intentional harm of a child is alleged in a healthcare setting, the racial bias inherent in the healthcare system becomes amplified by longstanding, well-documented evidence demonstrating that Black families are disproportionately targeted for child welfare intervention.⁶ Indeed, **more than half** of all Black children in the United States are subjected to a child welfare investigation before their 18th birthday.⁷

97. In Illinois, these racial disproportionalities persist at every juncture within the state's vast child welfare system. Only 14.6% of the Illinois population is Black.⁸ But, between 2011 and 2017, Black children were, on average, the subject of more than one-third of the total number of DCFS investigations conducted state-wide.⁹

98. This means that DCFS investigated Black families at more than double the rate of their presence in the general population. White families, by contrast, were investigated at rates proportional to their representation in the general population, while Hispanic families were underrepresented.¹⁰

⁵ *Id.*

⁶ Tamara Fuller et al., *FY2018 Disproportionality and Disparity Report 13*, Univ. of Ill. Child & Fam. Res. Ctr. (Nov. 2018), http://cfr.illinois.edu/pubs/rp_201811116_FY2018DisproportionalityReport.pdf.

⁷ Hyunil Kim et al., *Lifetime Prevalence of Investigating Child Maltreatment Among US Children*, 107 Am. J. Pub. Health 274 (Feb. 1, 2017), <https://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2016.303545>

⁸ U.S. Census Bureau, Quick Facts: Illinois, <https://www.census.gov/quickfacts/fact/table/IL,US/PST045219>.

⁹ Fuller et al., *supra* n. 6.

¹⁰ *Id.*

99. Notably, a significant majority of DCFS investigations are “unfounded,” meaning that the allegation of abuse is not supported by the evidence.¹¹ This suggests that Black families are disproportionately experiencing invasive and traumatizing ordeals consistent with what Ms. Robinson endured, even though in the vast majority of cases, there ends up being no credible evidence to substantiate the allegations of abuse or neglect.

100. This gross disproportionality flourishes in Cook County, where Black children are removed from their families and placed in foster care at a rate of almost **three times** the rate of their presence in the general population.¹² The numbers are even more disturbing in the Northern Illinois region, where Black children are removed at a rate of **more than five times** their presence in the general population.¹³

101. The undeniable implication of these statistics suggests that Ms. Robinson’s experience is shockingly common and provides further evidence for the discrimination that she perceived first-hand throughout her and her son’s experience at ACMC.

CAUSES OF ACTION

COUNT I

Violation of Equal Protection under the Fourteenth Amendment under 42 U.S.C. §1983 Against Defendants Schroeder and Siffermann

102. Ms. Robinson restates and realleges paragraphs 1–101 as though fully set forth herein.

103. The Individual ACMC Staff Members discriminated against Ms. Robinson on the

¹¹ Six-Year Statistics on Child Protective Services 2-3, Ill. Dep’t of Child. & Fam. Servs. (Sept. 30, 2021), http://www2.illinois.gov/dcf/aboutus/newsandreports/Documents/ESS_Protective_Services.pdf ((between FY 2017 and FY 2021, upwards of 70% of all investigations into family-based reports of abuse or neglect were unfounded).

¹² Fuller et al, *supra* n. 6 at 14.

¹³ *Id.*

basis of her race in acting upon their unsubstantiated and erroneous assumptions that J.R. had been intentionally harmed, ordering invasive medical tests, an overnight admission to the hospital, and suggesting Ms. Robinson place her son in foster care, despite having numerous medical tests which conclusively determined that J.R. had suffered no injury.

104. In ordering medical tests and a hospital admission that were unnecessary for any medical purpose, but rather were investigatory in nature, and serving as the mouthpiece for DCFS in its request that Ms. Robinson place her son in foster care, despite having numerous medical tests which conclusively determined that J.R. had suffered no injury, the Individual ACMC Staff Members were performing the functions of, and/or acting as agents of, DCFS, thereby becoming state actors. In so doing, Defendants acted under color of law.

105. 42 U.S.C. §1983 allows for an individual to assert claims of a violation of the individual's constitutional rights by a person acting under color of law.

106. The Fourteenth Amendment to the U.S. Constitution provides that "No State shall... deny to any person within its jurisdiction the equal protection of the laws."

107. The Individual ACMC Staff Members, acting under color of law in performing the functions of, or acting as agents of, DCFS, knowingly and intentionally discriminated against Ms. Robinson based on her race, and deprived Ms. Robinson of the rights, privileges, and immunities secured by the United States Constitution, including the right under the Fourteenth Amendment's Equal Protection Clause to not be discriminated against based on race.

108. As a result of the Individual ACMC Staff Members' actions, Ms. Robinson sustained significant damages, including pain, suffering, and emotional distress. The Individual ACMC Staff Members' actions were motivated by malicious motive or intent or involved reckless or callous indifference to Ms. Robinson's federally protected rights. Ms. Robinson is therefore

entitled to an award of punitive damages against the Individual APMC Staff Members.

WHEREFORE, Plaintiff Jillian Robinson, individually, respectfully requests the following relief against Defendants Bill Schroeder and Emily Siffermann:

- i. That the Court enter Judgment in her favor against Defendants Schroeder and Siffermann on Count I;
- ii. That the Court award her compensatory damages against Defendants Schroeder and Siffermann in an amount to be determined at trial;
- iii. That the Court award her punitive damages against Defendants Schroeder and Siffermann in an amount to be determined at trial;
- iv. That the Court award her attorneys' fees and other litigation expenses against Defendants Schroeder and Siffermann;
- v. That the Court award her costs; and
- vi. That the Court grant any and all other relief that it deems just and proper.

COUNT II

**Violation of Procedural Due Process under the Fourteenth Amendment
under 42 U.S.C. §1983
Against Defendants Schroeder and Siffermann**

109. Ms. Robinson restates and realleges paragraphs 1–101 as though fully set forth herein.

110. The Individual APMC Staff Members violated Ms. Robinson's procedural due process rights when they effectively detained her and J.R. by requiring J.R. to be admitted overnight at APMC to perform medical procedures that were investigatory rather than medically necessary in order to attempt to confirm their unfounded and erroneous assumptions that J.R. had been intentionally harmed. The Individual APMC Staff Members continued that effective detainment for nearly eight hours after all investigatory medical procedures had been completed to repeatedly suggest that Ms. Robinson allow DCFS to place her son in foster care, despite having numerous medical tests which conclusively determined that J.R. had suffered no injury.

111. In ordering medical tests and a hospital admission that were unnecessary for any medical purpose, but rather were investigatory in nature, and serving as the mouthpiece for DCFS in its request that Ms. Robinson place her son in foster care, despite having numerous medical tests which conclusively determined that J.R. had suffered no injury, the Individual ACMC Staff Members were performing the functions of, and/or acting as agents of, DCFS, thereby becoming state actors. In so doing, Defendants acted under color of law.

112. 42 U.S.C. §1983 allows for an individual to assert claims of a violation of the individual's constitutional rights by a person acting under color of law.

113. The Fourteenth Amendment to the U.S. Constitution provides that "No State shall... deprive any person of life, liberty, or property, without due process of law."

114. The Individual ACMC Staff Members, acting under color of law in performing the functions of, or acting as agents of, DCFS, willfully, intentionally, and/or with reckless disregard deprived Ms. Robinson of the rights, privileges, and immunities secured by the United States Constitution, including the right under the Equal Protection Clause that ensures no state, or state actor, shall deprive an individual of life, liberty or property without employing fair procedures to reach a decision.

115. As a result of the Individual ACMC Staff Members' actions, Ms. Robinson sustained significant damages, including pain, suffering, and emotional distress. The Individual ACMC Staff Members' actions were motivated by malicious motive or intent or involved reckless or callous indifference to Ms. Robinson's federally protected rights. Ms. Robinson is therefore entitled to an award of punitive damages against the Individual ACMC Staff Members.

WHEREFORE, Plaintiff Jillian Robinson, individually, respectfully requests the following relief against Defendants Bill Schroeder and Emily Siffermann:

- i. That the Court enter Judgment in her favor against Defendants Schroeder and Siffermann on Count II;
- ii. That the Court award her compensatory damages against Defendants Schroeder and Siffermann in an amount to be determined at trial;
- iii. That the Court award her punitive damages against Defendants Schroeder and Siffermann in an amount to be determined at trial;
- iv. That the Court award her attorneys' fees and other litigation expenses against Defendants Schroeder and Siffermann;
- v. That the Court award her costs; and
- vi. That the Court grant any and all other relief that it deems just and proper.

COUNT III

**Violation of Substantive Due Process Right to Familial Integrity under the Fourteenth Amendment under 42 U.S.C. §1983
Against Defendants Schroeder and Siffermann**

116. Ms. Robinson restates and realleges paragraphs 1–101 as though fully set forth herein.

117. The Individual APMC Staff Members violated Ms. Robinson's substantive due process rights when they initiated and persisted in a baseless investigation attempting to substantiate their assumptions of intentional harm that resulted in a DCFS investigation restricting Ms. Robinson's free parenting of her child and her ability to make decisions for and direct her family.

118. In initiating a child abuse investigation at APMC, ordering and performing medical tests, requesting and/or ordering a hospital admission that was unnecessary, persisting in involving DCFS after all evidence indicated there had been no child abuse, repeatedly suggesting that Ms. Robinson allow DCFS to place her son in foster care despite having numerous medical tests which conclusively determined that J.R. had suffered no injury, and requiring Ms. Robinson to participate in follow-up medical visits with Siffermann, for no purpose other than to pursue their unfounded

claims of intentional harm, the Individual APMC Staff Members were performing the functions of, and/or acting as agents of, DCFS, thereby becoming state actors. In so doing, the Individual APMC Staff Members acted under color of law.

119. 42 U.S.C. §1983 allows for an individual to assert claims of a violation of the individual's constitutional rights by a person acting under color of law.

120. The Individual APMC Staff Members, acting under color of law in performing the functions of, or acting as agents of, DCFS, intentionally, willfully, maliciously and/or in reckless disregard of Ms. Robinson's rights deprived her of her clearly established rights to familial association, autonomy, integrity and privacy in violation of the United States Constitution as applicable to the states by the Fourteenth Amendment.

121. As a result of the Individual APMC Staff Members' actions, Ms. Robinson sustained significant damages, including pain, suffering, and emotional distress. The Individual APMC Staff Members' actions were motivated by malicious motive or intent or involved reckless or callous indifference to Ms. Robinson's federally protected rights. Ms. Robinson is therefore entitled to an award of punitive damages against the Individual APMC Staff Members.

WHEREFORE, Plaintiff Jillian Robinson, individually, respectfully requests the following relief against Defendants Bill Schroeder and Emily Siffermann:

- i. That the Court enter Judgment in her favor against Defendants Schroeder and Siffermann on Count III;
- ii. That the Court award her compensatory damages against Defendants Schroeder and Siffermann in an amount to be determined at trial;
- iii. That the Court award her punitive damages against Defendants Schroeder and Siffermann in an amount to be determined at trial;
- iv. That the Court award her attorneys' fees and other litigation expenses against Defendants Schroeder and Siffermann;
- v. That the Court award her costs; and

vi. That the Court grant any and all other relief that it deems just and proper.

COUNT IV

Title VI of the Civil Rights Act of 1964

**Against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ
Medical Center and Advocate Children's Health Group**

123. Ms. Robinson restates and realleges paragraphs 1–101 as though fully set forth herein.

124. All hospitals that receive federal funding or federal financial assistance are required to comply with Title VI of the Civil Rights Act of 1964 (“Title VI”). 42 U.S.C. § 2000d; 45 C.F.R. § 80.1.

125. APMC is a medical facility that accepts patients covered by Medicaid, a federal program providing health care coverage to qualified Americans.

126. Ms. Robinson received Medicaid health coverage for her son J.R. and provided APMC with proof of this medical insurance, which APMC accepted.

127. APMC’s acceptance of Medicaid insured patients, such as J.R., in addition to its past and current receipt of additional federal funds, require APMC to comply with Title VI and other federal civil rights protection.

128. Title VI prohibits discrimination against any individual based upon race, color or national origin.

129. Individuals may bring a private right of action under Title VI to address allegations of intentional discrimination.

130. APMC’s conduct, through its actual and/or apparent agents, including, but not limited to, the Individual APMC Staff Members, in making and acting upon unsubstantiated, race-based assumptions that Ms. Robinson harmed her child, including engaging in an investigation in an attempt to substantiate those unfounded assumptions rather than examining and treating the

child in a manner that was consistent with the concern for which Ms. Robinson sought medical assistance, constitutes discriminatory treatment based on race in the provision of healthcare services by ACMC to Ms. Robinson and her child.

131. ACMC is therefore liable to Ms. Robinson under 42 U.S.C. §2000d and its implementing regulations.

WHEREFORE, Plaintiff Jillian Robinson, individually, respectfully requests the following relief against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children's Health Group:

- i. That the Court enter Judgment in her favor against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children's Health Group on Count IV;
- ii. That the Court enter an Order requiring Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children's Health Group to implement and require adherence to policies, procedures and trainings to prevent racially biased and/or racially motivated medical treatment and reporting to DCFS and other government agencies;
- iii. That the Court award her compensatory damages against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children's Health Group in an amount to be determined at trial;
- iv. That the Court award her attorneys' fees and other litigation expenses against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children's Health Group;
- v. That the Court award her costs; and
- vi. That the Court grant any and all other relief that it deems just and proper.

COUNT V
False Imprisonment
Against All Defendants

132. Ms. Robinson restates and realleges paragraphs 1–101 as though fully set forth herein.

133. APMC, through its actual and/or apparent agents, including, but not limited to, the Individual APMC Staff Members, admitted J.R. for no medically necessary reason and refused to let Ms. Robinson and J.R. leave the hospital despite her request for the discharge procedure in a fruitless attempt to support their baseless assumptions of intentional injury and pending DCFS involvement and after its *post hoc* medical examination offered no evidence of actual injury.

134. APMC acted through its actual and/or apparent agents — its medical staff, including, but not limited to, the Individual APMC Staff Members — in restraining Ms. Robinson and J.R. without reasonable grounds to believe that Ms. Robinson had committed any offense meriting such restraint, such as intentional child abuse.

135. APMC's detention, through its actual and/or apparent agents, including, but not limited to, the Individual APMC Staff Members, of Ms. Robinson and J.R. thus curtailed their personal freedom against their wishes for approximately 24 hours and was unreasonable and unlawful.

136. APMC's conduct, through its actual and/or apparent agents, including, but not limited to, the Individual APMC Staff Members, was done with malice and willful and wanton disregard for Plaintiff's rights, justifying an award of punitive damages.

WHEREFORE, Plaintiff Jillian Robinson, individually, and as next friend and parent of J.R., a minor, respectfully requests the following relief against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children's Health Group, Bill Schroeder and Emily Siffermann:

- i. That the Court enter Judgment in her favor against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children's Health Group, Bill Schroeder and Emily Siffermann on Count V;
- ii. That the Court award her compensatory damages against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and

Advocate Children’s Health Group, Bill Schroeder and Emily Siffermann in an amount to be determined at trial;

- iii. That the Court award her punitive damages against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children’s Health Group, Bill Schroeder and Emily Siffermann in an amount to be determined at trial; and
- iv. That the Court grant any and all other relief that it deems just and proper.

COUNT VI
Intentional Infliction of Emotional Distress
Against All Defendants

137. Ms. Robinson restates and realleges paragraphs 1–101 as though fully set forth herein.

138. APMC, through its actual and/or apparent agents, including, but not limited to, the Individual APMC Staff Members, made false accusations against Ms. Robinson of child abuse and wrongfully detained her and J.R. at the hospital while also questioning her parenting skills and housing situation, including asserting she was homeless and querying whether she could afford to feed her child, constituting extreme and outrageous conduct.

139. The extreme and outrageous nature of APMC and the Individual APMC Staff Members’ conduct is further supported by their micro-aggressive statements challenging Ms. Robinson’s parentage of J.R. and apparent practice of unfounded assumptions against Black families’ parenting as demonstrated by the admitting staff member’s comments as to APMC’s “racist practices.”

140. APMC, through its actual and/or apparent agents, including, but not limited to, the Individual APMC Staff Members, either intended to inflict severe emotional distress on Ms. Robinson and J.R. or knew that there was a high probability that its conduct would do so.

141. APMC staff, including, but not limited to, the Individual APMC Staff Members, were well trained in DCFS procedures and knew what would happen if they made a report of child

abuse — *i.e.*, that J.R. would be taken from Ms. Robinson and/or a “safety plan” would be put in place.

142. Even though they had not properly investigated the mark before calling DCFS, ACMC staff and/or the Individual ACMC Staff Members called DCFS with no evidence of child abuse, leaving no reason for doing so but an intentional or implicit racially biased motive.

143. ACMC’s conduct, through its actual and/or apparent agents, including, but not limited to, the Individual ACMC Staff Members, actually caused severe emotional distress.

144. ACMC’s conduct, through its actual and/or apparent agents, including, but not limited to, the Individual ACMC Staff Members, was done with malice and willful and wanton disregard for Plaintiff’s rights, justifying an award of punitive damages.

WHEREFORE, Plaintiff Jillian Robinson, individually, and as next friend and parent of J.R., a minor, respectfully requests the following relief against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children’s Health Group, Bill Schroeder and Emily Siffermann:

- i. That the Court enter Judgment in her favor against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children’s Health Group, Bill Schroeder and Emily Siffermann on Count VI;
- ii. That the Court award her compensatory damages against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children’s Health Group, Bill Schroeder and Emily Siffermann in an amount to be determined at trial;
- iii. That the Court award her punitive damages against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children’s Health Group, Bill Schroeder and Emily Siffermann in an amount to be determined at trial; and
- iv. That the Court grant any and all other relief that it deems just and proper.

COUNT VII
Negligent Infliction of Emotional Distress
Against All Defendants

145. Ms. Robinson restates and realleges paragraphs 1–101 as though fully set forth herein.

146. APMC and the Individual APMC Staff Members, as J.R.’s medical providers, owed J.R. a duty to act in conformance with the standard of a care required by a hospital.

147. APMC and the Individual APMC Staff Members breached their duty of care by failing to conduct a proper medical analysis and instead falsely reporting suspected abuse despite no medically necessary reason.

148. APMC and the Individual APMC Staff Members further breached their duty of care by conducting medical examinations for the purpose of attempting to substantiate their erroneous conclusion of injury to the child despite all evidence to the contrary.

149. As a proximate cause of that breach, Ms. Robinson has suffered and continues to suffer emotional distress, including, but not limited to, sleeplessness, anxiety, worry, and distress.

150. APMC’s conduct, through its actual and/or apparent agents, including, but not limited to, the Individual APMC Staff Members, was done with malice and willful and wanton disregard for Plaintiff’s rights, justifying an award of punitive damages.

WHEREFORE, Plaintiff Jillian Robinson, individually, and as next friend and parent of J.R., a minor, respectfully requests the following relief against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children’s Health Group, Bill Schroeder and Emily Siffermann:

- i. That the Court enter Judgment in her favor against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children’s Health Group, Bill Schroeder and Emily Siffermann on Count VII;

- ii. That the Court award her compensatory damages against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children's Health Group, Bill Schroeder and Emily Siffermann, in an amount to be determined at trial;
- iii. That the Court award her punitive damages against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children's Health Group, Bill Schroeder and Emily Siffermann in an amount to be determined at trial; and
- iv. That the Court grant any and all other relief that it deems just and proper.

COUNT VIII
Defamation
Against All Defendants

151. Ms. Robinson restates and realleges paragraphs 1–101 as though fully set forth herein.

152. APMC, through its actual and/or apparent agents, including, but not limited to, the Individual APMC Staff Members, published to a third party certain false, defamatory, malicious and scandalous words and accusations relating to Ms. Robinson, baselessly and without evidence, accusing her of abusing J.R., including that the “hematoma” or bruise was “suspicious for pinching, nonaccidental trauma.”

153. APMC staff and the Individual APMC Staff Members knew the statements were false or lacked any reasonable grounds for that belief in reckless disregard of the truth.

154. The statements impute commission of a crime, child abuse, and thus constitute defamation *per se* under Illinois law, for which injury to reputation is presumed.

155. Nonetheless, Ms. Robinson has been damaged by the false publication, including by the costs, such as for mental health treatment, she has incurred to address the emotional distress and trauma she has experienced.

156. The statements are not subject to any innocent interpretation or construction, are not true in any sense, and are not privileged.

157. ACMC's and the Individual ACMC Staff Members conduct was done with malice and willful and wanton disregard for Plaintiff's rights, justifying an award of punitive damages.

WHEREFORE, Plaintiff Jillian Robinson, individually, respectfully requests the following relief against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children's Health Group, Bill Schroeder and Emily Siffermann:

- i. That the Court enter Judgment in her favor against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children's Health Group, Bill Schroeder and Emily Siffermann on Count VIII;
- ii. That the Court award her compensatory damages against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children's Health Group, Bill Schroeder and Emily Siffermann, in an amount to be determined at trial;
- iii. That the Court award her punitive damages against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children's Health Group, Bill Schroeder and Emily Siffermann in an amount to be determined at trial; and
- iv. That the Court grant any and all other relief that it deems just and proper.

COUNT IX
False Light Invasion of Privacy
Against All Defendants

158. Ms. Robinson restates and realleges paragraphs 1–101 as though fully set forth herein.

159. The publication of the false statements of child abuse placed, and continue to place, Ms. Robinson in a false light before the public, in that the false accusations would be highly offensive to all reasonable people.

160. ACMC, through its actual and/or apparent agents, including but not limited to the Individual ACMC Staff Members, had knowledge of or acted in reckless disregard as to the falsity of the allegations of child abuse, including, but not limited to, as supported by the failure to conduct

any medical examination or investigation into the mark on J.R.'s ear before reporting suspected child abuse to DCFS.

161. That ACMC's and the Individual ACMC Staff Members' actions were willful and wanton and/or in reckless disregard of Ms. Robinson's and J.R.'s rights supports the imposition of punitive damages.

WHEREFORE, Plaintiff Jillian Robinson, individually, respectfully requests the following relief against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children's Health Group, Bill Schroeder and Emily Siffermann:

- i. That the Court enter Judgment in her favor against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children's Health Group, Bill Schroeder and Emily Siffermann on Count IX;
- ii. That the Court award her compensatory damages against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children's Health Group, Bill Schroeder and Emily Siffermann, in an amount to be determined at trial;
- iii. That the Court award her punitive damages against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children's Health Group, Bill Schroeder and Emily Siffermann in an amount to be determined at trial; and
- iv. That the Court grant any and all other relief that it deems just and proper.

COUNT X
Battery
Against All Defendants

162. Ms. Robinson restates and realleges paragraphs 1–101 as though fully set forth herein.

163. ACMC, through its actual and/or apparent agents, including, but not limited to, the Individual ACMC Staff Members, subjected J.R. to unauthorized touching and physical contact, including, but not limited to, cutting into his skin, injecting into his birthmark, a CT scan, bone scan, other various tests, touching, and prodding during the time of his prolonged stay at ACMC.

164. Any consent Ms. Robinson provided for ACMC to treat J.R. was limited to those treatments for a medically necessary and/or justified reason — *i.e.*, a sincere evaluation of the mark on J.R.’s ear — **not** any pretextual or investigatory conduct to provide a *post hoc* justification for calling DCFS and/or detaining Ms. Robinson and J.R. at ACMC.

WHEREFORE, Plaintiff Jillian Robinson, as next friend and parent of J.R., a minor, respectfully requests the following relief against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children’s Health Group, Bill Schroeder and Emily Siffermann:

- i. That the Court enter Judgment in her favor against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children’s Health Group, Bill Schroeder and Emily Siffermann on Count X;
- ii. That the Court award her compensatory damages against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children’s Health Group, Bill Schroeder and Emily Siffermann, in an amount to be determined at trial;
- iii. That the Court award her punitive damages against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children’s Health Group, Bill Schroeder and Emily Siffermann in an amount to be determined at trial; and
- iv. That the Court grant any and all other relief that it deems just and proper.

COUNT XI

Negligent Supervision

Against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children’s Health Group

165. Ms. Robinson restates and realleges paragraphs 1–101 as though fully set forth herein.

166. ACMC had a duty to supervise its employees and agents, including the Individual ACMC Staff Members, including to make sure they engage in appropriate behavior and follow the law and ACMC’s rules.

167. The inherent racial bias in the medical and child protections fields and effect it has on people of color, particularly Black families, *supra* at 93–101, is well-known.

168. Based upon well-documented and inherent racial bias in the medical and child protection fields, it was generally foreseeable to ACMC that its employees and agents could employ racially biased and/or racially motivated behavior toward Black individuals in medical treatment and child abuse reporting.

169. ACMC breached its duty to supervise its employees and agents, including the Individual ACMC Staff Members, by, at minimum:

- a. despite purporting to designate certain staff members as being “child protection” specialists, failing to properly train and/or supervise them;
- b. failing to supervise its staff and the Individual ACMC Staff Members, including, but not limited to, by having sufficient policies and procedures in place, to ensure they conducted a proper examination of J.R. before taking the drastic action of accusing Ms. Robinson of intentional child abuse through their report to DCFS; and/or
- c. despite knowing (or, given its wide understanding, should having known) of the inherent and widespread racial bias in medical treatment, failing to train and/or supervise its staff and Individual ACMC Staff Members in implicit racial bias to prevent actions driven by such bias.

170. ACMC’s breaches of its duty to supervise proximately caused injury to Ms. Robinson and J.R., including, but not limited to: emotional distress; costs for follow-up medical care from the unnecessary medical procedures performed by ACMC and the Individual ACMC Staff Members; mental health care for Ms. Robinson to address the trauma caused by the actions of ACMC staff and the Individual ACMC Staff Members; improper detention, both at ACMC and at Ms. Robinson’s family members’ house; and other damages.

171. ACMC’s actions were willful and wanton and/or in reckless disregard for Ms. Robinson and J.R.’s well-being, justifying imposing punitive damages

WHEREFORE, Plaintiff Jillian Robinson, individually, and as next friend and parent of

J.R., a minor, respectfully requests the following relief against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children's Health Group:

- i. That the Court enter Judgment in her favor against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children's Health Group on Count XI;
- ii. That the Court award her compensatory damages against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children's Health Group in an amount to be determined at trial;
- iii. That the Court award her punitive damages against Defendants Advocate Health and Hospitals Corporation d/b/a Advocate Christ Medical Center and Advocate Children's Health Group an amount to be determined at trial; and
- iv. That the Court grant any and all other relief that it deems just and proper.

Respectfully submitted,
Jillian Robinson, individually and as next friend and
parent of J.R.

By: /s/ Alexander D. Marks
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JURY DEMAND

Plaintiff demands a trial by jury.

735 ILCS 5/2-622 COMPLIANCE

In compliance with 735 ILCS 5/2-622, Alexander D. Marks, one of the attorneys for Plaintiff Jillian Robinson, individually and as next friend and parent of J.R., a minor, submits an Affidavit pursuant to 735 ILCS 5/2-622 attached as Exhibit 1 hereto.