



***CHILDREN'S DIVISION***

**Child and Family Services Review**

**Round 4**

**Statewide Assessment**

**Submitted May 23, 2023**

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## **Section I: General Information**

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**Involvement in Statewide Assessment (SWA) Participants**

<b>Name</b>	<b>Affiliation</b>	<b>Role in Statewide Assessment Process</b>
Abigail Smith	Children's Division	SWA Event Participant
Adriane New	Foster/Relative/Adoptive Parent	SWA Event Participant
Adrienne Williams	Children's Division	SWA Event Participant
Alexander Daskalakis	Partner Agency Representative	SWA Event Participant
Alicia Mitchem	Partner Agency Representative	SWA Event Participant
Alysha Clayton*	Youth	Person w/Lived Experience
Amanda Blaylock	Foster Care Case Management or other contracted staff	SWA Event Participant
Amanda Denham	Children's Division	SWA Event Participant
Amanda Faulkner	Children's Division	SWA Event Participant
Amanda White	Partner Agency Representative	SWA Event Participant
Amber Stockreef	Partner Agency Representative	SWA Event Participant
Andy Hosmer	Judge/Commissioner	SWA Event Participant
Angela Bezoni	Juvenile Office Representative	SWA Event Participant
Angie Swarnes	Children's Division	Agency Executive Team
Angie Trimm	Children's Division	SWA Event Participant
Anna Denslow	Foster/Relative/Adoptive Parent	SWA Event Participant
Annie Wilson	Foster Care Case Management or other contracted staff	SWA Event Participant
Annora Potter	Children's Division	SWA Event Participant
Beau Graves	Agency Attorney	SWA Event Participant
Bobbie Thomas-Schiller	Children's Division	SWA Event Participant
Brian West	Children's Division	Agency Executive Team
Brit Backman	Children's Division	SWA Event Participant
Brittany Durham	Children's Division	SWA Event Participant
Candace Nahler	Children's Division	SWA Event Participant
Cari Pointer	Children's Division	SWA Event Participant
Carmen Akridge	Juvenile Office Representative	SWA Event Participant
Casey Figgins	Office of State Courts Administrator	SWA Event Participant
Casey Gilmore	Children's Division	SWA Event Participant
Catie Costello	Foster Care Case Management or other contracted staff	SWA Event Participant
Charise Baker	Partner Agency Representative	SWA Event Participant

Chelsea Shaffer	Service Provider	SWA Event Participant
Chez Massey	Foster/Relative/Adoptive Parent	SWA Event Participant
Chris Kimsey	Children's Division	Agency Executive Team
Christie Briggs	Service Provider	SWA Event Participant
Christina Barnett	Children's Division	SWA Event Participant
Christina Palmer	Partner Agency Representative	SWA Event Participant
Christopher Jensen	Parent/Child Attorney	SWA Event Participant
Claire M Terrbonne	Parent/Child Attorney	SWA Event Participant
Craig Stevenson	Service Provider	SWA Event Participant
Crystal Wenger	Children's Division	SWA Event Participant
Cynthia Hull	Children's Division	SWA Event Participant
Danielle Corley	Children's Division	Agency Executive Team
Darrell Missey	Children's Division	Agency Executive Team
Dawn Blunda	Agency Attorney	SWA Event Participant
Dawne Votra	Partner Agency Representative	SWA Event Participant
Donna Anthony	Judge/Commissioner	SWA Event Participant
Eileen Casteel	Children's Division	SWA Event Participant
Elizabeth Gifford	Children's Division	SWA Event Participant
Eric Martin	Partner Agency Attorney	SWA Event Participant
Erin Parker	Children's Division	SWA Event Participant
Faith Sharp*	Youth	Person w/Lived Experience
Gina Clement	Partner Agency Representative	SWA Event Participant
Hillary Callahan	Children's Division	SWA Event Participant
Jade Coatney	Children's Division	SWA Event Participant
Jaime Pinney	Foster/Relative/Adoptive Parent	CF SR Advisory Committee
Jamie Dwight	Juvenile Office Representative	SWA Event Participant
Jana Wyman	Children's Division	SWA Event Participant
Janet Braker	Foster Care Case Management or other contracted staff	CF SR Advisory Committee
Jason Horne	Agency Attorney	SWA Event Participant
Jason Myers	Foster Care Case Management or other contracted staff	SWA Event Participant
Jayla Carr	Youth	Person w/Lived Experience
Jeanette Koster	Foster Care Case Management or other contracted staff	SWA Event Participant
Jen Leek	Partner Agency Attorney	SWA Event Participant
Jenifer Smith	Children's Division	SWA Event Participant
Jennifer Gunnels	Children's Division	SWA Event Participant
Jennifer Jackson	Children's Division	SWA Event Participant
Jennifer Loibl	Children's Division	SWA Event Participant

Jenny Lockhart	Partner Agency Representative	SWA Event Participant
Jessica Reckers	Foster Care Case Management or other contracted staff	SWA Event Participant
Jim Merlo	Juvenile Office Representative	SWA Event Participant
Joshua Fantroy	Juvenile Office Representative	SWA Event Participant
Judi Lutz	Partner Agency Representative	SWA Event Participant
Julia Adami	Foster Care Case Management or other contracted staff	SWA Event Participant
Julie Kezele	Juvenile Officer Representative	SWA Event Participant
Julie Simonson	Children's Division	SWA Event Participant
Julie Starr	Children's Division	SWA Event Participant
Kamryn Harris*	Parent	Person w/Lived Experience
Kara Wilcox	Children's Division	SWA Event Participant
Kari Twombly	Service Provider	SWA Event Participant
Kassy Baumgartner	Children's Division	SWA Event Participant
Katherine Gonder	Children's Division	SWA Event Participant
Kathryn Dinwiddle	Partner Agency Representative	SWA Event Participant
Kathy Brooks	Children's Division	SWA Event Participant
Kathy Rodgers	Parent/Child Attorney	SWA Event Participant
Katie Igo	Children's Division	SWA Event Participant
Katie Schenck	Children's Division	SWA Event Participant
Kayla Null	Children's Division	SWA Event Participant
Kayla Ueligger	Children's Division	SWA Event Participant
Kerry Carney	Children's Division	SWA Event Participant
Kim Abbott	Office of State Court Administrator	CFPSR Advisory Committee
Kindra Harms	Juvenile Office Representative	SWA Event Participant
Kristiann Hudson	Children's Division	SWA Event Participant
Kyle Kendrick	Children's Division	Agency Executive Team
Lanei Saelens*	Parent	Person w/Lived Experience
Lauren Hall	Children's Division	SWA Event Participant
Lauren Masterson	Children's Division	SWA Event Participant
Leanne Reese	Missouri CASA	CFPSR Advisory Committee
Linda Meyer	Juvenile Office Representative	SWA Event Participant
Lindsey Adams*	Parent	Person w/Lived Experience
Lisa Crawford	Children's Division	Agency Executive Team
Lisa Etter	Children's Division	SWA Event Participant
Lisa Ivy	Partner Agency Representative	CFPSR Advisory Committee
Lisa Mizell	Partner Agency Representative	SWA Event Participant
Lori Masek	Children's Division	SWA Event Participant
Lori Stipp	Juvenile Office Representative	SWA Event Participant

Mary Faucett	Children's Division	SWA Event Participant
Mary Gorman	Children's Division	SWA Event Participant
Meaghan P (Myers) Forck	Children's Division	SWA Event Participant
Megan Marietta	Service Provider	SWA Event Participant
Melissa Connor	Children's Division	SWA Event Participant
Melissa Kenny	Children's Division	SWA Event Participant
Melissa Lett	Children's Division	SWA Event Participant
Melissa Selsor	Children's Division	SWA Event Participant
Michelle Dixon	Parent/Child Attorney	SWA Event Participant
Mike Beetsma	Children's Division	SWA Event Participant
Misty Curtis	Children's Division	SWA Event Participant
Monica S Sekscinski	Children's Division	SWA Event Participant
Nancy Capps	Office of State Court Administrator	SWA Event Participant
Nicole Houser*	Parent	Person w/Lived Experience
Nicole Wilson	Foster Care Case Management or other contracted staff	SWA Event Participant
Nikki Holdmeier	Juvenile Office Representative	SWA Event Participant
Pam Alston	Children's Division	Agency Executive Team
Patrice Mugg	Foster/Relative/Adoptive Parent	SWA Event Participant
Paula R. Fleming PhD	Partner Agency Representative	SWA Event Participant
Phil Garrett	Partner Agency Representative	SWA Event Participant
Phoelica McKenzie	Children's Division	Agency Executive Team
PJ Parker	Juvenile Office Representative	SWA Event Participant
Rachael Robinett	Partner Agency Representative	SWA Event Participant
Rachael Wharton	Children's Division	SWA Event Participant
Rachel Bonner	Children's Division	SWA Event Participant
Rachel Nichols	Children's Division	SWA Event Participant
Ramona Harris	Children's Division	SWA Event Participant
Renae Beushausen	Foster/Relative/Adoptive Parent	SWA Event Participant
Rene Brinkman	Children's Division	SWA Event Participant
Rhiannon Sampson	Foster Care Case Management or other contracted staff	SWA Event Participant
Rochelle Moore	Service Provider	SWA Event Participant
Robin Garrett	Children's Division	SWA Event Participant
Robyn Wolfe	Foster Care Case Management or other contracted staff	SWA Event Participant
Saije Seaver	Children's Division	SWA Event Participant
Sara Smith	Partner Agency Representative	SWA Event Participant
Sarah Scott	Children's Division	SWA Event Participant

Scott Miller	Children's Division	SWA Event Participant
Shamella Logan*	Youth	Person w/Lived Experience
Shannon Dougherty	Judge/Commissioner	SWA Event Participant
Shannon Garber	Foster Care Case Management or other contracted staff	SWA Event Participant
Shante Lampley	Juvenile Office Representative	SWA Event Participant
Shasta Miller	Children's Division	SWA Event Participant
Shawna Allen-Echols	Foster/Relative/Adoptive Parent	SWA Event Participant
Shellie Knuckles	Children's Division	SWA Event Participant
Stefani Lopinot	Foster Care Case Management or other contracted staff	SWA Event Participant
Shelia Rancatore	Foster Care Case Management or other contracted staff	SWA Event Participant
Stephanie Knotts	Parent/Child Attorney	SWA Event Participant
Stephanie Reese	Foster/Relative/Adoptive Parent	SWA Event Participant
Stephanie Watson	Foster Care Case Management or other contracted staff	SWA Event Participant
Teresa Hayner	Children's Division	CFSR Advisory Committee
Teresa McKenzie	Children's Division	SWA Event Participant
Teresa Pagano	Parent/Child Attorney	SWA Event Participant
Tiffany Moore	Children's Division	Agency Executive Team
Tom Noonan*	Parent	Person w/Lived Experience
Tracie Brooks	Children's Division	SWA Event Participant
Tracy Jones	Foster Care Case Management or other contracted staff	SWA Event Participant
Travis Miller	Agency Attorney	SWA Event Participant
Tyler Watson	Children's Division	SWA Event Participant
Virginia Fatseas	Foster Care Case Management or other contracted staff	SWA Event Participant

**Description of Stakeholder Involvement in  
Statewide Assessment Process**

Stakeholder involvement in the Statewide Assessment process was obtained through two primary methods.

Opportunities to participate in stakeholder surveys were provided to a variety of groups of child welfare system partners throughout the month of January, 2023. The surveys asked questions about a variety of Child and Family Service Review (CFSR) case review and systemic factor



items appropriate to the group of respondents. Surveys were distributed to the following groups. Also provided is a description of the survey delivery methods.

- **Parents with lived experience:** Children’s Division case managers and Foster Care Case Management (FCCM) case managers were asked to distribute survey links to the parents on their caseloads. At the point in time the surveys were distributed, there were 7,617 children in foster care with a goal of reunification.
- **Youth with lived experience:** Children’s Division case managers and Foster Care Case Management (FCCM) case managers were asked to distribute surveys to children ages 12 and older on their caseloads. At the time the surveys were distributed, there were 5,024 children in foster care ages 12 and older.
- **Foster/Relative/Adoptive Parents:** The survey link was distributed through email to the Foster Parent newsletter distribution list. At the time of survey distribution, there were 4,699 licensed foster/relative parents and an additional 1,656 relative providers who were unlicensed.
- **Judges and Juvenile Officers:** Court Improvement Project staff at the Office of State Courts Administrator (OSCA) send survey links to the judiciary and juvenile officers in all 46 circuits in Missouri. A total of 147 surveys were distributed to judges and juvenile officers.
- **Attorneys who represent children and families:** Court Improvement Project staff at the OSCA emailed the survey link to the statewide list of attorneys being developed within that office. OSCA sent a total of 165 surveys to attorneys who represent children and families across the state. Links were provided to an attorney in each of the metropolitan areas (Kansas City and St. Louis) and they were asked to forward the link to attorneys within their areas. In addition, Children’s Division Circuit Managers were also asked to forward the survey link to attorneys who frequently represent children and families within their circuits.
- **Children’s Division and FCCM case managers and specialists:** The survey link was provided to the Children’s Division Executive Team and the FCCM Oversight Unit Manager for distribution among Children’s Division and FCCM case managers and specialists. In total, there were 1,537 workers and specialists who were provided opportunity to participate in the survey.
- **Children’s Division and FCCM supervisory and management staff:** The survey link was provided to the Children’s Division Executive Team and the FCCM Oversight Unit Manager for distribution among Children’s Division and FCCM supervisors and managers. In total, there were 390 supervisors and managers who were provided opportunity to participate in the survey.

Missouri Children’s Division also hosted a two-week event in late February – early March of 2023 to engage both internal and external stakeholders in the Statewide Assessment process. The 36 CFSR items were divided into 15 unique half-day sessions. Session participants included Children’s Division field staff and policy experts, FCCM representatives, members of the judiciary, Juvenile Officers, attorneys, foster and relative parents, youth and parents with lived

experience, and service providers. The event schedule is provided in Appendix B. Each session followed the same agenda:

- Welcome and Introductions
- Polling question designed to have participants identify and recognize/remember the importance of the topic being discussed
- Data review to include federal data indicators, agency and court administrative data, case review results, and survey information
- Group discussion, including polling questions, to identify strengths and areas of improvement based on the data provided

Following the event, as sections of the Statewide Assessment were drafted, participants who indicated an interest were provided the opportunity to review the drafts and provide feedback via a short survey.

The evidence gained throughout the event sessions was used in this document to inform the Children's Division's assertion of conformity or non-conformity.

## **Section II: State Context Affecting Overall Performance**

### **Part 1: Vision and Tenets**

Briefly describe the vision and core tenets of the state child welfare system (i.e., primary programs, including title IV-E prevention programs, as applicable; practice model; structure and approach to drive change) that are designed to produce desired child welfare outcomes and the routine statewide functioning of systemic factors.

The Children's Division, under the Department of Social Services umbrella, is responsible for the administration of child welfare services, geared toward ensuring the safety, permanency, and wellbeing of Missouri children. The Children's Division works with child welfare system partners to safely maintain children in their homes whenever possible and to secure safe, permanent living arrangements when placement out of the home is necessary. The Children's Division is responsible for the assessment and investigation of all reports and administers the Child Abuse/Neglect Hotline; prevention programming through Intensive In-Home Services and Family-Centered Services; permanency services through Foster and Relative Care, Adoption Services, Independent Living services, and Residential Licensing. These services are administered statewide within a centralized organizational framework.

Missouri has 114 counties and the City of St. Louis, which are grouped using pre-established judicial circuit boundaries. Each of the 46 circuits in Missouri has oversight by a Children's Division Circuit Manager. The state has six regions with each governed by a Regional Director. In the Jackson County urban area, the Regional Director and the Circuit Manager positions are held by the same person. The St. Louis Region includes St. Louis County and the city of St. Louis. Missouri's six regions are Kansas City, St. Louis, Northwest, Northeast, Southwest, and Southeast.

The Child Abuse/Neglect Hotline and all investigations and assessments alleging child abuse or neglect are administered and completed by the Children's Division. In-home prevention services through the Family Centered Services program is also administered by Children's Division throughout the state. Intensive In-Home Services is a contractor-provided program.

Foster care and adoption case management services are provided by Children's Division staff throughout the state. In some areas, foster care and adoption cases may also be managed by Foster Care Case Management (FCCM) agencies contracted to provide the same services as Children's Division staff. Currently, approximately 25-30% of children in foster care are case managed by FCCM providers. The majority of Independent Living programming is provided through Chafee contracted providers.

Foster parent licensing services are provided by Children's Division resource workers in four regions of the state. Foster parent recruitment, retention and licensing services are contracted in the Kansas City and Northwest Regions. Residential licensing responsibilities reside within the Department of Social Services.

## **Part 2: Cross-System Challenges**

Briefly describe cross-cutting issues not specifically addressed in other sections of the statewide assessment that affect the system's programs, practice, and performance (e.g., legislation, budget reductions, community conditions, consent decrees, staff turnover and workload).

Children's Division Director, Darrell Missey, recently authored "A Plan to Rebuild & Reform Children's Division". Components of the plan identify two of the cross-cutting challenges currently facing the child welfare system in Missouri: (1) Children's Division is unable to recruit and retain front line workers and (2) Children's Division lacks essential personnel needed to operate a proactive and holistic child welfare system. The plan's goals are to prevent foster care when possible, and to efficiently move families through the system when child removal is necessary. The following steps support these goals:

- Increase Pay – an increase to market wage and an established pay ladder allowing Children's Division to be more competitive in the job market and better recruit and retain Children's Division team members.
- Increase Workforce – Children's Division strives to meet Council on Accreditation caseload standards of 15 cases per worker. More team members across the state will help reduce burnout and turnover.
- Preserve Families – the goal of the child welfare system is to protect children and provide services to help them stay at home. However, due to staffing shortages, Missouri has become more reactive and less proactive and preventative. Reducing the number of children in foster care would allow Children's Division staff to focus on preventative services.
- Expedite the Conclusion of Cases – Children's Division needs more legal representation to allow cases to reach reunification in a timelier manner. When reunification is not possible, attorneys are needed to promptly litigate hearings to move children toward guardianship or adoption.

## **Part 3: Current Initiatives**

Briefly describe the cross-cutting improvement initiatives (e.g., practice model, new safety model, workforce projects) to provide context for, and an understanding of, the priority areas of focus from the last CFSR that were addressed through the state's most recent PIP. This is an opportunity to highlight current initiatives and progress made toward achieving desired outcomes and systemic change.

There are several current initiatives in place to support improvement and progress in priority areas identified in Round 3 of the CFSR.

***Temporary Alternative Placement Agreement*** - Pursuant to House Bill 1414 which went into effect August 28, 2020, a Temporary Alternative Placement Agreement (TAPA) is a voluntary agreement between the Children's Division, a relative of the child, and the parent or guardian of the child to provide a temporary, out of home placement for a child if the parent or guardian is temporarily unable to provide care or support for the child and the child is not in imminent danger of death or serious bodily injury or being sexually abused. For each TAPA that is put in

place, an in-home services case is opened. TAPA agreements provide safe options to keep children out of foster care.

***Permanency Attorney Initiative*** – The achievement of timely permanency for children was identified as an area needing improvement during Missouri’s Round 3 CFSR. One of the Program Improvement Plan strategies to address this issue developed the Permanency Attorney Initiative. Until work on this Program Improvement Plan strategy began, Children’s Division staff were legally represented in court hearings in very limited scope. A referral was provided to the Division of Legal Services for specific, time-limited concerns which required legal action/advice. The introduction of permanency attorneys afforded staff in certain areas of the state the opportunity to have readily accessible legal advice and representation. The plan described in the previous section strives to increase salaries of current Permanency Attorneys and to increase the number of attorneys available to represent Children’s Division staff in court hearings in order to directly impact timely permanency for children.

***Missouri Model for Alternative Care*** – CFSR Round 3 highlighted a need for more thorough assessments of children and families’ needs. The Missouri Model for Alternative Care introduced the Initial Family Assessment and Social Service Plan in August, 2021. After a child enters Alternative Care, there is a 30-day assessment period. During this assessment period, the assigned worker engages with the family and the Family Support Team to assess the dynamics of the family and the reason(s) the child entered Alternative Care. During the initial assessment period, the team utilizes the information from the Initial Family Assessment to develop the case plan through completion of the Social Service Plan. The Social Service Plan identifies the goals, services and steps the family will take to remedy the factors which caused the child to enter Alternative Care. The Social Service Plan also identifies all child’s needs, plans to meet those needs and any services to be provided.

***Response and Evaluation Team*** – Another component of House Bill 1414 is a requirement that the Children’s Division establish a response and evaluation team to objectively review and evaluate foster care case management in Missouri. The legislation outlines the structure for this collaboration and sets the goals for its implementation in which all stakeholders in the foster care system partner to improve the system.

The purpose of this law is to implement objective metrics to measure the quality of services for Missouri’s children in foster care. The key components of the law are the requirements for the Children’s Division to:

- Consider the safety and welfare of children the most important goal
- Establish a Research and Evaluation Team composed of representatives from the Children’s Division and key stakeholders
- Establish a uniform, transparent, objective, and consistent tool to evaluate foster care case management services
- Maximize successful outcomes for children and families served by the Children’s Division

The metrics in phase one of implementation include:

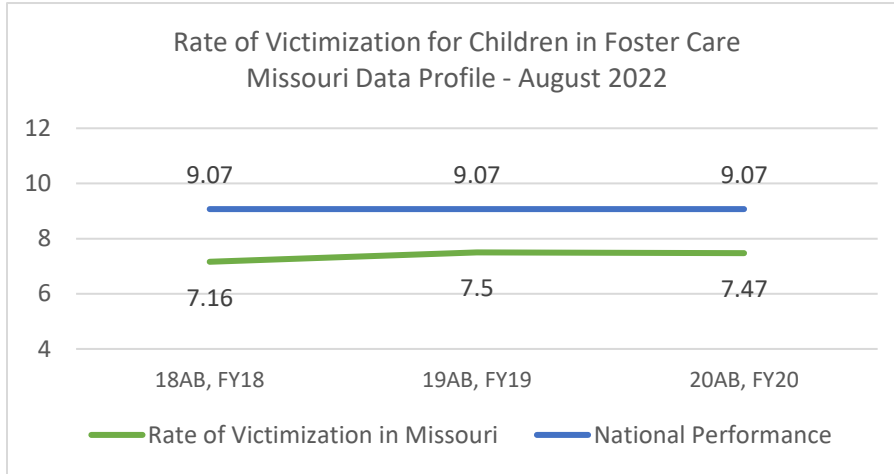
- Reports for children in foster care where there were preponderance of evidence findings of abuse or neglect
- Healthy Children & Youth health exams within 30 days of entry into foster care
- Number of Workers Per Child In Care (Viewed as In Foster Care Less Than 12 months and Over 12 Months)
- Worker Visits with Children
- Worker Visits with Parents
- Re-Entry into Foster Care
- Parent Visits with Children

Children's Division is currently establishing a practice improvement process to routinely examine the data metrics, identify areas in the state by county and case management agency that are not meeting the established measures for each metric, and provide technical assistance to those areas in order to increase performance. The established process for technical assistance will be mirrored with the Foster Care Case Management agencies, as well.

## Section III: Assessment of Child and Family Outcomes

### Safety Outcomes 1 and 2

Missouri’s CFSR Round 3 Data Profile dated August 2022 indicated the Children’s Division successfully meets both safety indicators. For Maltreatment in Care, Missouri’s Risk-Standardized Performance (RSP) is 7.47 victimizations per 100,000 days in foster care. This is

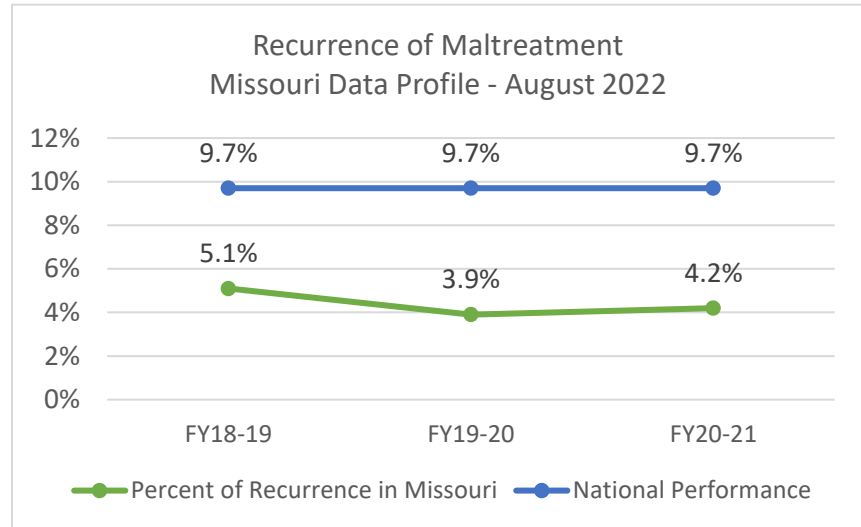


below the national standard of 9.07. In review of Missouri’s context data, children between the ages of 11-16 experience the most maltreatment in foster care with a rate of 8.67. This age group represents 32.7% of total days in foster care, yet 50.2% of total victimizations in foster

care. Black or African American children experience maltreatment in foster care at a higher rate (6.32) than white children (5.37).

For Recurrence of Maltreatment within 12 months, Missouri’s RSP is 4.2%, which is below the national standard of 9.7% and an increase from the previous data profile measure of 3.9%. All

age categories are well beneath the national standard, however, children ages 11-16 experience the most initial victimization (38.2%) and the most re-victimization (42.7%) compared to other age categories. Black or African American children’s percentage of recurrence of maltreatment is 3.4% and the percentage of recurrence of maltreatment for white children is 3.2%.



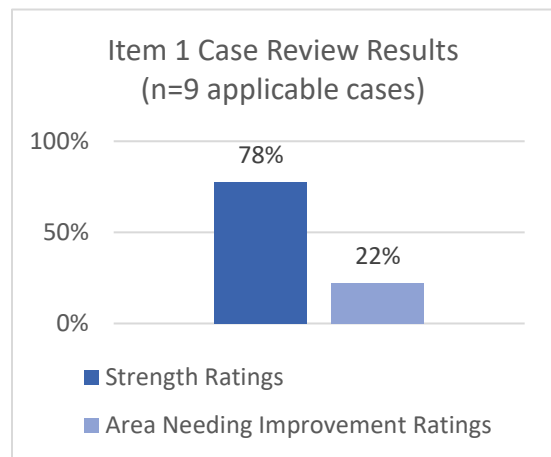
### Safety Outcome 1: Children are, first and foremost protected from abuse and neglect

Missouri state statute requires all hotline reports to be initiated within 24 hours of receipt. The timeframe requirement for initial safety contact is based on the priority level assigned at the time

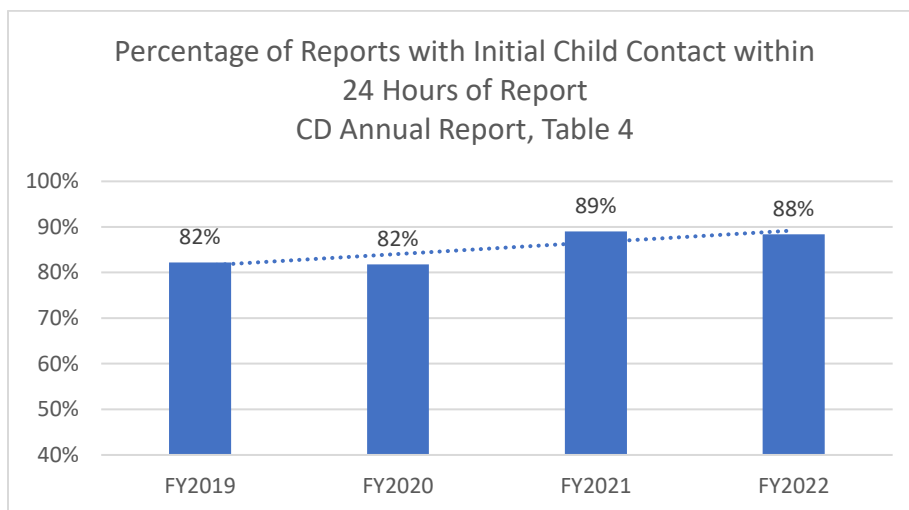
the hotline is accepted. State policy allows multi-disciplinary team (MDT) members to make the initial face-to-face contact for safety assurance. The MDT member may include law enforcement, local public school liaisons, juvenile officers, juvenile court officials, or other service agencies. If a multi-disciplinary team member assures safety, Children’s Division staff must see all children within 72 hours of the report date and time.

Priority Level	Initial Contact Timeframes for Victim Children
1	Within 3 hours of report
2	Within 24 hours of report
3	Within 72 hours of report

Case reviews conducted using the On-Site Review Instrument for CFSR Round 4 were completed in September and December 2022. A total of 42 cases were reviewed, with nine being applicable for Item 1. Of the applicable cases, 78% were determined to be strength ratings (7/9). This is lower than Missouri’s performance during CFSR Round 3 (93%, 28/30).



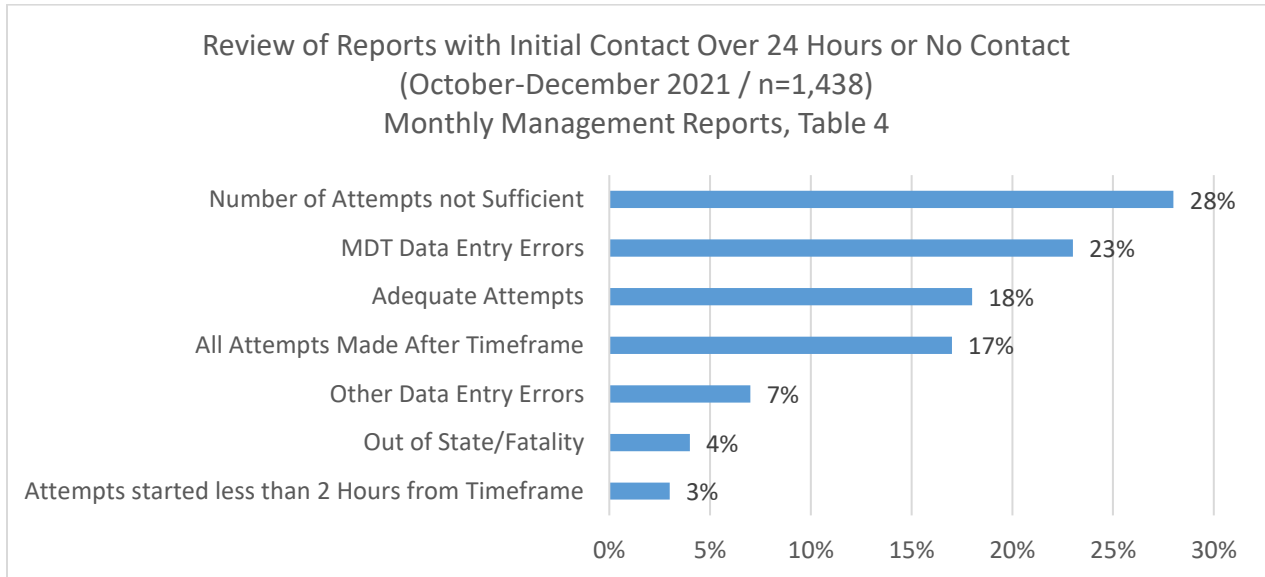
The Children’s Division’s current administrative data reports the percentage of accepted hotline reports in which initial child contact occurred within 24 hours of the report date and time. There is no delineation between the priority levels outlined above. As noted in the chart below, the percentage of victim children who were seen within 24 hours of the hotline report increased between 2020 and 2021. Emphasis was placed on seeing children within timeframes and starting the efforts to contact the children with enough time to make several attempts, if needed.



The Quality Assurance System team members conducted a targeted review of hotlines that did not achieve 24 hour contact according to the Children’s Division Monthly Management Report,



Table 4, which is similar to the report depicted in the chart above. Data entry errors represented 30% (431/1,438) of the non-compliance reports, followed by an insufficient number of attempts to contact the child (28%, 403/1,438), and all attempts made after the timeframe had expired made up 17% (244/1,438) of the reports that were out of compliance with the 24 hour contact expectation. Eighteen percent (18%, 259/1,438) of the reports had sufficient attempts to see the victim child, but those attempts were not successful.



During the CFSR Statewide Assessment Event that was held in March 2023, session attendees had the opportunity to respond to an online polling question that asked “Do you think Children’s Division staff and Multi-Disciplinary Team Members understand what is required for the initial assurance of child safety?” Fifty-eight percent (58%, 7/12) of respondents answered affirmatively while 42% (5/12) answered the question negatively.

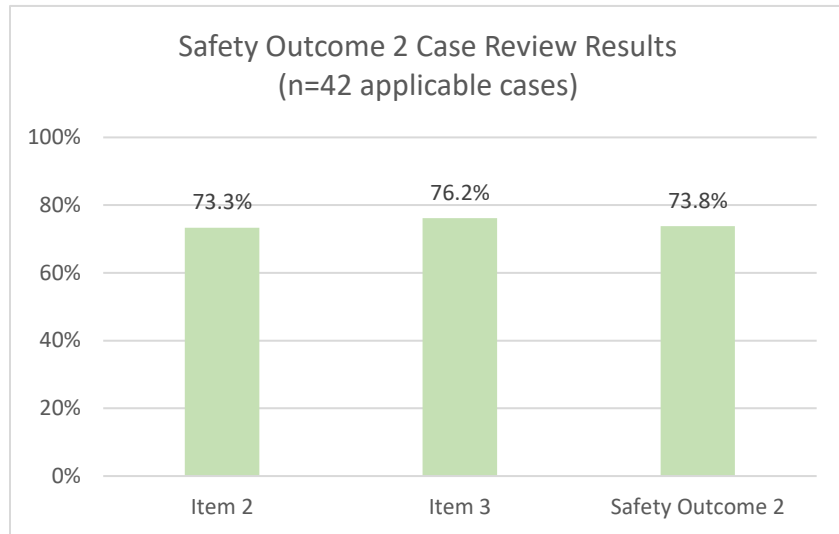
Session participants included Children’s Division front-line investigative staff and supervisors, Child Abuse and Neglect Hotline Unit management staff, community members who serve in MDT roles, and Children’s Division leadership with Child Abuse and Neglect program line responsibilities.

In discussion, the session participants mentioned that staff turnover within the MDT agencies, schools, and law enforcement make it challenging to ensure new MDT members are trained in their responsibilities when asked to assure child safety. Staffing shortages within the Children’s Division also impact the number of MDT members that are being asked to complete the initial assurance of child safety. With the number of vacancies among Children’s Division staff, the current investigators are struggling to find enough time to complete timely initial contact given the number of reports they are being assigned each day.

Safety Outcome 2: Children are safely maintained in their own homes whenever possible and appropriate

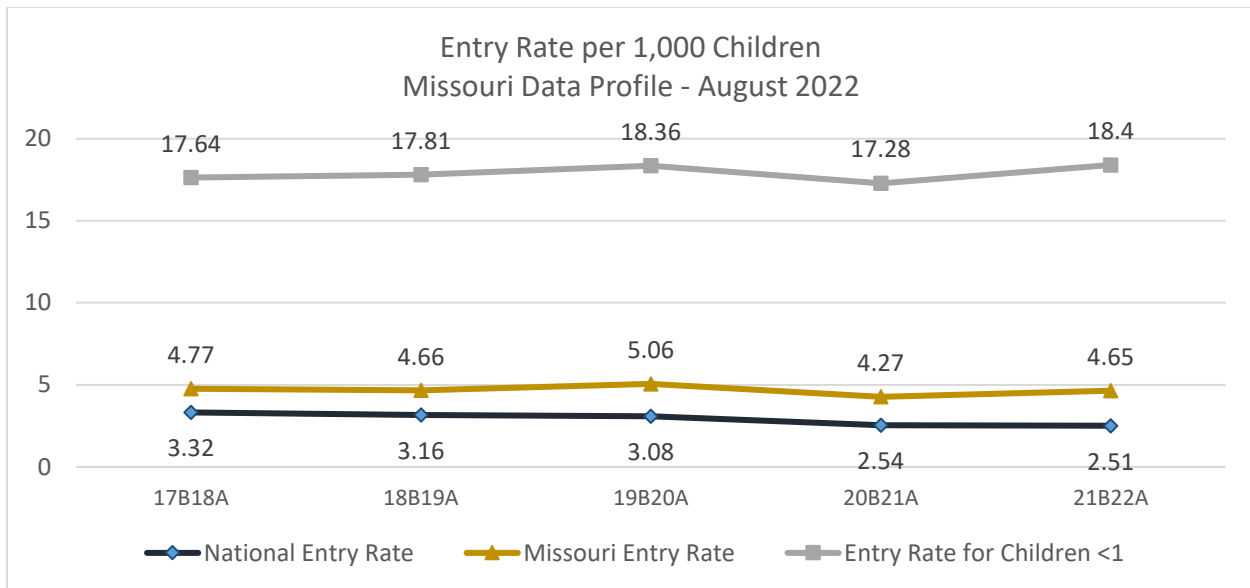
For Safety Outcome 2, 58% (38/65) of cases reviewed during CFSR Round 3 were found to be substantially achieved.

Case reviews conducted using the On-Site Review Instrument for CFSR Round 4 were completed in September and December 2022. Overall, Safety Outcome 2 was rated substantially achieved in 31 of the 42 cases reviewed (73.8%).



Item 2, Services provided to the children to remain safely in their homes, was rated as an area needing improvement during Missouri’s Round 3 CFSR, with 52% (12/23) of cases receiving strengths ratings. On-going case reviews in the past year have shown strength ratings for 73% (11/15) of cases, as evidenced in the chart above. For cases rated as strengths, services were established at the start of trial home visits to support reunification and appropriate services were put in place to address the immediate concerns surrounding case opening, to include mental health treatment, domestic violence services, and substance abuse treatment.

The foster care entry rate for children in Missouri is 4.65 per 1,000 children, nearly double the national entry rate (2.51 per 1,000 children). The national rate of entry is on a downward trend but Missouri is not recognizing the same pattern. Most significant is the entry rate for children under one year of age, which is 18.4 per 1,000 children. The age group with the next highest rate is children ages one to five (5.01 per 1,000 children).



Missouri has several programs to help prevent children’s removal by providing the family with services to ensure the child’s safety while remaining in the home. Families entering the child welfare system due to reports of child abuse or neglect may receive case management services referred to as Family-Centered Services. Family-Centered Services may also be provided if the family requests preventive treatment services. Services are available to families, including expectant parents, who request services aimed at preventing child maltreatment and promoting health and appropriate parenting skills. Family-Centered Services seek to empower the family and minimize their dependence upon the social service system. Additionally, Missouri offers Intensive in-home services (IIS) for families with children at risk of being removed from the home. Intensive In-Home Services is a short-term, intensive, home-based, crisis intervention program which offers families in crisis an alternative to out-of-home placement through the enhancement of family capabilities. Crisis nurseries are also available in some areas of the state to provide temporary care for children if parents need a short-term alternative arrangement.

With the passage of House Bill 1414 in August 2020, there has been increased focus on Temporary Alternative Placement Arrangements (TAPA). Policy was released in July 2021 which requires Team Decision Making (TDM) meetings with any temporary, voluntary placement arrangement. The law also requires a Family-Centered Services case be opened with families who voluntarily place their children outside of the home and these placements last more than ten days. Tools have been created to assist staff with documentation of immediate safety concerns and identification of the services that will be offered to the family to address the safety concerns.

During the CFSR Statewide Assessment Event, attendees were asked what additional supports or services would be needed to allow children to safely remain in their family homes. Session participants included representation from the judiciary, Juvenile Office, attorneys who represent parents in child welfare cases, Child Advocacy Center staff members, parents with lived experience, Probation and Parole representatives, Intensive In-Home Service providers, and

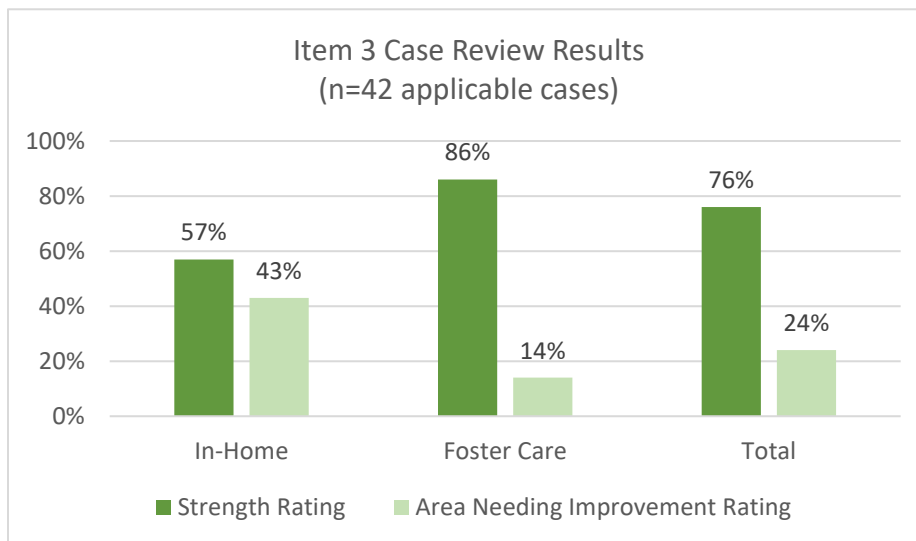
Children’s Division field staff and policy development representatives. The supports and services they identified included:

- More substance use treatment options
- Children’s Division staff housed in school settings to more quickly identify families who need prevention services
- Financial resources to help with tangible housing needs
- Effective and reliable parenting classes to specifically target parenting teenagers
- Achievement courts for youth with challenging behaviors
- Wraparound services targeted at keeping teenagers in the home

Session participants were also asked to discuss the reasons they feel that infants have a higher entry rate into foster care than other age groups. Some reasons mentioned were:

- Infants are seen more frequently for WIC appointments and well-child check-ups
- Mothers and infants test positive for substances at birth
- There are limited facilities that will allow an infant to stay with the mother while she receives substance use treatment
- Older siblings may already be in foster care, so infants are automatically placed
- Parents may be fearful to ask for help and see it as a risk for the infant to be removed

Item 3, Risk and Safety Assessment and Management, was rated as an area needing



improvement during CFRS Round 3, with 60% (39/65) of cases rated as strengths. Ongoing internal CFRS case reviews since the Round 4 OSRI was published have shown strength ratings for 76% (32/42) of cases. The breakdown of in-home case review results and results for foster care cases are outlined below. Foster

care cases received strength ratings in 86% (24/28) of cases compared to 57% (8/14) strength ratings for in-home cases.

Initial risk and safety assessments were thorough and complete for all cases reviewed.

Ongoing risk and safety assessments were thorough and complete for 76% (32/42) of cases reviewed. It was noted in many cases that information from collateral contacts who were aware of the family’s circumstances were included in the risk and safety assessment, adding to the

thoroughness of the assessment. Completion of assessments prior to case closing decisions was also noted as a strength in practice. Concerns for in-home cases specifically were seen when not all children in the home were assessed for risk and safety on an ongoing basis. In addition, there were cases in which children spent significant amounts of time in the homes of non-custodial parents and those environment were not routinely assessed for risk and safety concerns.

Of the 42 cases reviewed for Item 3, 17 identified safety or risk concerns. Of the 17, 14 (82%) were addressed appropriately by the agency.

The Structured Decision Making (SDM) Safety Assessment was introduced by policy in December 2021. An initial safety assessment is required to be completed for all investigations, assessments, Newborn Crisis Assessments and Out-of-Home investigation reports. If the initial safety determination was “unsafe” or “safe with plan”, a review or update of the safety assessment is required prior to case closure. Children’s Division is currently working with consultant partners to enhance the Risk Assessment tool to lead to the utilization of a SDM validated process to assess risk and drive prevention practice.

## Permanency Outcomes 1 and 2

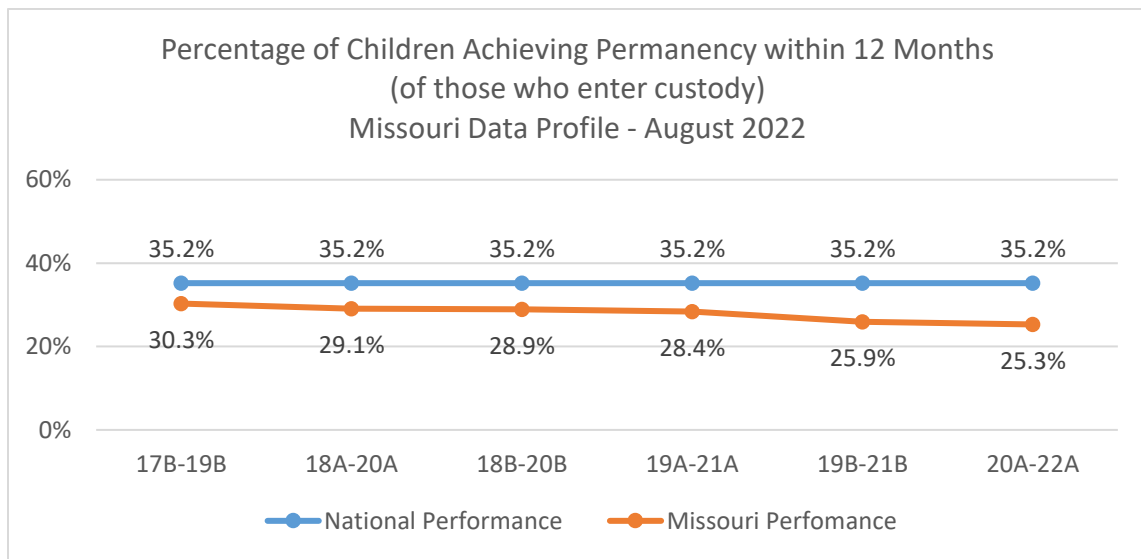
### Permanency Outcome 1: Children have permanency and stability in their living situations

Permanency Outcome 1 was not in substantial conformity during CFSR Round 3, as the outcome was found to be substantially achieved for only 23% (9/40) of the cases reviewed. In reviews conducted in September and December 2022 which utilized the Round 4 OSRI, Permanency Outcome 1 has been substantially achieved in 29% (8/28) of the cases reviewed.

Missouri's CFSR Round 3 Data Profile dated August 2022 indicated the Children's Division successfully met three of the five permanency indicators.

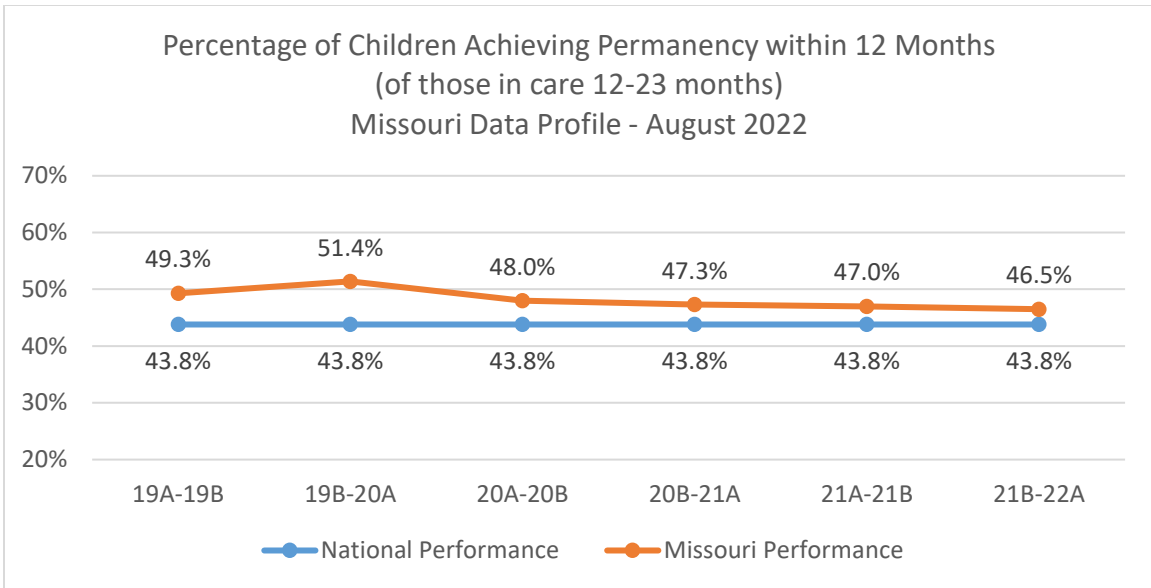
As noted in the chart below, the percentage of children reaching permanency within 12 months for children entering foster care in Missouri is 25.3%, well below the national performance of 35.2%. The national performance has not been met for the past several reporting periods and Missouri's performance continues to decline.

Children under age one make up 20.6% of the entries into foster care, but 16.3% of total exits. The rate of permanency within 12 months of entry is lowest for this age group (21.2%).



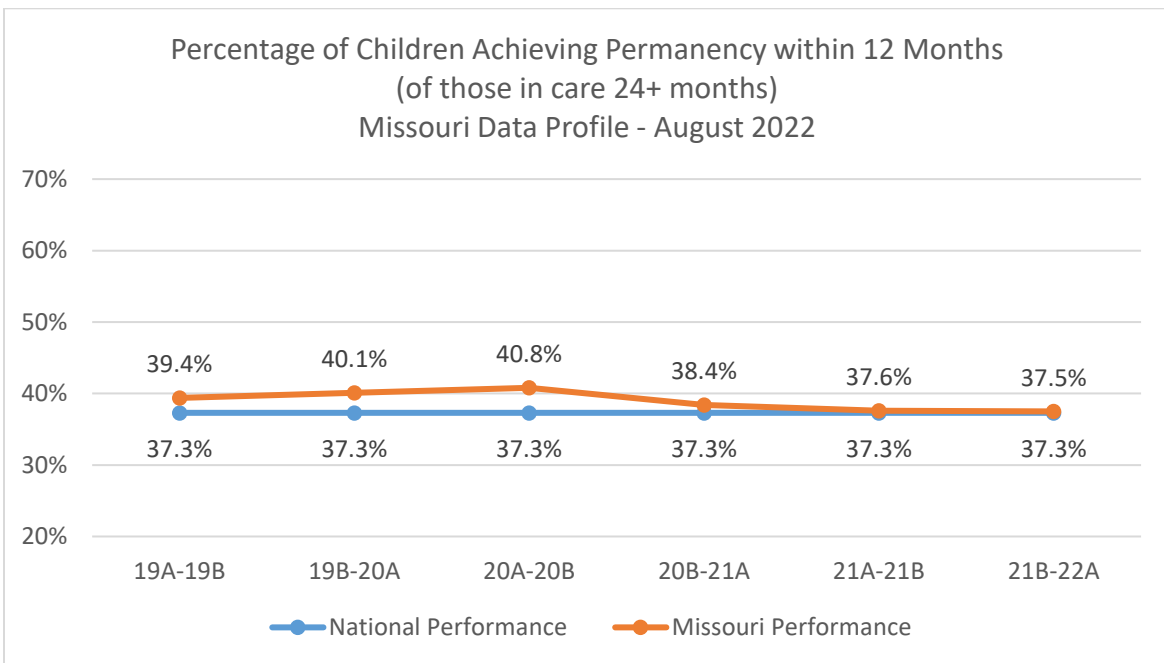
The next Data Profile measure is Permanency in 12 months for children who have been in custody between 12 and 23 months. Missouri's percentage of children in this category who achieved permanency in 12 months is 46.5%, which is above the national performance of 43.8%. While Missouri's performance has exceeded the national performance for the past several reporting periods, it is on a downward trend.

Permanency rates for children ages 11-16 do not meet national performance among children in care 12-23 months. The rate of permanency achieved for this age group is 41.1%. In contrast, permanency rates for younger children exceed national performance.



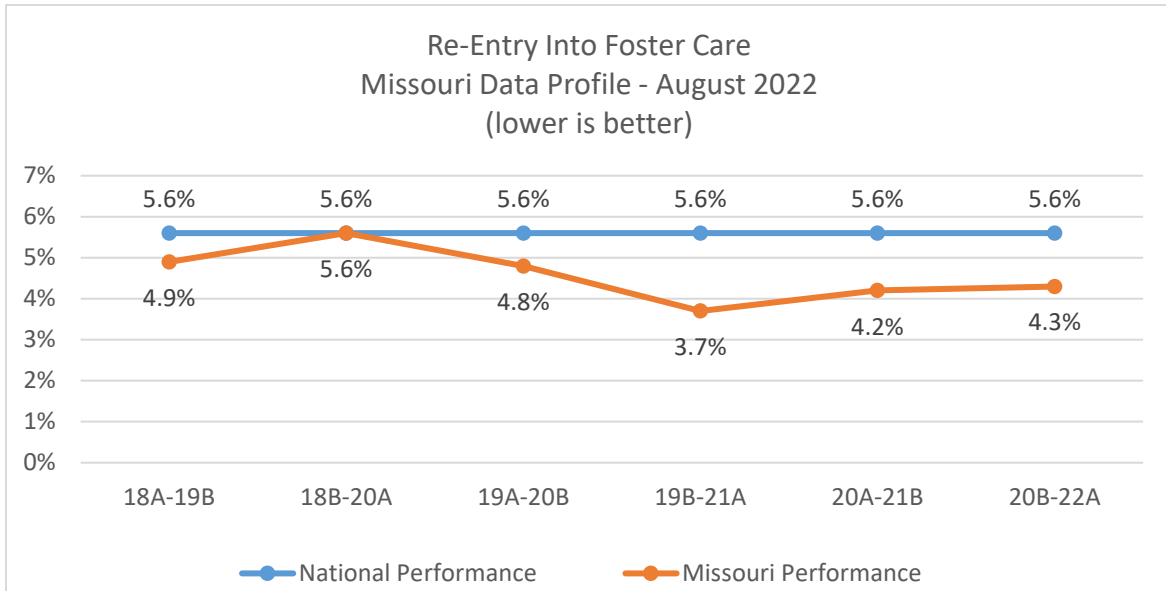
The third Data Profile measure of Permanency within 12 Months assesses permanency for children who have been in custody for 24 months or longer. The national performance for this measure is 37.3%. Missouri’s performance is only slightly higher at 35.5%, as noted in the chart below. As with the other Permanency within 12 Months measures, the percentage of children achieving permanency within 12 months for this cohort is also declining.

Similar to the information presented above, permanency rates for children ages 11-16 do not meet national performance among children in care 24+ months. The rate of permanency achieved for this age group is 27.3%. In contrast, permanency rates for younger children exceed national performance.



The fourth Data Profile permanency measure is Reentry to Foster Care. For this measure, a lower performance is desired. Missouri's reentry rate is 4.3% which is lower than the national performance of 5.6%. Missouri's performance has been below the national performance for most of the recent reporting periods.

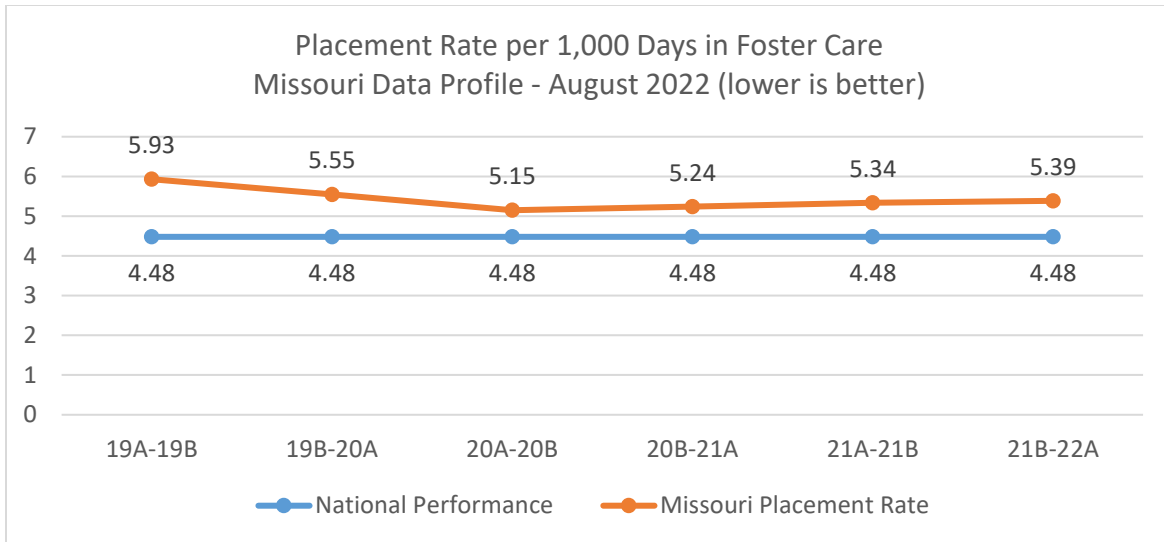
Children under one year of age are the only category that does not meet national performance. Re-entry for children under one is 6.6%.



The final Data Profile measure is Placement Stability and is measured by a rate of placement moves and a lower number is desired. Missouri's rate of placement moves as of August 2022 was 5.39, which is worse than the national performance of 4.48. The rate of placement moves has consistently been worse than the national performance for the past several reporting periods.

Children ages 11-16 have a placement rate that is almost double the national performance (8.00).





Item 4, Stability of Placement, was rated as an area needing improvement during CFSR Round 3, with 88% (35/40) of cases receiving strength ratings. Missouri was unable to reach the Program Improvement Plan monitoring goal established for Round 3, resulting in the assessment of federal penalties.

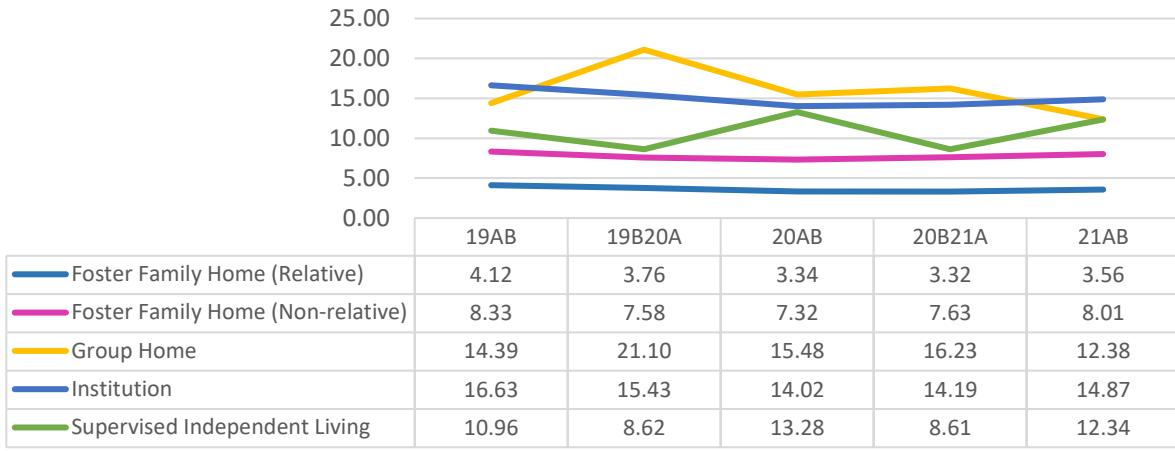
On-going internal CFSR case reviews since the Round 4 OSRI was published have shown strength ratings for 82% (23/28) of cases. More than half of the children reviewed (57%, 16/28) were in relative placements and all but one of the 16 received strength ratings. Of the five cases rated as area needing improvement:

- Four were foster home disruptions, and one was a relative placement disruption
- Three homes requested the child to be moved, but had asked for assistance with insufficient follow-up by the agency
- Two homes received services, but concerns were not able to be resolved, leading to unplanned moves for the children

The Placement Stability Data Profile measure was examined by the child’s most recent placement type. As indicated in the chart below, relative placements consistently resulted in the lowest rate of placement moves and performance better than the nation. All other placement types result in worse than the national performance.

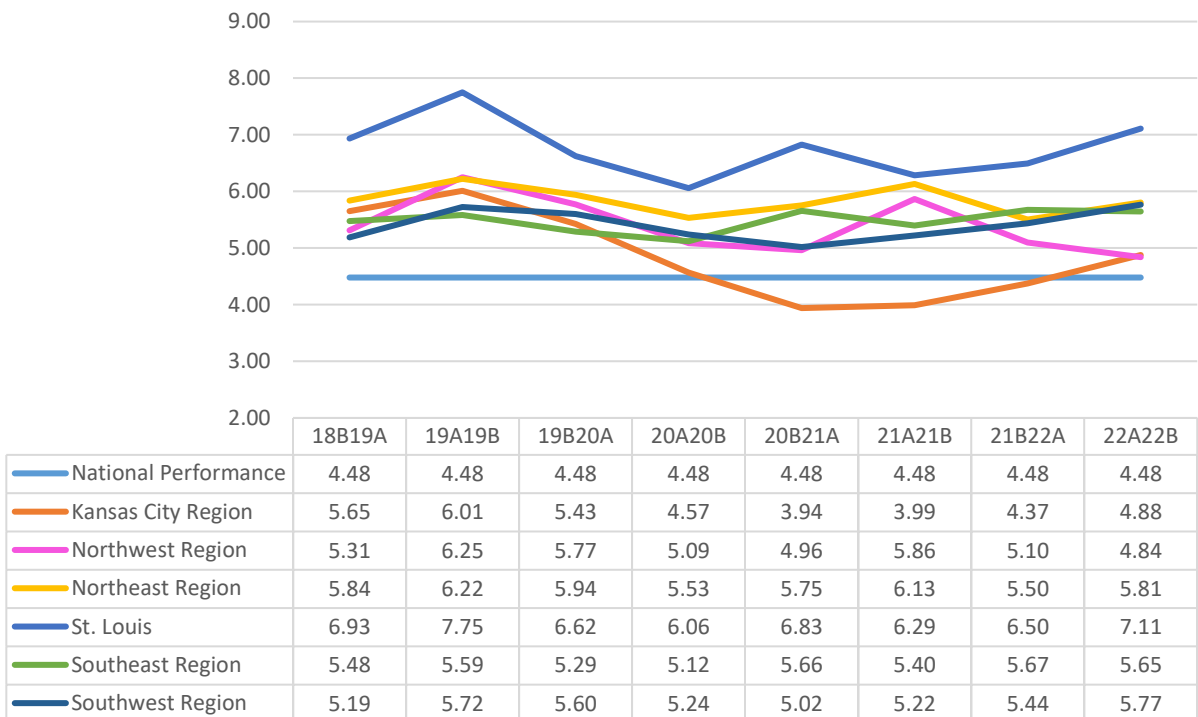
Missouri statute and policy prioritize placement with relatives. As of February 28, 2023, 52% (6,833/13,221) of children in foster care were placed with relatives, as defined in state statute.

Missouri Placement Stability Statewide Data Indicator  
 Observed Performance by Most Recent Placement Type  
 (A lower rate is desirable / National performance = 4.48)



The supplemental context data for this Data Profile measure was also examined to determine the rate of placement moves by region in Missouri. The Kansas City region is the only area that has exceeded the national performance during the past four years of reporting. However, with the most recent data, all regions' outcomes are worse than the national performance.

Missouri Data Profile - Placement Stability by Region  
 2018 - 2022



The data presented outlines that older children experience more placement moves than younger children and that relative placements are more stable than other placement types. Children's Division has identified the behavioral challenges of older children as a significant barrier to placement stability. There are efforts in place to engage with the Department of Mental Health and the Division of Youth Services to determine the best placement options and services to meet the needs of some of the older youth in the foster care population.

The Children's Division has also increased efforts to support relative placements in Missouri through the use of Kinship Navigator programming implemented by the Family Resource Centers throughout the state.

Item 5, Permanency Goal for the Child, was rated as an area needing improvement in CFSR Round 3, with 55% (22/40) of cases receiving strength ratings. Missouri was unable to reach the Program Improvement Plan monitoring goal established for Round 3, resulting in the assessment of federal penalties.

On-going internal CFSR case reviews since the Round 4 OSRI was published have shown strength ratings for 64% (18/28) of cases. Of the records reviewed, all case goals were identified in the case file. Permanency goals were established timely for 93% (26/28) of the children reviewed. The identified case goals were appropriate to the child's need for permanency and to the case circumstances for 71% (20/28) of the cases reviewed. Termination of Parental Rights petitions were acted upon in a timely manner for 75% (12/16) of the applicable cases.

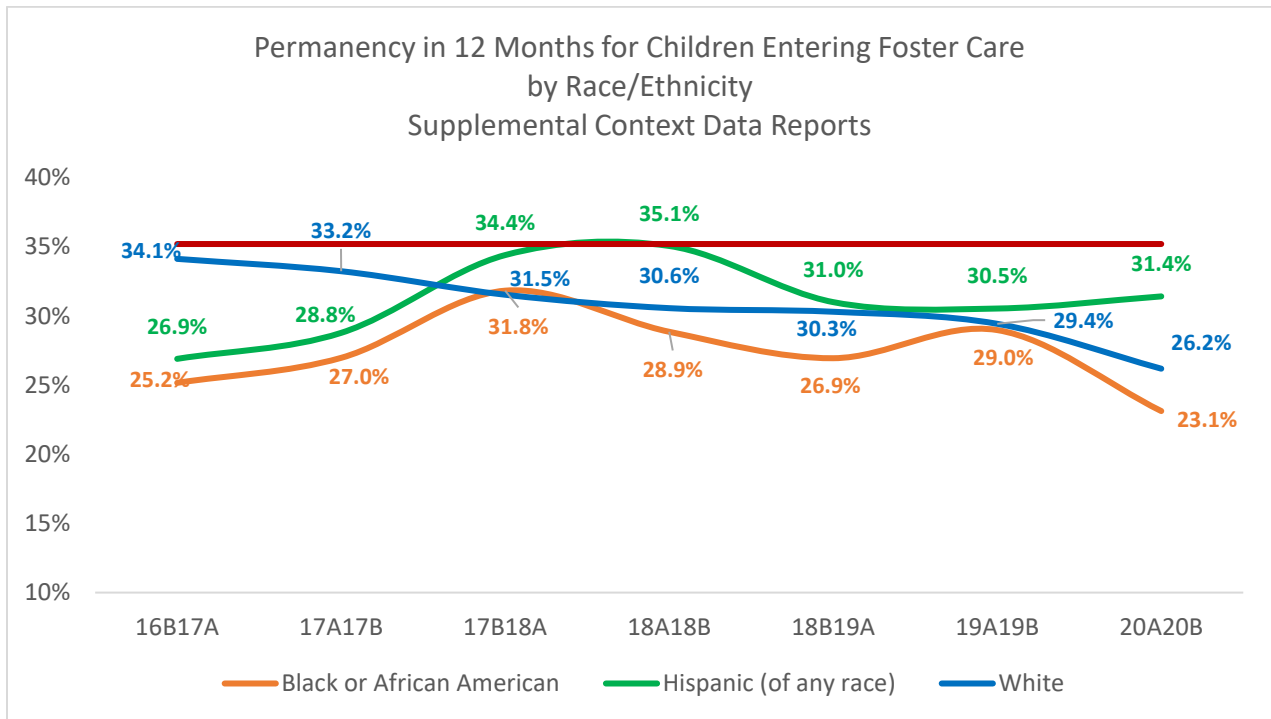
The use of concurrent planning in Missouri's child welfare system was addressed in the 2020-2024 Child and Family Services Plan. There was confusion among field staff about the required establishment of a concurrent goal. Concurrent planning policy was reviewed and revised to clarify that a concurrent goal is not required if the primary goal is something other than reunification. There were steps taken to ensure that the information being provided in Child Welfare Practice Training, the initial training received by new case management staff, was consistent with the wording changes to policy. A power point was also created and distributed to all circuits to use as curriculum for learning opportunities within their staff meetings.

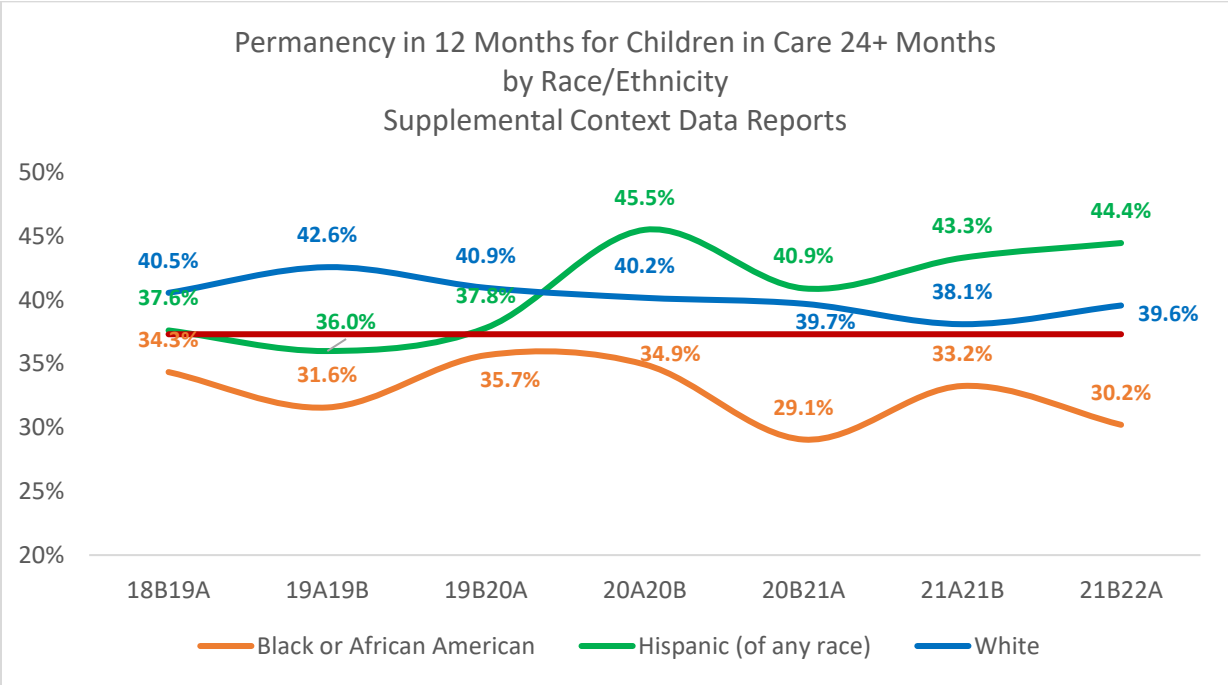
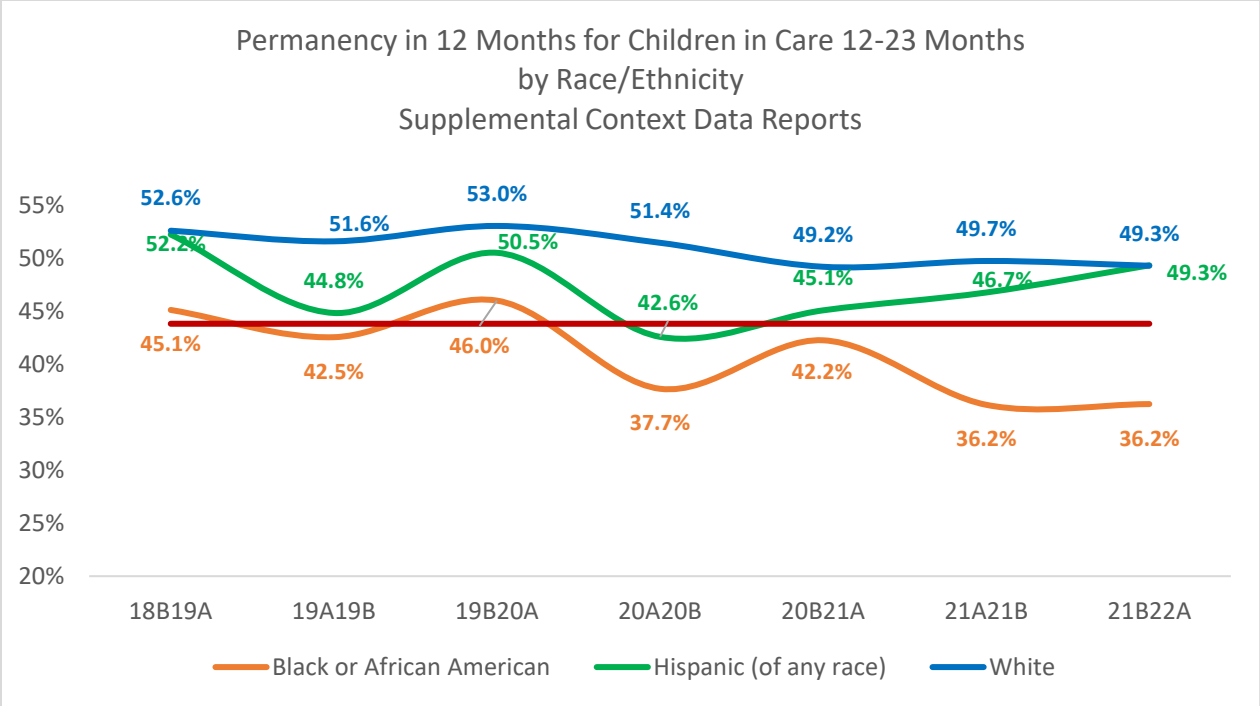
Item 6, Achieving Reunification, Guardianship, Adoption, or Another Planned Permanent Living Arrangement (APPLA), was determined to be an area needing improvement in CFSR Round 3. Ten of the 40 cases (25%) received strength ratings.

Ongoing internal CFSR case reviews since the release of the Round 4 OSRI have shown strength ratings for 39% (11/28) of the cases reviewed. One case had a goal of APPLA and it was determined that the youth was placed in an arrangement that was intended to last until independence was achieved, leading to a strength rating (100%, 1/1). Ten of the remaining 27 cases (37%) found that the agency and court had not made concerted efforts to achieve the child's permanency goal in a timely manner. Examining the case review results by case goal indicates that 41% (7/17) of children with an identified goal of reunification received strength

ratings. Likewise, cases of children with an identified primary or concurrent goal of adoption also received 41% (7/17) strength ratings. And, for cases of children with an identified primary or concurrent goal of guardianship, 36% (4/11) received strength ratings.

As noted above, the timeliness of permanency achievement has declined for all three of the Permanency within 12 Months Data Profile measures. Significant differences between the outcomes for Black or African American children when compared to white children or those of Hispanic heritage exist. For all measures, the rate of permanency achieved within 12 months is lowest for Black or African American children and is consistently worse than the national performance (red line in the charts below).





The Children’s Division has engaged with experts from the Capacity Building Center for States around racial disproportionality and disparity to begin to address this issue.

The Program Improvement Plan from CFSR Round 3 contained several strategies to help address timely permanency for children in Missouri’s child welfare system. The first was the

Permanency Attorney Initiative (PAI). Prior to CFSR Round 3, there were very limited attorney resources to represent agency staff in court. Attorneys within the Department of Social Service's Division of Legal Services were available on a referral basis, but did not have capacity to support Children's Division staff in the vast majority of scheduled court hearings. The PAI identified new full-time attorneys dedicated to representing Children's Division both in court and in the provision of legal advice as permanency recommendations were being discussed. Another PIP strategy from CFSR Round 3 included the development of the Partnership for Child Safety and Wellbeing (PCSW), a collaborative group between the state agency and court partners. The PCSW continues to meet and discuss efforts to improve the timeliness of permanency for children in Missouri.

During the CFSR Statewide Assessment Event, participants were asked to identify the largest barriers to achieving timely permanency Missouri. Participants in this session included representatives from the judiciary, Juvenile Officers, foster parents, attorneys who represent parents involved in the child welfare system, Children's Division and Foster Care Case Management leadership and field staff, Permanency Attorneys and Guardians ad Litem.

Barriers to achieving timely permanency were identified as follows:

- Caseworker turnover and high caseloads do not allow workers time to focus on their cases and families feel like they are starting over
- Communication among Family Support Team members is poor
- Trial Home Visits last a long time while waiting for custody orders to be completed
- Parents are asked to completed specific services, but they may not be available or accessible in their area
- Delays in orders and findings by the court
- Lack of documentation of services that have been provided to families can lead to delays in termination of parental rights
- Wide variance from circuit to circuit regarding services the state will fund
- Inconsistent practices across the state regarding parents' due process and right to legal representation
- There are more children with delinquency and mental health concerns entering foster care than ever before, bringing different challenges to permanency

Permanency Outcome 2: The continuity of family relationships and connections is preserved for children

Permanency Outcome 2 was not in substantial conformity during CFSR Round 3, as the outcome was found to be substantially achieved for 65% (26/40) of the cases reviewed. In reviews conducted in September and December 2022 which utilized the Round 4 OSRI, Permanency Outcome 2 has been substantially achieved in 43% (12/28) of the cases reviewed.

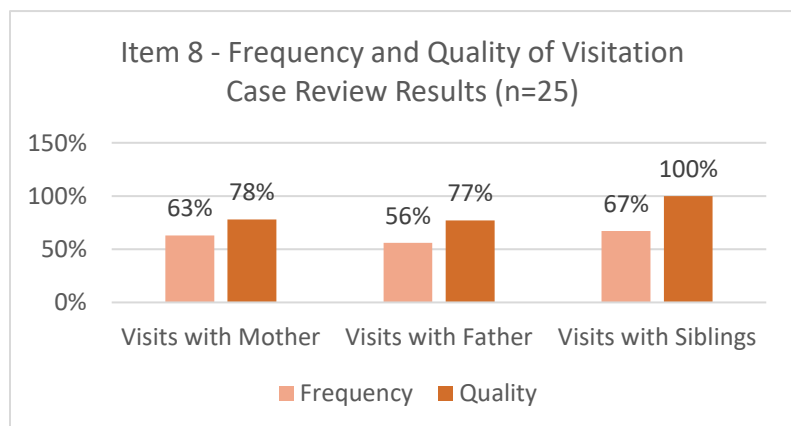
The chart below outlines the case review data for the 28 foster care cases that have been reviewed using the CFSR Round 4 OSRI.

CFSR Item		Strength	Area Needing Improvement	Not Applicable
Item 7	Placement With Siblings	77.78% n=14	22.22% n=4	n=10
Item 8	Visiting With Parents and Siblings in Foster Care	36% n=9	64% n=16	n=3
Item 9	Preserving Connections	71.43% n=20	28.57% n=8	n=0
Item 10	Relative Placement	77.78% n=21	22.22% n=6	n=1
Item 11	Relationship of Child in Care With Parents	37.5% n=9	62.5% n=15	n=4

Item 7, Placement with Siblings, was rated as a strength during CFSR Round 3, with 97% (32/33) of the applicable cases receiving strength ratings. As noted above, ongoing internal CFSR case reviews for Round 4 have rated 78% (14/18) of the cases as strengths for sibling placement. For the four cases that were rated as area needing improvement in the most recent internal CFSR case reviews, concerted efforts to place the children together were not made throughout the period under review.

Item 8, Visiting with Parents and Siblings in Foster Care, received an area needing improvement rating during CFSR Round 3 with 71% (25/35) of cases rated as strengths. All of the nine (100%, 9/9) applicable cases for sibling visitation determined that the frequency and quality of visitation between the siblings who are in foster care but placed separately was sufficient to preserve the continuity of the relationship. Visitation between the child and his/her mother led to strength ratings for 72% (23/32) of the applicable cases and visitation between the child and his/her father led to strength ratings for 70% (16/23) of the applicable cases.

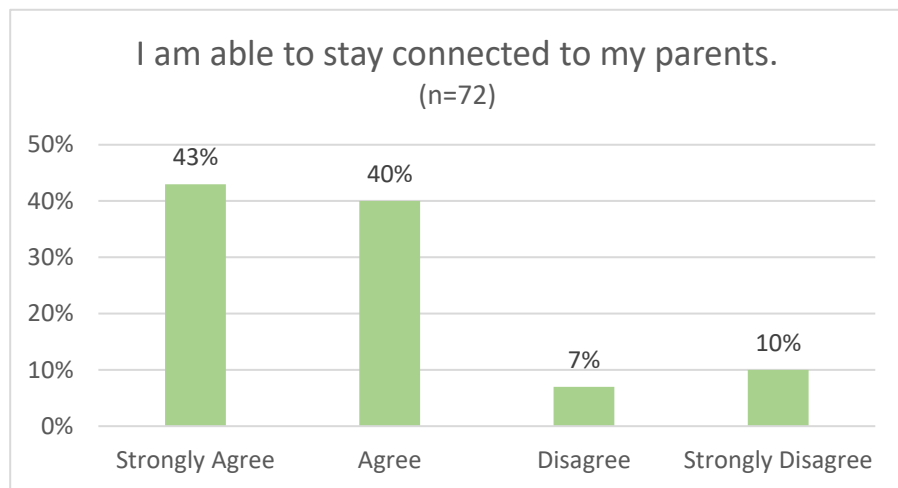
Ongoing internal CFSR case reviews since the release of the Round 4 OSRI have shown strength ratings for 36% (9/25) of the cases reviewed. As noted in the chart, the frequency of visitation between the child and his/her mother was determined to be sufficient for 63% (15/24) of cases and the quality of visitation was sufficient in 78% (14/18) of the cases reviewed. Visitation between the child and his/her father was determined to be of sufficient frequency in 56% (10/18) of cases and the quality of visitation was sufficient for 77% (10/13) of reviewed cases. Finally, visitation between the child and his/her siblings who were



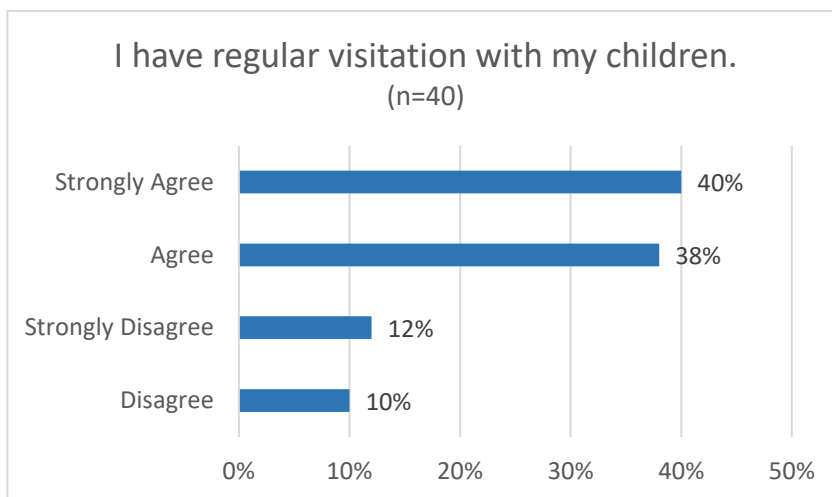
also in foster care was determined to be of sufficient frequency in 67% (6/9) of cases reviewed and all cases (100%, 8/8) were found to be of sufficient quality to preserve the continuity of the relationship.

The case review summaries indicated several reasons for area needing improvement ratings. Several cases had parents who were incarcerated and concerted efforts were not made to explore visitation options in these situations. Transportation issues were present in one case and there were no attempts by the agency to help resolve them. One case used virtual visitation between parents and children without exploring the possibility of in-person visitation, impacting the quality of the visits. And, several cases required the parents to produce clean drug screens before visitation was allowed, although there were no identified safety concerns to prevent visitation between the parents and the children.

In preparation for the CFSR Statewide Assessment Event in March 2023, surveys were distributed to foster care youth ages 12 and older and to parents whose children are in foster care. Surveys included questions related to visitation between parents and children.



Youth were asked to respond to the statement “I am able to stay connected to my parents”. Of the youth who responded, 83% (60/72) indicated that they strongly agreed or agreed with the statement.

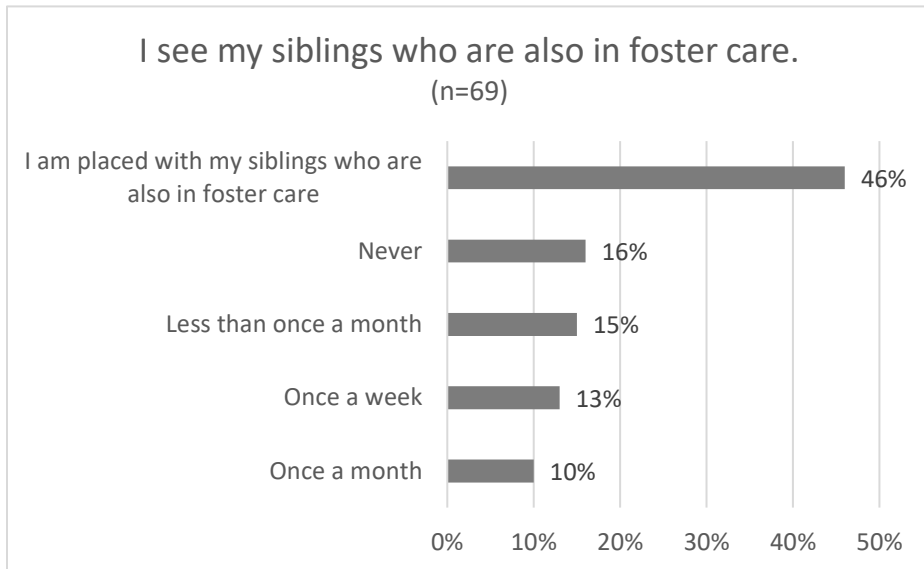


Similarly, surveys asked parents to respond to the statement “I have regular visitation with my children”. Of the parents who responded, 78% noted that they strongly agreed or agreed with the statement.

Youth were also asked to describe the frequency of which they see their siblings who are also in foster care.



Thirty-two (32) of the 69 (46%) youth whose responses were applicable to the question indicated that they are placed in the same setting with their siblings. Twenty-three percent (23%, 16/69) indicated that they see their siblings at least once a month and 31% (21/69) responded that they see their siblings less than once a month or never see their siblings who are also placed in foster care.



During the CFSR Statewide Assessment Event, participants were asked to answer polling questions in regards to parent and child visitation. The statement they were asked to respond to read “The child welfare system as a whole makes every effort to help parents and children visit on a regular basis”. Of the 17 attendees who responded to the poll, 10 of 17 (59%) agreed or strongly agreed. The remaining 41% (7/17) disagreed with the statement.

Participants were also asked to respond to this question by ranking the choices given: “If parents and children are not able to visit on a regular basis, whose decisions impact this the most?” Eighteen participants engaged in this poll. The following are the rankings in order by most impact to least impact:

1. The court
2. The case manger
3. The foster/relative caregiver
4. The parent
5. The children

A similar ranking question was also posed, this time asking “If siblings are not able to visit on a regular basis, whose decisions impact this the most?” Nineteen participants answered this question with the rankings in order by most impact to least impact:

1. The case manager
2. The foster/relative caregiver
3. The court
4. The children
5. The parents

Participants in this session included front-line supervisors and workers from the Children's Division and a Foster Care Case Management agency, foster parents, attorneys who represent children in foster care, Juvenile Office representatives, parents with lived experience, and youth in foster care, as well as Children's Division leadership.

Item 9, Preserving Connections, was determined to be an area needing improvement during CFSR Round 3 as 70% (28/40) of the cases reviewed received strength ratings. Internal CFSR case reviews were completed in September and December 2022 using the Round 4 OSRI. Of the 28 foster care cases reviewed, 71% (20/28) were considered to be strengths. Notable connections that were not maintained for the eight cases rated as area needing improvements include siblings who are not in foster care and other extended family. In some cases, relatives could not be approved for placement, but would be appropriate and safe for ongoing contact with the child. However, that contact was not maintained.

Item 10, Relative Placement, was determined to be an area needing improvement during CFSR Round 3 as 79% (31/39) of the cases reviewed received strength ratings. Internal CFSR case reviews were completed in September and December 2022 using the Round 4 OSRI. Of the 28 foster care cases reviewed, one was rated as not applicable as the child required a specialized placement to address treatment needs throughout the period under review. Of the remaining 27 children reviewed, 71% (21/27) were rated as strengths. Sixteen of the 27 applicable children were placed with relatives that were appropriate for the child's needs. For the remaining 11 children, maternal relatives were not identified, located, informed, and evaluated as appropriate for four children and paternal relatives were not identified, located, informed, and evaluated as needed for six children.

Item 11, Relationship of Child in Care with Parents, was rated as an area needing improvement during CFSR Round 3. Nineteen of the applicable 33 cases (58%), were rated as strengths. Thirty-two cases were applicable for mothers and 23 cases were applicable for fathers. Concerted efforts to promote, support and otherwise maintain a positive and nurturing relationship between the child and the mother were found for 63% of applicable cases (20/32) and concerted efforts to do the same for fathers were found for 61% of applicable cases (14/23).

Case reviews conducted internally using the Round 4 OSRI were completed in September and December 2022. Thirty-eight percent (38%, 9/24) were determined to be strength ratings. Twelve of the 24 cases applicable for the mothers were found to be strengths ratings (50%) and eight of the 18 records applicable for the fathers were rated as strengths (44%).

## Wellbeing Outcomes 1, 2, and 3

### Wellbeing Outcome 1: Families have enhanced capacity to provide for their children's needs

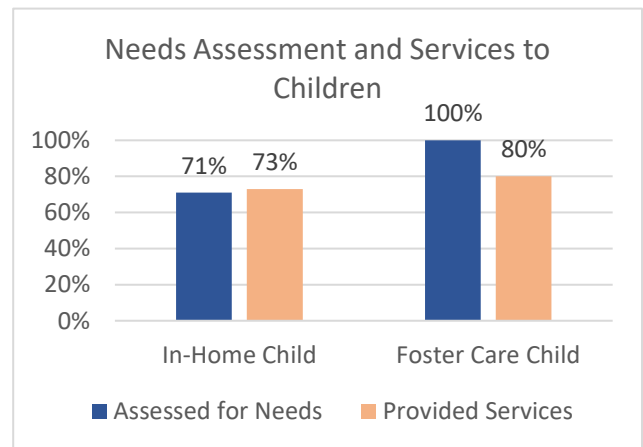
Wellbeing Outcome 1 was not in substantial conformity during CFSR Round 3, as the outcome was found to be substantially achieved for 37% (24/65) of the cases reviewed. In reviews conducted in September and December 2022 which utilized the Round 4 OSRI, Wellbeing Outcome 1 has been substantially achieved in 29% (12/42) of the cases reviewed.

The chart below outlines the case review data for the 42 cases that have been reviewed using the CFSR Round 4 OSRI.

CFSR Item		Strength	Area Needing Improvement	Not Applicable
Item 12	Needs and Services to Children, Parents and Foster Parents	33.33% n=14	66.67% n=28	n=0
Item 12A	Needs Assessment and Services to Children	76.19% n=32	23.81% n=10	n=0
Item 12B	Needs Assessment and Services to Parents	37.5% n=15	62.5% n=25	n=2
Item 12C	Needs Assessment and Services to Foster Parents	85.19% n=23	14.81% n=4	n=27
Item 13	Child and Family Involvement in Case Planning	60.98% n=25	39.02% n=16	n=1
Item 14	Caseworker Visits With Child	61.9% n=26	38.1% n=16	n=0
Item 15	Caseworker Visits With Parents	28.21% n=11	71.79% n=28	n=3

Item 12A, Needs and Services to Children, was rated as an area needing improvement during CFSR Round 3. Sixty-two percent (62%, 40/65) of cases were rated as strengths for this sub-item. The sub-item was rated as an area needing improvement in 65% of the foster care cases and 61% of the in-home cases that were reviewed in Round 3.

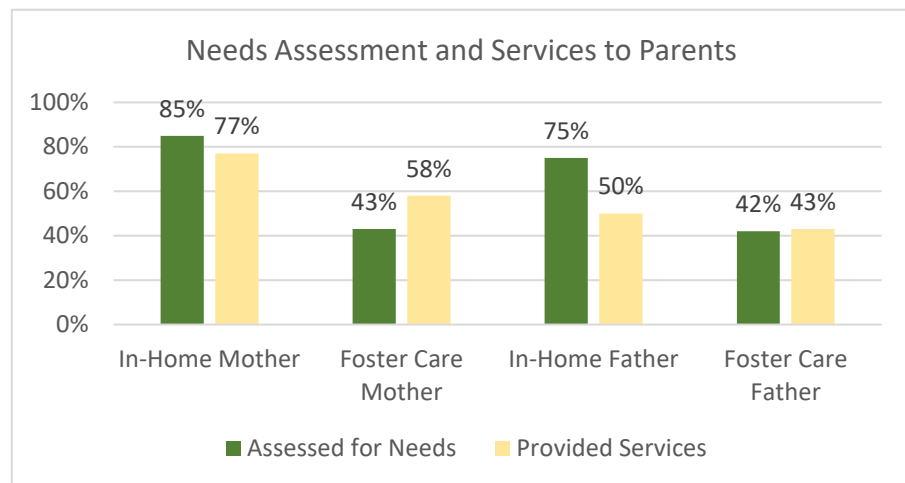
During September and December 2022, internal CFSR case reviews have been completed using the Round 4 OSRI. A total of 42 cases have been reviewed. As noted above, 76% of cases received a strength rating for sub-item 12A. In-home cases received strength ratings for 64% (9/14) of the reviews and foster care cases were rated as strengths in 82% (23/28) of the reviews. As noted in the chart, there were more consistent



assessment and provision of services to children in foster care than for children being served through in-home services cases.

Item 12B, Needs and Assessment of Services to Parents, was determined to be an area needing improvement during CFSR Round 3, with 43% (27/63) of the applicable cases receiving strength ratings. This sub-item was rated as a strength in 42% of the foster care cases and 48% of the in-home cases that were reviewed.

Internal CFSR case reviews were completed in September and December 2022 using the Round 4 OSRI. Of those cases, 38% (15/40) received strength ratings for sub-item 12B. In-home service cases were rated as strengths in 64% (9/14) of the reviews and foster care cases were rated as strengths in 27% (7/26) of the reviews. In contrast to needs and services provided to children, needs assessment and service provision to parents on in-home service cases were rated



higher than for parents whose children were in foster care. Service provision to address the identified needs of mothers occurred with more frequency than for fathers, regardless of case type.

Case reviews revealed a lack of concerted efforts to identify, locate, and/or engage parents as one of the main reasons cases were found to be areas needing improvement for sub-item 12B.

During the CFSR Statewide Assessment Event, participants were asked to discuss the reasons they felt needs assessment and service provision were more successful with parents of in-home services cases than parents with children in foster care. They felt that the relationship between the case manager and the parents of children in foster care is seen as more adversarial in nature and the relationship between the case manager and parents whose children remain in the home is seen as more cooperative and supportive.

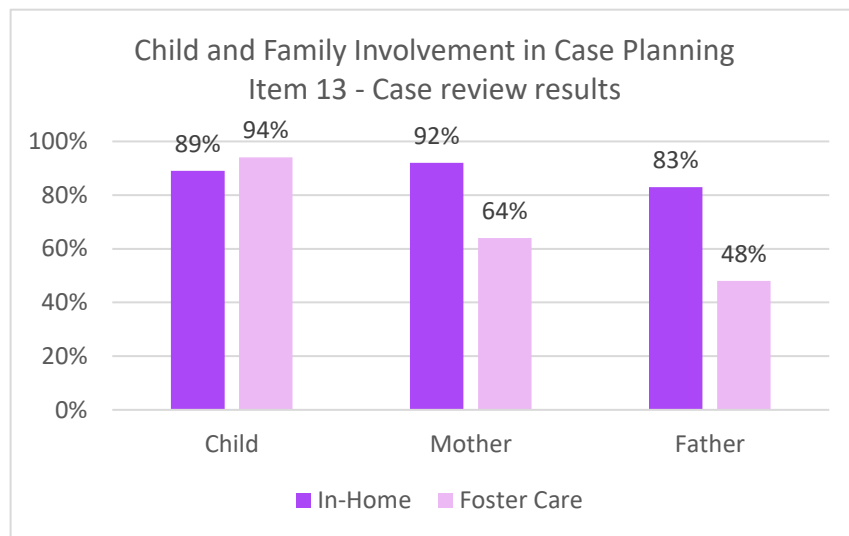
Participants in this session included foster care youth, parents with lived experience, service providers, Children’s Division field staff and leadership, Juvenile Officers, and attorneys who represent children in foster care.

Item 12C, Needs and Assessment of Services to Foster Parents, was also an area needing improvement during CFSR Round 3. Sixty-eight percent (68%, 27/40) of the foster care cases reviewed received strength ratings.

Internal CFSR reviews conducted using the Round 4 OSRI resulted in strength ratings for 85% (23/27) of the foster care cases reviewed. Foster parent needs were assessed as required for 24 of the 27 (89%) cases reviewed. Service needs were identified in 15 of the cases, with services provided to meet those needs in 11 cases (73%). The four cases that were found to be areas needing improvement for sub-item 12C were also rated as areas needing improvement on Item 4, stability of placement.

Item 13, Child and Family Involvement in Case Planning, was also determined to be an area needing improvement during CFSR Round 3, with 48% (31/64) of cases receiving strength ratings. This item was rated as a strength in 51% of the foster care cases and 48% of the in-home cases that were reviewed. Case planning occurred most frequently with mothers (68%), and children (64%), and least frequently with fathers (45%).

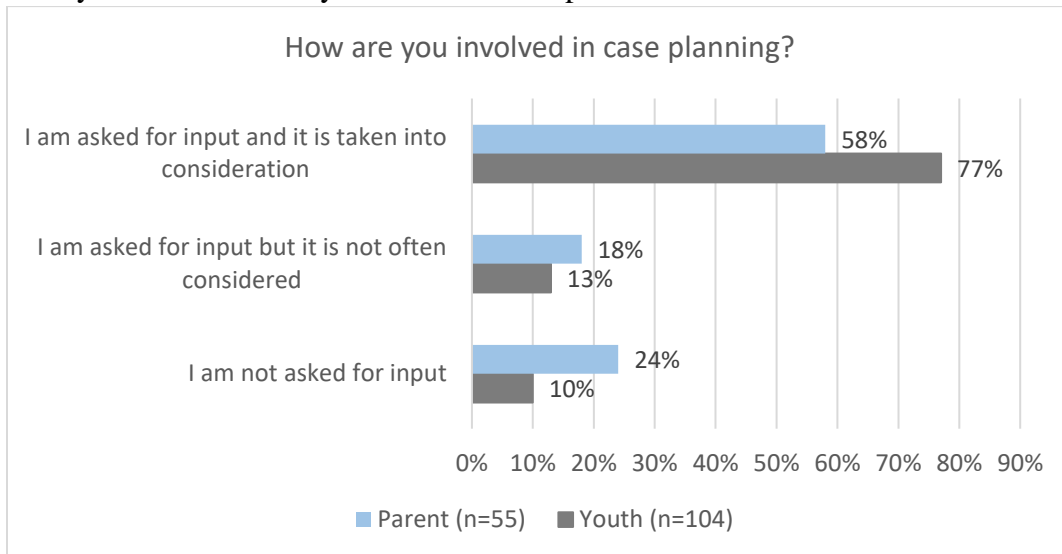
Most recently, case reviews were completed in September and December 2022, using the Round 4 OSRI. In these reviews, 59% (24/41) cases were rated as strengths. Involvement in case planning was rated as strengths in 48% (13/27) of foster care cases and 79% (11/14) of in-home cases. As noted in the chart, mothers and fathers were more frequently involved in case planning during in-home cases than in foster care cases. And, regardless of case type, mothers were more frequently involved in case planning than fathers.



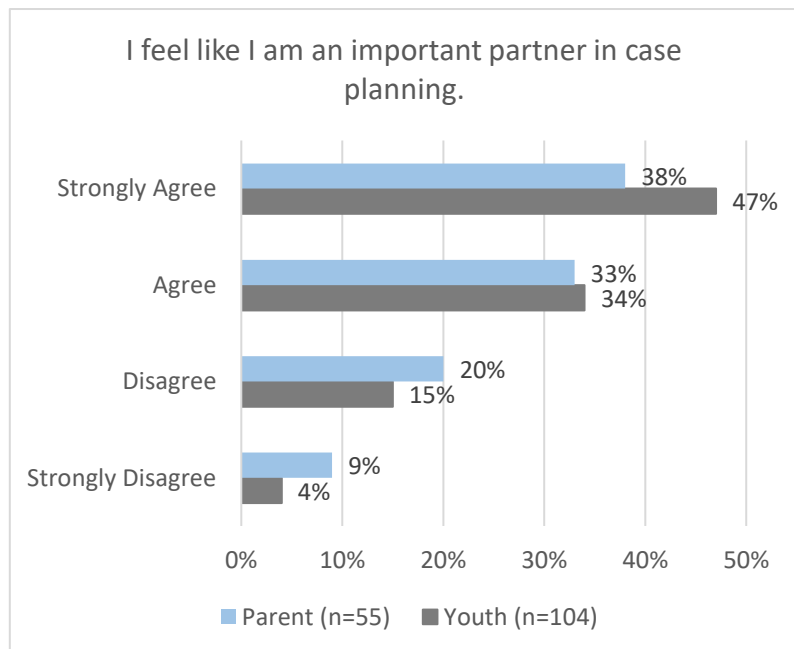
In preparation for the CFSR Statewide Assessment Event, surveys were distributed to youth in foster care ages 12 and older and to parents involved in open in-home services cases or parents whose children were in foster care. They were asked to respond to the question, “How are you involved in case planning?” The choices for response were:

- I am asked for input and it is taken into consideration
- I am asked for input but it is not often considered
- I am not asked for input

Seventy-seven percent (77%, 80/104) of youth indicated that they were asked for input and it is taken into consideration. Fifty-eight percent (58%, 32/55) of parents who responded to the survey indicated that they were asked for input and it is taken into consideration.



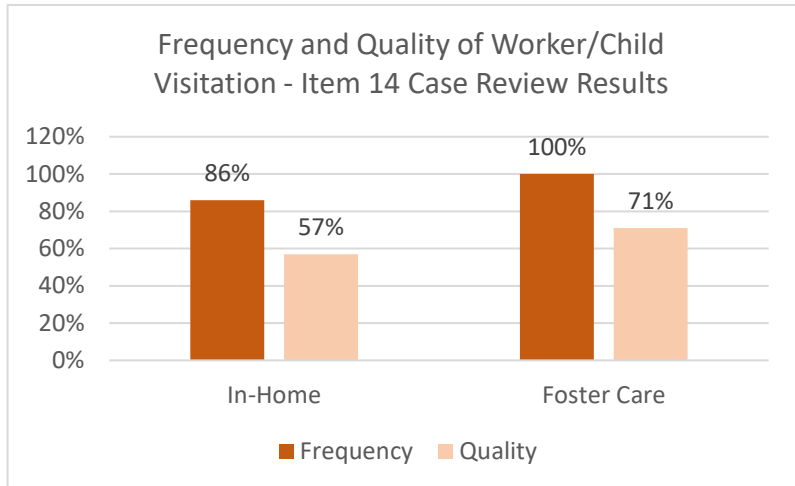
Survey recipients were also asked to respond to the following statement “I feel like I am an important partner in case planning”. Youth strongly agreed or agreed with the statement in 81% (84/104) of responses. Parents strongly agreed or agreed with the statement in 71% (39/55) of responses.



Item 14, Caseworker visits with Children, was determined to be an area needing improvement during CFSR Round 3 with 60% (39/65) of cases receiving strength ratings. For foster care cases, 73% of cases received strength ratings and 43% of in-home cases received strength ratings.

Internal CFSR reviews have occurred during September and December 2022 using the Round 4 OSRI. Sixty percent (60%, 25/42) of cases were rated as strengths. Foster care cases were rated as strengths in 68% (19/28) of the cases reviewed. In-home cases were rated as strengths in 43% (6/14) of the cases reviewed.

As noted in the chart, the quality of visits between the workers and children was rated significantly lower than the frequency of the visitation. The frequency of visitation was sufficient for 93% (39/42) of the cases reviewed. The quality of the visitation was sufficient for 67% (28/42) of the cases reviewed. The federal case review tool instructs that children over the age of infancy should be seen alone for at least a portion

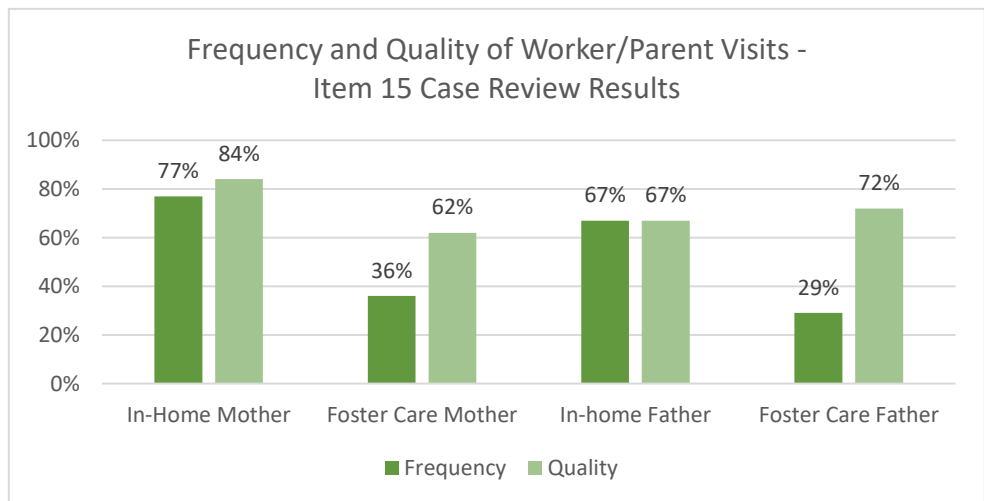


of every visit in order for quality to be assessed as sufficient, with limited exception. For many of the cases rated as areas needing improvement, there were visits in which the child was not seen individually.

Item 15, Caseworker Visits with Parents, was determined to be an area needing improvement during CFSR Round 3. Of the 61 cases applicable for this item, 43% were rated as strengths (26/61). Foster care cases were rated as strength in 39% of the cases and in-home cases were rated as strengths in 52% of the cases.

Internal CFSR case reviews were completed in September and December 2022 using the Round 4 OSRI. Of those cases, 28% (11/39) received strength ratings for caseworker visits with parents. In-home service cases were rated as strengths in 50% (7/14) of the reviews and foster care cases were rated as strengths in 16% (4/25) of the reviews.

For all case types, the frequency of visitation with mothers was determined to be sufficient for 50% (19/38) of cases reviewed and the quality of visitation was determined to be sufficient in 71% (24/34) of cases. The frequency of visitation with fathers was



deemed sufficient for 42% (14/33) of cases and the quality of visitation was sufficient for 64% (18/28) of cases. As evidenced in the chart, the frequency of visitation for parents of children in foster care is significantly lower than for parents being served through in-home service cases.

The participants in this CFSR Statewide Assessment Event session were asked to discuss the reasons they felt engagement with fathers scored lower than engagement with mothers when considering involvement in case planning and visitation with workers. Their responses included the following:

- Mothers are typically the hands-on parent
- Fathers may not engage because pride gets in the way and they do not want to say they might need help
- There are typically more female caseworkers and fathers may not feel represented
- Court can be a barrier if paternity is not legally established
- If fathers are not involved from the beginning of the case, they can be forgotten

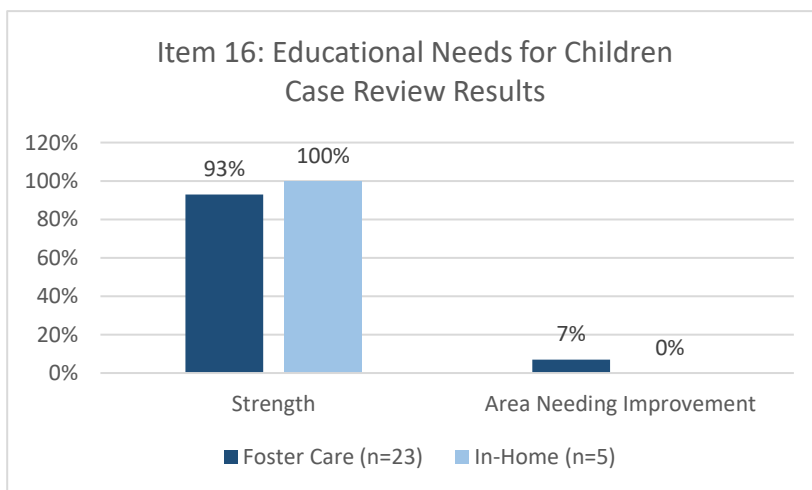
Barriers to establishing regular visitation between workers and parents were also identified:

- Turnover causes parents to retell their story multiple times and it is difficult for them to keep up with who they should be talking to
- Workers have difficulties finding parents
- High caseloads cause competing priorities for workers
- Parents with warrants may be hesitant to reach out or engage with workers

Wellbeing Outcome 2: Children receive appropriate services to meet their educational needs

Wellbeing Outcome 2 includes only one item and it was not in substantial conformity with federal requirements during CFSR Round 3. Eighty-three percent (83%, 35/42) of cases reviewed for Item 16 were rated as strengths. Foster care cases that were applicable for Item 16 were rated as strengths in 85% of the reviews. In-home cases that were applicable for Item 16 were rated as strengths in 86% of the reviews.

Internal CFSR case reviews were completed in September and December 2022 utilizing the Round 4 OSRI. Ninety-three percent (93%, 26/28) of the cases reviewed were rated as strengths. For foster care cases that were reviewed, 91% (21/23) received strength ratings. For in-home cases that were reviewed, all cases that were applicable for Item 16 were rated as strengths (100%, 5/5).



For in-home cases that were reviewed, all cases that were applicable for Item 16 were rated as strengths (100%, 5/5).

All children reviewed received thorough assessments of their educational needs. The chart below notes the needs that were assessed and the services that were provided to address those needs.



Educational Needs	Services Pursued
Communication delays	Speech therapy
Behavior challenges in school setting	Day treatment school with group and individual therapies
Consistent attendance	Transportation assistance
Performance below grade level	Tutoring, specialized classroom setting
Post high school plans	Assistance with college applications and college visits

During the CFSR Statewide Assessment Event session that focused on educational needs and services, participants clearly identified several early childhood services that are available throughout the state (Early Head Start, Parents as Teachers, and Head Start). However, the participants also discussed the lack of consistent services that are available for school-age children. They noted that occupational and physical therapies are not readily available in every school. Some schools struggle to schedule Individual Educational Plan (IEP) meetings timely, which can cause delays in educational services for children.

The group of participants, which included relative and foster parents; service providers; youth with lived experience; Children’s Division workers, supervisors, and administrators; and partner agency representatives, also mentioned the frequent placement moves that some children in foster care experience impacts their education, especially when the moves occur between school districts.

Wellbeing Outcome 3: Children receive adequate services to meet their physical and mental health needs

Wellbeing Outcome 3 was not in substantial conformity during CFSR Round 3, as the outcome was found to be substantially achieved for 58% (35/60) of the cases reviewed. In reviews conducted in September and December 2022 which utilized the Round 4 OSRI, Wellbeing Outcome 3 has been determined to be substantially achieved in 53% (20/38) of the cases reviewed.

Item 17, Physical Health of the Child, was determined to be an area needing improvement during CFSR Round 3, with 66% (33/50) of the cases receiving strengths ratings. Strengths ratings were received for 63% of foster care cases and 78% of in-home cases.

During internal CFSR case reviews completed in 2022 using the Round 4 OSRI, 62% of cases were rated strengths for physical health of the child. Sixty-eight percent (68%, 19/28) of the foster care cases received strength ratings and 33% (2/6) of the in-home cases that were applicable for Item 17 were rated as strengths.

For foster care cases, the area needing improvement ratings were primarily because routine physical or dental preventive exams were not provided according to the periodicity schedule outlined in Children's Division policy. For the in-home cases that were applicable for Item 17, the area needing improvement ratings were assigned because the reason for case opening was related to physical concerns and ongoing assessments, even informally, were not completed.

Item 18, Mental/Behavioral Health of the Child, was rated as an area needing improvement during CFSR Round 3 because 72% (33/46) of the applicable cases were rated as strengths. Strength ratings were received for 69% of foster care cases and 76% of in-home cases.

Internal CFSR case reviews were completed in September and December 2022 using the Round 4 OSRI. Of the 42 cases reviewed, 27 were applicable for Item 18. Seventy-four percent (74%, 20/27) received strengths ratings. Foster care cases were rated as strengths in 74% (14/19) of the reviews and 75% (6/8) of the in-home cases received strength ratings.

Area Needing Improvement ratings for mental and behavioral health were due to:

- Waiting lists for play therapy and individual therapy
- No assessment for grief and loss due to death of a sibling and a parent
- Autism testing and services not provided
- No individual or family therapy provided

## Section IV: Assessment of Systemic Factors

### **Item 19 – Statewide Information System**

How well is the statewide information system functioning statewide to ensure that, at a minimum, the state can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care?

The Statewide Information System was found to be in substantial conformity with federal requirements during CFSR Round 3 conducted in July 2017. Missouri believes that this item continues to be in substantial conformity.

The state operates a statewide information system known as the Family and Children Electronic System (FACES). The system is utilized for all children in foster care; child abuse and neglect reports; and families enrolled in preventive services. FACES identifies the status, demographic characteristics, location of the child's placement, and permanency goals of every child in foster care. Staff update the electronic case record in FACES to capture the required information for federal reporting and best practice. Policy states that the case manager should record any placement change in FACES within 24 hours of the placement. All other foster care activities should be recorded at least every 30 days. Supervisory staff are responsible for monitoring the timeliness of data entry.

The custody status of every child in foster care is recorded on the Court Information and Legal Status Information screens in FACES. This includes the child's foster care begin date and the date the child achieves permanency, if no longer in foster care. As children leave foster care, the FACES system identifies their exit status. If children proceed to final adoption or legal guardianship arrangements that include subsidy, the case remains open, but the change in legal status and the date of the change is clearly identified. For children who exit foster care and custody is returned to the parent, or the youth reaches independence, the case is closed in the system and the exit date is recorded. For all children exiting foster care, their legal status history is maintained in the FACES system to provide an historical picture of all foster care stays.

When a child is placed in foster care, edits in FACES require the worker to enter demographic information and placement location. A case cannot be opened without this information, and policy requires the case to be opened in the system within 24 hours of the child's removal from the home.

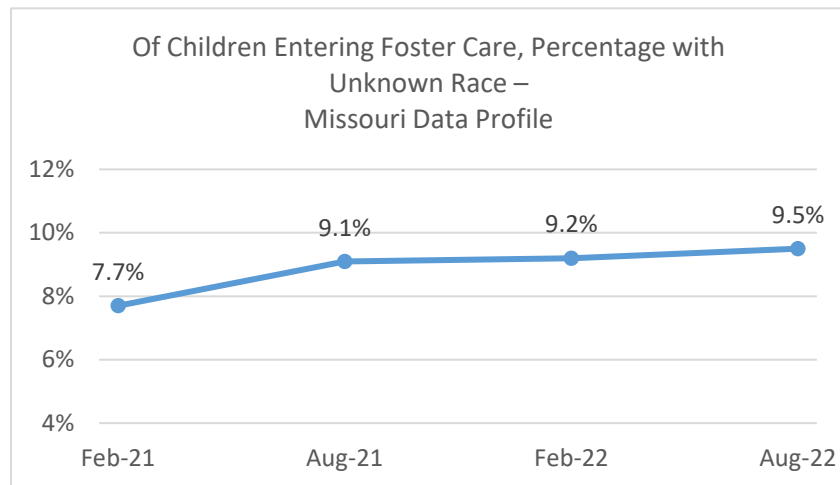
All foster care placements entered into FACES are tied to the financial and licensing portions of the system. This ensures placements are valid and licensed, and that appropriate payments are issued. FACES also allows for temporary placements to be identified, capturing short-term placements, such as hospitalizations, when it is anticipated that the child will return to the original placement.

Permanency goals for every child in foster care are captured on the Family Support Team Screen in FACES. This screen allows a primary and a concurrent goal to be identified. The reunification and/or permanency resource can also be named on this screen.

When a child becomes known to the Children’s Division, a Departmental Client Number (DCN) is assigned in the Department of Social Services’ common area. This number follows the child throughout any service provided by the Department of Social Services (DSS), including the Children’s Division. In addition to the DCN, the child’s date of birth, race, and gender is entered into the common area and subsequently populated into the FACES system. FACES allows staff to select “unable to determine” race in addition to another known race, as required for National Youth in Transition Database (NYTD) reporting. In addition, FACES allows a client to decline to report their race if they wish to do so.

As noted in the chart below, the percentage of children entering foster care with race documented as unknown has increased over the past four reporting periods, but remains below 10%.

According to Missouri’s federal data profile provided in August 2022, 9.5% (607/6,380) of



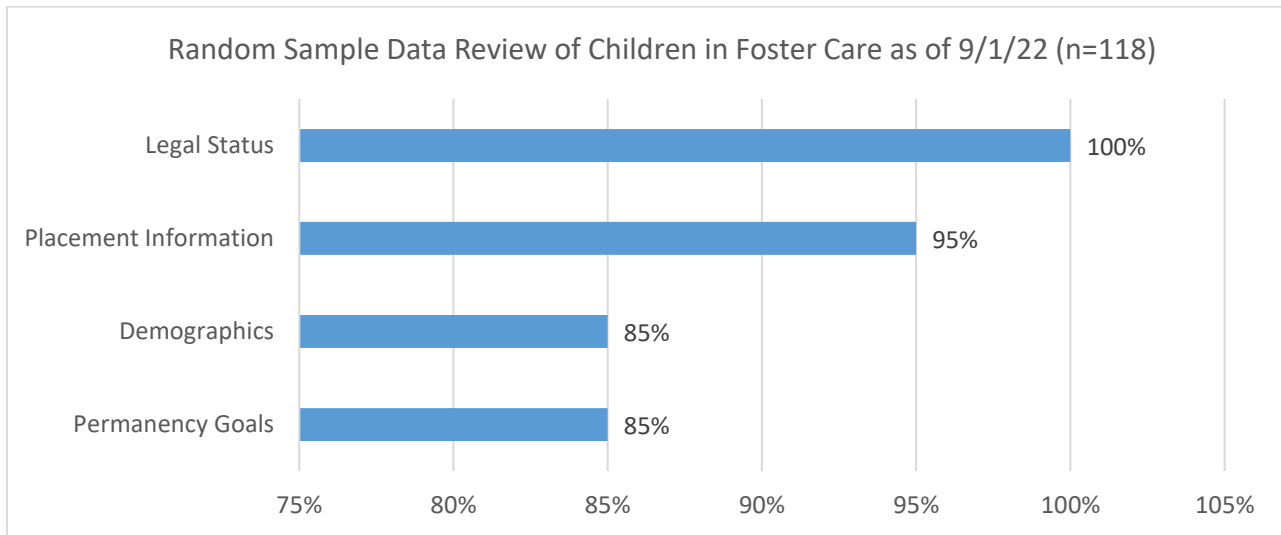
children entering foster care were recorded as unknown race. When a child is born in Missouri, a DCN is assigned at the time the birth certificate is filed. The child’s race is also identified at DCN assignment. As noted above, the DCN is stored in an area common to all divisions of the Department of Social Services. The FACES system was changed several years

ago to allow race to be multi-selected, encouraging more data specificity. This change removed the “two or more races” option. However, the common area was not updated to accommodate the change. As a result, if a child is identified as “multi-racial” in the common area, the system mapping does not communicate with the FACES changes and the child’s race is captured as “unable to determine”. System changes are in process within the DSS common area to resolve the issue.

Additional data sources were utilized to further evaluate the functioning of this item. Specifically, a random sample of 118 cases was selected to determine if legal status, placement information, demographic information, and permanency goals were accurate in comparison to foster parent and case manager report. A survey among case managers was also used to determine whether they agree with the statement that information is current and accurate in FACES.

In September of 2022, members of the QAS staff completed a data accuracy review of a random sample of children in foster care on September 1, 2022 (118/13,659). Cases were selected for

review using a randomization feature within the FACES system. This feature was created in FACES, and subsequently approved by the Children’s Bureau, to aid in case sampling for CFSR Round 3 case reviews. Data elements reviewed by QAS staff included the child’s legal status, date of birth, race, Hispanic heritage, gender, placement information, and permanency goal. QAS staff spoke with foster parents and/or case managers to verify the information recorded in FACES was accurate as of September 1, 2022.



The legal status of all children reviewed was recorded correctly in the FACES system (118/118 – 100%).

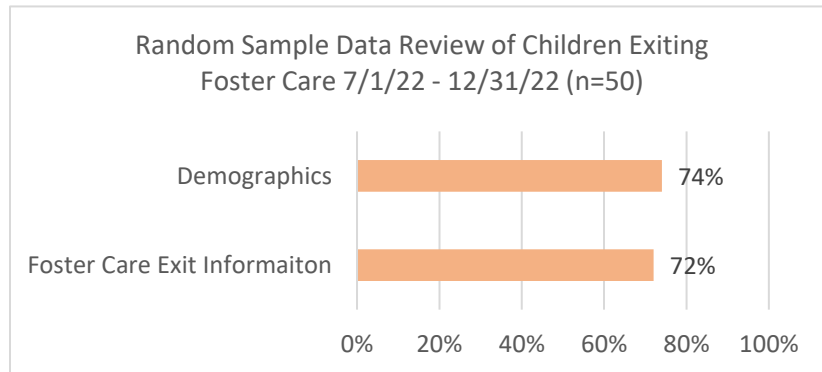
Placement information was accurate for 95% of children reviewed. The placement for one child was not recorded correctly (117/118 – 99%). For two children, the address of the placement was not correct (116/118 – 98%). And for four children, the phone number for the placement provider had not been updated (114/118 – 97%).

Demographic information was accurate for 85% of children reviewed (100/118). Gender and date of birth were correctly identified in the system for all children (118/118 – 100%). Race was captured accurately for 89% of children (105/118). Seven children were categorized as unable to determine race and another six children were identified as white, but should have been identified as two or more races. Five of the seven children categorized as unable to determine race were ages three or younger at the time of the review. They were young enough that their racial information would have been impacted by the DCN common area issues previously described. Hispanic heritage was accurate for 91% of children reviewed (107/118). Of the 18 children whose demographic information was inaccurate, six overlapped and were inaccurate for both race and Hispanic heritage.

Permanency goals were correctly identified for 85% of children reviewed, as well (100/118). The child’s primary goal was correct for 91% of cases reviewed (107/118). The concurrent goal was accurate for 88% of children reviewed (104/118). Of the 18 children whose permanency goals were inaccurate, six overlapped and were inaccurate for both the primary goal and the concurrent goal.

Likewise, a random sample of children who exited foster care between July 1, 2022 and December 31, 2022 was selected for a similar review during the month of April 2023 (50/3,279). Children were randomly selected using the RAND formula in Excel. Data elements reviewed by QAS staff included the child’s date of birth, race, Hispanic heritage, gender, and exit date and type. QAS staff spoke with foster parents and/or case managers to verify the demographic information recorded in FACES was accurate and referenced court orders to verify exit date and type.

For the exit cohort of children, demographic information was accurate for 74% of children reviewed (37/50). Gender and date of birth were correctly identified in the system for all children (100%, 50/50). Race was captured accurately for 78% of



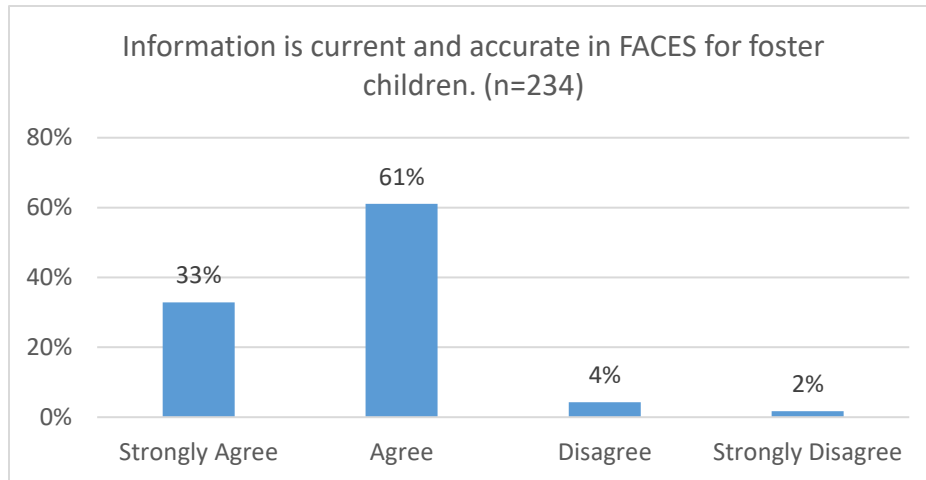
children (39/50). Six children were categorized as unable to determine race and another five children were identified as a single race, but should have been identified as two or more races. Hispanic heritage was accurate for 82% of children reviewed (41/50). Of the 13 children whose demographic information was inaccurate, six overlapped and were inaccurate for both race and Hispanic heritage.

The foster care exit information was accurate for 72% (36/50) children reviewed. The exit type was correct for all children (100%, 50/50). The exit date matched the court ordered date for 72% of children (36/50). The following table describes the date inaccuracies in greater detail.

Date Discrepancy	Number of Children
Less than 8 days	6
Between 8 and 15 days	5
Between 16 and 30 days	0
Between 31 and 60 days	2
More than 60 days	1

Children’s Division plans to continue these types of data accuracy reviews on an annual basis moving forward.

Another avenue for data collection that informs Item 19 was through survey information from case managers and specialists who work in the field. For a description of the survey distribution process, please refer to the “Description of Stakeholder Involvement in the Statewide Assessment Process” section of this report. Two hundred thirty-four (234) responded to this survey question: “The following pieces of information are current and accurate in FACES for the foster children that I case manage: demographic information (date of birth, race, sex, ethnicity), placement information, and permanency goals”.



Ninety-four percent (94%) of the respondents indicated that they strongly agreed or agreed with the statement (220/234).

During the CFSR Statewide Assessment Event session covering the Statewide Information System, attendees were asked to rank the following options in order from greatest impact (1) on data accuracy to least impact (8) on data accuracy. Thirteen people attended this session and included Children’s Division front line staff, staff from the Quality Assurance System and FACES Units, and Foster Care Case Management staff and supervisors. The results of the poll are as follows:

1. I don’t have enough time to complete data entry.
2. Case information is lost due to case transfers/worker turnover.
3. There are specific ways data must be entered to “count”.
4. Navigation within FACES can be complicated and/or is not intuitive.
5. FACES isn’t easy to use when working in the field.
6. I have difficulties signing into FACES while working remotely.
7. There is not enough time to verify the information is accurate.
8. FACES is not available when I need it (it is off-line).

Data is reviewed for errors prior to the federal AFCARS submission every six months. Each AFCARS file is exported into an excel spreadsheet allowing for all data fields to be reviewed for inconsistencies. The data submitted to AFCARS is pulled directly from the data entered in the FACES system. For each of the past four federal data profile reporting periods, there have been no data quality concerns with the AFCARS information as provided.

Data mining and data clean-up efforts are routinely conducted through oversight and follow up by members of the Quality Assurance System (QAS). The need for data clean-up can be brought to the attention of the QAS staff in multiple ways. Prior to each six-month AFCARS submission, the data are reviewed and if inaccuracies are noted, there is a request for follow-up. The DSS Research and Evaluation Unit is responsible for data extraction from FACES. If members of that unit notice oddities in the data, they will refer questions to the QAS staff for research of the issue. In addition, the QAS unit is provided a variety of reports from the Research and Evaluation Unit on a monthly basis. These reports are reviewed for consistency at least quarterly,

as well. Recent examples of data clean-up resulting from the data quality checks just described, include identification and correction of foster care children who do not have an established permanency goal and have been in foster care for more than 30 days. Youth under age 16 with a permanency goal of Another Planned Permanent Living Arrangement (APPLA) is another example of a data clean-up effort that has occurred. Children on trial home visits lasting longer than 180 days are also routinely flagged for follow-up.

Furthermore, QAS staff use a monthly data file received from the DSS Research and Evaluation Unit that includes child legal status, demographics, placement location, and goals. This data is shared with supervisory staff on a monthly basis, and an area for data review is highlighted each month. Some examples include ensuring current educational information is added at the beginning of each school year and that court information is entered on a consistent basis. If there is missing information, it can be highlighted for further review and discussion.

As CFSR case reviews are completed, if data accuracy issues are noted by the reviewer, they have permission to inform the case manager and/or supervisor of the inaccuracy. Foster Care Case Management (FCCM) agency staff also complete data accuracy reviews at case closure, or prior to the case being returned to the Children's Division, to ensure the child's record is up-to-date following their involvement with the child and family. The Children's Division staff who oversee the FCCM contract also complete a data accuracy review in FACES prior to case transfers between the Children's Division and FCCM agency.

Based on the information presented above, Missouri asserts that Item 19, Statewide Information System, is in substantial conformity with federal regulations. The review of system accuracy and worker/specialist survey results indicate that the vast majority of children in foster care, or who have left foster care in the past 12 months, have accurate demographic information, placement information, and permanency goals. The statewide information system has capacity to track foster care begin and end dates, as well as the legal status of all foster care children, as well.



## **CASE REVIEW SYSTEM**

### **Item 20 – Written Case Plan**

How well is the case review system functioning statewide to ensure that each child has a written case plan that is developed jointly with the child’s parent(s) and includes the required provisions?

During CFSR Round 3, Missouri asserted that this item was an area needing improvement. The statewide assessment showed that efforts were needed to ensure that all children had written case plans that contained all required elements. Parent engagement in case planning was also found to be a need. Missouri believes that Item 20 continues to be an Area Needing Improvement for CFSR Round 4.

As a result of the CFSR Round 3 findings, Missouri has undergone a complete redesign of information gathering, engagement, and planning with families, including how safety threats are identified and verbalized to families, the family support team, and the courts. This model, called the Alternative Care Missouri Model, was implemented in August 2021.

#### *Family Assessment*

After a child enters foster care, there is a 30-day assessment period. During that assessment period, the case manager assigned to the family will begin engaging the family and corresponding with the Family Support Team. The case manager, along with the family and support team, will assess the dynamics of the family and the reason(s) the child entered foster care through completion of an Initial Family Assessment. During the initial family assessment period, the assigned case manager will meet with the family as necessary to gather a full picture of the family. Completion of a genogram, documentation of a variety of cultural aspects of the family, and discussion of existing safety within the family and their safety network are tools within the Initial Family Assessment package to help develop a comprehensive understanding of the family.

During the initial 30-day assessment period, the team utilizes information from the Initial Family Assessment(s) to develop the Social Service Plan (SSP) and Child Assessment and Service Plan (CS-1).

#### *Social Service Plan*

The Social Service Plan is a whole family case planning document that identifies the goals, services, and steps the family will take to remedy the factors which caused the child to enter foster care. The Social Service Plan will capture all case activities from opening to closure and the circumstances that drove those activities and decisions throughout the case.

The Social Service Plan is designed to be a fluid document in which information can be continuously added over the life of a case, showing the progression toward permanency over time. The initial Social Service Plan is to be completed within the first 30 days of the child’s entry into foster care. The safety goals and plan to meet those safety goals shall be submitted to the team and court at the initial Disposition hearing.

The Social Service Plan captures the following information:

- Reason(s)/circumstances that caused the child(ren) to enter Alternative Care
- Threats of harm or actual harm caused or contributed to by each Parent/Caregiver/Guardian toward each child
- Adverse impact of harm on the child
- Safety Goals defined around each threat of harm to identify specific positive changes in behavior which need to be observed to ensure that the parent has remedied that particular concern
- Next Steps are descriptive action items, services or supports identified to help the family successfully reach their safety goal(s)
- Successful completion of each goal or step, so the document reflects all reasonable efforts made on behalf of the team to support a successful outcome for the child and family
- Progress, or lack thereof, in pursuit of the positive behavioral changes resulting from any services or supports put in place for the family
- Critical decisions made throughout the case and why those decisions were made
- Reasonable efforts and decisions made throughout the case by the team, including permanency plans, concurrent plans, the family's level of involvement, and paternity efforts.
- Each child's individual status, how needs were met, and what needs remain.
- The family's natural supports who can be used to create ongoing safety and accountability

#### *Child Assessment and Services Plan (CS-1)*

The CS-1 captures a more detailed case plan for each child and documents: placement details, relationships, reasonable efforts to prevent removal, visitation with parents and siblings, child needs and services provided. The CS-1 contains all required provisions identified in the Social Security Act.

Currently, case managers are required to complete the Child Assessment and Services Plan within the first 30 days of the child's entry into foster care in addition to the Social Service Plan. Because the Social Service Plan is in the initial phase of development (out of eight phases) and does not currently capture all of the required provisions identified in the Social Security Act, in a future phase of development, the documentation currently being captured on the CS-1 will be absorbed into the Social Service Plan to maintain all child and family case planning information in one document. This will occur with the development of the new CCWIS system.

#### *Family Support Teams (FST)*

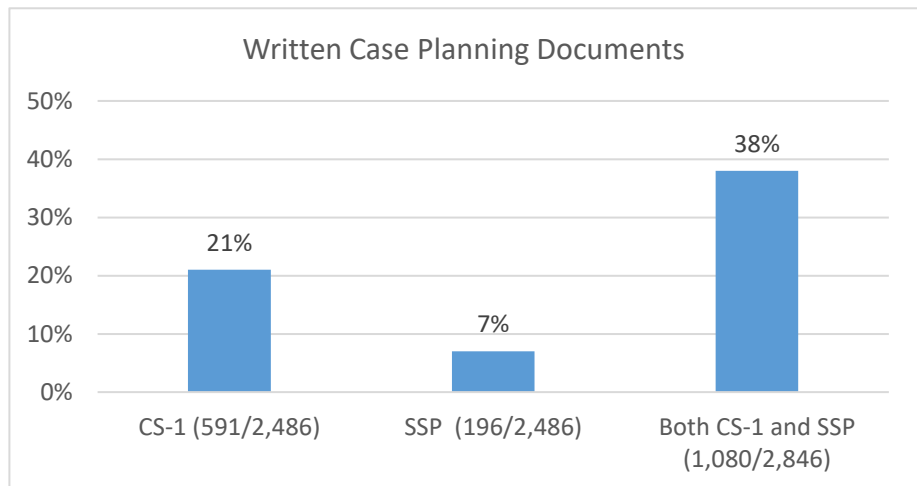
Children's Division policy requires that case planning decisions be made through the Family Support Team process. The Social Service Plan is reviewed during every Family Support Team meeting to discuss the progress of the family in addressing the reasons the child(ren) entered foster care; to help determine an appropriate point of goal change, if necessary; to determine appropriate visitation arrangements; and to plan for case closure.

The FST members include the worker, supervisor, parents/caregivers, child (if age appropriate), juvenile officer, Guardian Ad Litem, CASA, parents' attorneys, natural supports, placement provider, treatment providers, and school personnel. FST meetings are conducted according to the time schedule listed below for as long as the court holds jurisdiction of the child, the Children's Division has custody, and the child is in an out-of-home care setting.

- 72 hour meeting (preliminary case plan and concurrent plan established)
- 30-day FST meeting (case plan and concurrent plan established)
- 60-day FST meeting (review of case progress)
- 90-day FST meeting (review of case progress)
- FST is held at least every 30 days until adjudication by the court
- 6-month FST meeting (review of the case plan; possible change of plan)
- 12-month FST meeting (review of the case plan; possible change of plan)
- 18-month FST meeting (review of the case plan; possible change of plan)
- Every six months as long as the case is open
- At the request of any team member at any time when decisions need to be made
- When placement decisions need to be made

FST meetings are an effective vehicle for moving children to permanency as case planning decisions are made during these times, with all involved parties at the table, including the parents.

Administrative data was gathered for children who entered foster care between January 1 and June 30, 2022 and remained in custody for at least 60 days to determine the percentage of children with a written case plan. In total, 3,065 children entered care during that time period. Of those, 219 were excluded from the analysis as they were in Children's Division's custody for less than 60 days. Of the remaining children, 66% had a written case plan (1,867/2,846). The following chart outlines which planning documents were used at what frequency.

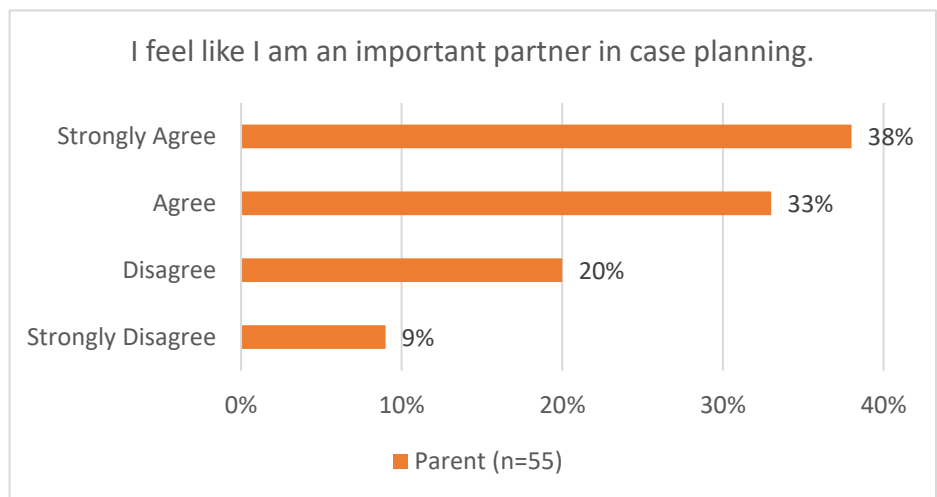


During the Statewide Assessment Event session covering the Case Review systemic factor, participants were asked to respond to the following question by utilizing an online poll. Twelve participants, who included members of the legal and judicial community in Missouri and

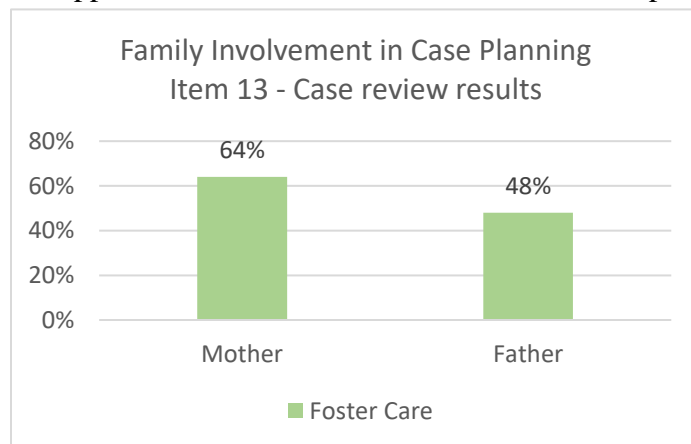
Children’s Division leadership, answered the question “How is the information that is required in written case plans for children in foster care documented in your circuit?” Four of the 12 respondents (33%) indicated that written case plans were documented in the Children’s Division case file via the Child Assessment and Service Plan and/or the Social Service Plan. Three of the 12 session participants indicated that written case plans were documented within court reports provided by the Children’s Division (25%). The remaining five responded that they were not sure where case plans were documented (42%).

In preparation for the Statewide Assessment Event, parents were provided the opportunity to participate in a survey to gain their perspectives on a number of child welfare topics. For a description of the survey distribution process, please refer to the “Description of Stakeholder Involvement in the Statewide Assessment” section of this document.

One of the questions posed to parents asked them to react to the statement “I feel like I am an important partner in case planning.” Fifty-five (55) parents participated in the survey. Among these participants, 71% of parents responded that they strongly agreed or agreed that they feel like important partners in case planning (39/55). Parents disagreed or strongly disagreed with the statement 29% of the time (16/55).



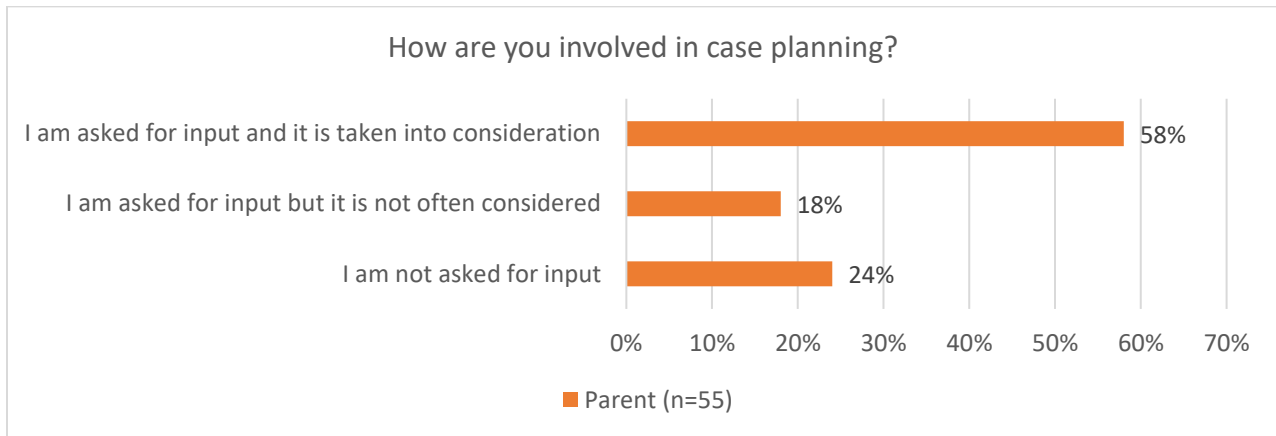
A similar data element can be found in case review results. Item 13 of the On-Site Review Instrument (OSRI) assesses whether concerted efforts were made to actively involve the mother and the father in the case planning process. A total of 28 foster care cases were reviewed between September, 2022 and January, 2023. Three of the mothers and seven of the fathers were not applicable for this item, due to termination of parental rights being completed prior to the



period under review, failure of the agency to attempt to locate the parents, or the parents indicating they did not want to be involved in case planning. Of the 25 remaining mothers, concerted efforts were made to involve them in 64% (16/25) of the cases reviewed. For the 21 remaining fathers, 10 cases showed concerted efforts were made to actively involve them in case planning (48% - 10/21).

For the case reviews receiving strength ratings for family involvement in case planning, the majority of engagement efforts occurred during Family Support Team meetings, court hearings, and ongoing visitation between the case manager and the parent.

Another survey question asked parents to identify what case planning looks like for them. The following chart details the responses to the question “How are you involved in case planning?” More than half of the parents who responded to the survey indicated that they are asked for input and it is taken into consideration (58%, 32/55).



Based on the data provided, there are noticeable areas in which practice needs to be strengthened. While 66% of children who entered foster care in the first half of 2022 have a written case plan in the FACES system, consistent documentation across all areas of Missouri is not evident. Just over half of parents who responded to the survey reported that they were given the opportunity to be involved in case planning decisions for their families. For these reasons, Missouri asserts that Item 20, Written Case Plan, is an area needing improvement for the child welfare system.

## **Item 21: Periodic Reviews**

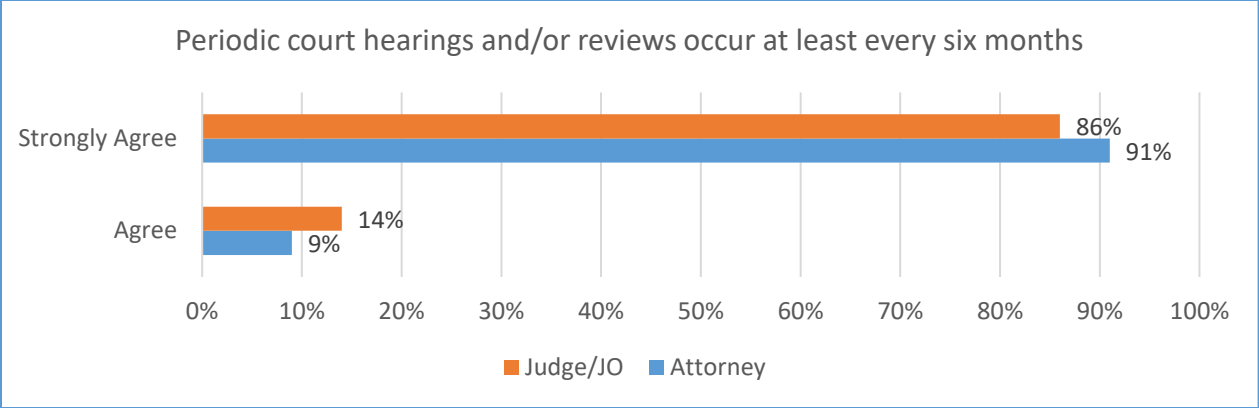
How well is the case review system functioning statewide to ensure that a periodic review for each child occurs no less frequently than once every 6 months, either by a court or by administrative review?

Item 21 was determined to be a strength in CFSR Round 3 and Missouri believes it remains a strength for the state child welfare system in CFSR Round 4.

Periodic reviews for children in foster care occur at least every six months within the court processes outlined in statute. Missouri Supreme Court Rule 124.01 requires Permanency Hearings to be held within 12 months of the juvenile coming into care and annually thereafter. It also requires a Permanency Review Hearing to be held at least every six months from the point of foster care entry and throughout the child's time in custody. Therefore, every six months, a child is required to have a permanency hearing or a permanency review hearing. Prior to the requirements for permanency hearings, the Dispositional Hearing may be held separate from or immediately following the adjudication hearing. During this hearing, a determination is made as to the legal and physical custody of the child, as well as the most appropriate means to address the concerns established in the adjudication hearing. Reasonable efforts required of the Children's Division to reunify the family may be ordered during the Dispositional Hearing. Dispositional Review Hearings are held within 90 days of the Dispositional Hearing and may be held as often as needed to determine the appropriate permanency plan for the child. Dispositional hearings, dispositional review hearings, permanency hearings, and permanency review hearings are the court hearings utilized in AFCARS reporting to establish compliance with periodic review requirements.

Data provided by the Office of State Courts Administrator (OSCA) indicates that 95% of children who entered foster care between January 1, 2022 and June 30, 2022 had at least one court hearing or review within six months of their entry date (2,645/2,797). For children who were in foster care as of December 31, 2022, 98% had a periodic review within the previous six months (10,323/10,488). Court activities included in this data are dispositional hearings, dispositional review hearings, permanency hearings, and permanency review hearings.

Surveys were provided to legal and judiciary members to gain their perspectives on the frequency of court hearings and/or reviews for children in foster care. For information on the survey distribution process, please refer to the "Description of Stakeholder Involvement in the Statewide Assessment Process" at the beginning of this document. In total, 42 surveys were returned from judges and juvenile officers. Forty-nine (49) surveys were returned from attorneys who represent children and families involved with the child welfare system. All respondents either strongly agreed or agreed with the statement that, "Periodic court hearings and/or reviews occur at least every six months" (42/42 and 49/49). None of the respondents indicated concern about the frequency of court hearings and/or reviews.



Multiple data points provide strong evidence that the majority of children in foster care in Missouri have a periodic review no less frequently than once every six months and is an area of strength for the child welfare system.

## **Item 22: Permanency Hearings**

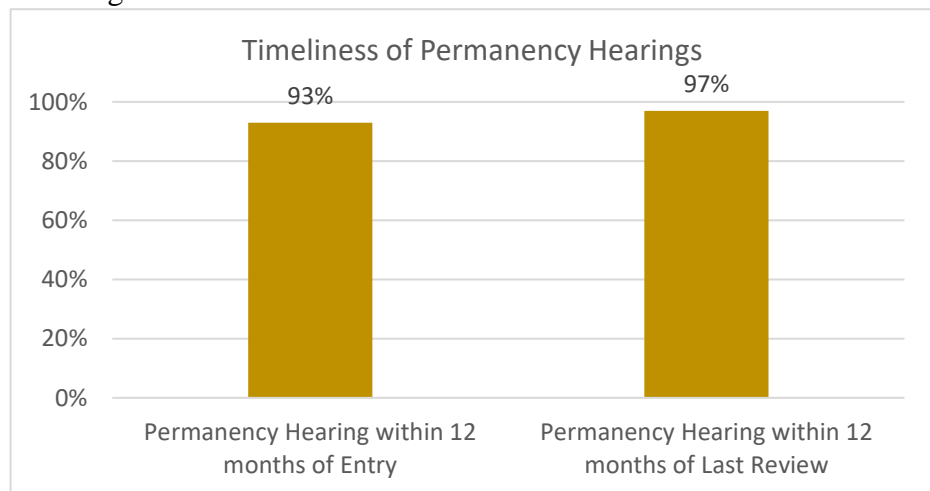
How well is the case review system functioning statewide to ensure that, for each child, a permanency hearing in a qualified court or administrative body occurs no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter?

Item 22 was found to be a strength for Missouri’s child welfare system in CFSR Round 3. Information in the statewide assessment and collected during interviews with stakeholders showed that permanency hearings were routinely occurring no later than 12 months from the date a child entered foster care and no less frequently than every 12 months thereafter. Missouri continues to assert that Item 22 is a strength for CFSR Round 4.

The Missouri Supreme Court recognizes the importance of timely permanency hearings in child abuse and neglect cases. The effort of the court to hold hearings on schedule enables teams to better ensure timely permanency. The Office of State Courts Administrator (OSCA) monitors the timeliness of hearings in all Missouri circuits. Court Operating Rule 23.01 requires the presiding judge in each circuit to submit a quarterly report to OSCA for each hearing not held within the specified time frame. The following information is to be reported: case number; style of the case; type of hearing; required hearing date; date of hearing (if held); date hearing scheduled (if not held); reason(s) for delay; compelling, extenuating circumstances found by the judicial officer to support each continuance outside the applicable time frame; and the plan of each judicial officer to comply with time frames during the next quarter. Exceptions for delays must be approved by the Family Court Committee.

The Child Abuse and Neglect Quarterly Reports are distributed statewide on a quarterly basis to indicate the number of hearings held timely, the reasons for delays, and plans for corrective action. Court Improvement Project (CIP) staff compiles the reports and transmits a copy of all the reports to the Supreme Court of Missouri and to the Commission on Retirement, Removal, and Discipline for review. Copies are sent to all presiding judges and juvenile officers. The quarterly reports are also routinely reviewed during the Juvenile Court Improvement Project (JCIP) steering committee meetings.

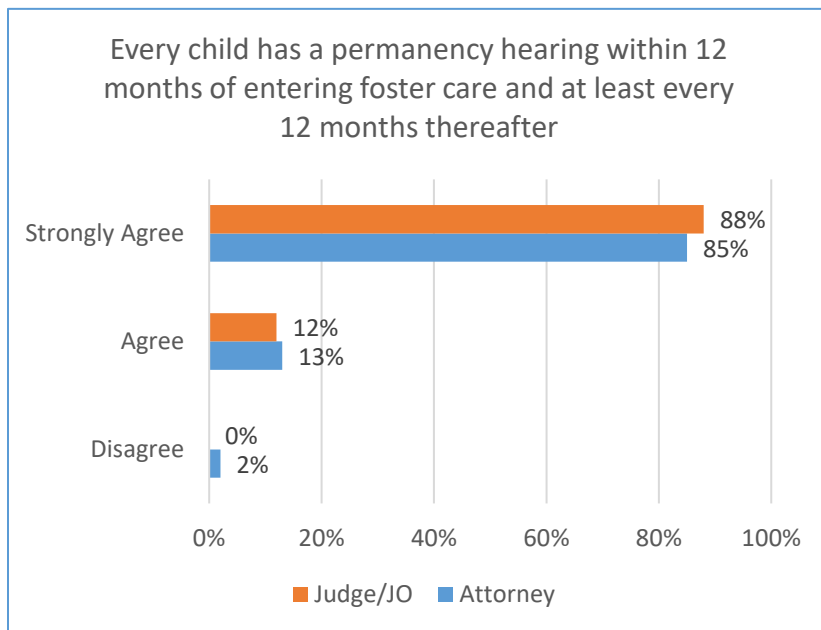
According to data provided from OSCA for the statewide assessment, for all children who entered care between July 1, 2021 and December 31, 2021, 93% had a permanency hearing held within the first 12 months of custody (2,338/2,521).





For all children whose most recent permanency hearing occurred between July 1, 2021 and December 31, 2021, 97% had a subsequent permanency hearing within 12 months of their last permanency review (3,337/3,341).

Surveys were provided to legal and judiciary members to gain their perspectives on the frequency of court hearings and/or reviews for children in foster care. For information on the survey distribution process, please refer to the “Description of Stakeholder Involvement in the Statewide Assessment Process” at the beginning of this document. In total, 42 surveys were returned from judges and juvenile officers. Forty-nine (49) surveys were returned from attorneys who represent children and families involved with the child welfare system.



Each respondent was asked to react to the statement “Every child has a permanency hearing within 12 months of entering foster care and at least every 12 months thereafter”. All judges and juvenile officers who responded strongly agreed or agreed with that statement (100%, 42/42). Of the attorney surveys that were returned, 98% were in agreement (48/49).

The data presented supports the notion that the vast

majority of children in foster care have a permanency hearing in a qualified court within 12 months of entering foster care and no less frequently than every 12 months thereafter, meeting the federal requirements for Item 22. Missouri asserts that Item 22, Permanency Hearings, is a strength for the child welfare system.

### **Item 23: Termination of Parental Rights**

How well is the case review system functioning statewide to ensure that the filing of termination of parental rights (TPR) proceedings occurs in accordance with required provisions?

Item 23 was found to be an area needing improvement during Round 3 of the CFSR. In the statewide assessment, Missouri provided data showing that termination of parental rights (TPR) petitions were not routinely filed across the state in a timely manner as required. Missouri continues to assert that Item 23 is an area needing improvement.

Following the Round 3 findings, several strategies within the Program Improvement Plan were identified to improve Item 23. Within the Permanency Attorney Initiative (PAI), attorneys were hired in select areas of the state to represent the Children's Division staff in court. Previous to these positions, all legal support was provided by the DSS Division of Legal Services (DLS) in limited scope due to staffing restrictions. With the additional positions, the PAI attorneys are able to file petitions on behalf of the Children's Division and represent workers in court. Separate from the Permanency Attorney Initiative, Court Technical Assistance Teams were also implemented in Missouri and provide opportunities for circuit court and Children's Division staff to meet regularly to discuss data and identify processes that will strengthen permanency. A statewide advisory group that supports the local teams also created a TPR referral packet to be used throughout the state. Previous to this, each circuit had a unique packet of information which could at times become burdensome for frontline staff, creating delays. Despite these initiatives, timely filing of termination of parental rights petitions remains a challenge in Missouri.

Missouri Law, Section 210.720 requires that when a child has been placed in the custody of the Children's Division in accordance with subdivision (17) of subsection 1 of section 207.020, RSMo (revised Missouri statute), or in another authorized agency, by a court, or has been placed in foster care by a court, every six months after the placement, the foster family, group home, agency, or child care institution with which the child is placed shall file with the court a written report on the status of the child. As cited in the statute, the court shall review the report and shall hold a permanency hearing within twelve months of initial placement and at least annually thereafter. The permanency hearing shall be for the purpose of determining, in accordance with the best interests of the child, a permanent plan for the placement of the child, including whether the child should be continued in foster care, whether the child should be returned to a parent, guardian or relative, or whether proceedings should be instituted by either the juvenile officer or the Children's Division to terminate parental rights to legally free such child for adoption.

Termination of parental rights proceedings may be initiated upon the request of the child's parent(s) (voluntary relinquishment), or by any other party, including the Children's Division, by making a referral to the appropriate juvenile office. All juvenile offices in Missouri have statutory authority to file a termination of parental rights petition. The Children's Division is also authorized to file a petition for termination of parental rights with the assistance of the Permanency Attorney Unit or the Division of Legal Services. The Family Support Team, in assessing a child's needs for permanency, should consider termination of parental rights if

permanency through reunification with a parent, guardianship, or placement with an appropriate relative is not feasible and if adoption is a reasonable expectation and meets the child's needs. In cases where reunification, guardianship, or placement with a fit and willing relative is the primary plan, termination of parental rights and adoption may be an appropriate concurrent goal.

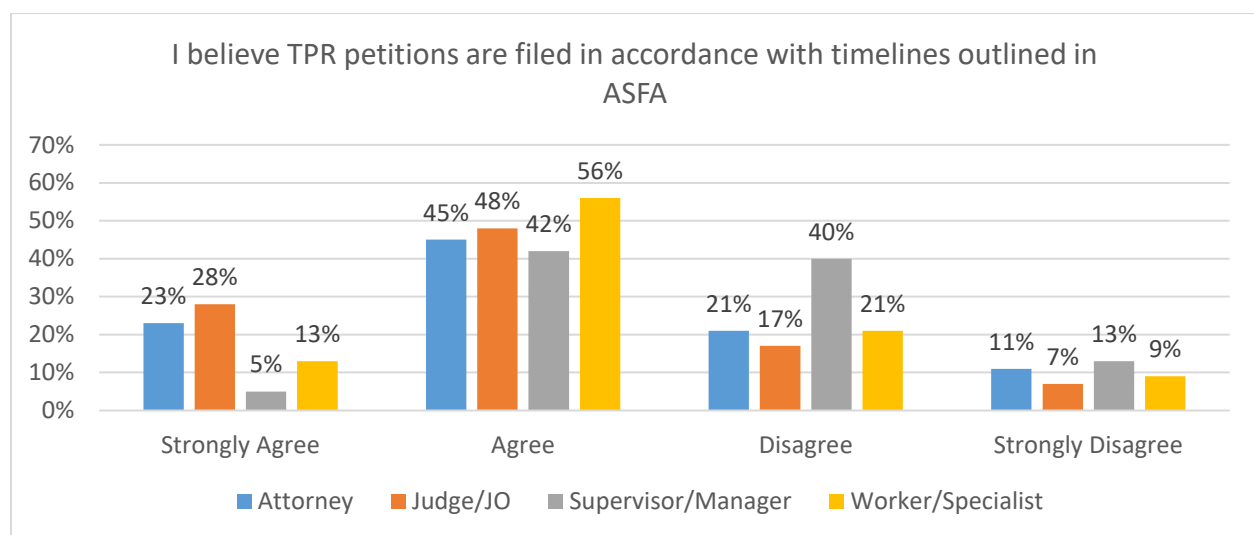
Termination of parental rights may be a straightforward legal process when both/all parents to the child are identified, located, and voluntarily relinquish their parental rights. Conversely, termination of parental rights may be a complex legal matter if one or both parents object to his/her parental rights being terminated. In all cases, the facts and grounds for termination must be proven by legally admissible evidence in a court of law. Grounds for termination of parental rights must be proven to the court by clear, cogent, and convincing evidence. This is the highest standard of proof known to the civil law. It is essential that all of the facts supporting termination of parental rights are carefully and thoroughly documented. Individual courts may interpret the involuntary termination statutes differently or be reluctant to pursue termination of parental rights. Children's Division staff may consult with the Permanency Attorney Unit, where available, or the Division of Legal Services in addition to the juvenile officer on all cases where involuntary termination of parental rights is being considered by the Family Support Team to determine if there is enough evidence to proceed with a request to file the petition for termination.

When considering a petition for termination of parental rights the court must apply a two-part analysis: first, the court must determine whether there are statutory grounds for termination in the case under consideration, as outlined in Chapter 211.447 of Missouri statute. And second, if the petitioner proves statutory grounds exist, whether termination of parental rights is in the best interests of the child. The court may deny a petition for termination of parental rights if the court finds that TPR is not in the best interest of the child even if there are statutory grounds for termination. However, the court cannot grant a petition to terminate parental rights if the petitioner failed to prove by clear, cogent, and convincing evidence that the statutory grounds for TPR exist.

Data surrounding the timely filing of TPR petitions was provided by the Office of State Courts Administrator (OSCA). For children entering Children's Division custody between April 1, 2021 and September 30, 2021, and who remained in state's custody at the 15 month mark, 5.5% (120/2,194) had a termination of parental rights petition filed on their behalf. There are limitations to the data presented. Unfortunately, the court information system does not capture whether there are any exceptions or compelling reasons to not pursue TPR.

According to Children's Division administrative data, as of December 31, 2022, there were 13,338 children in foster care in Missouri. Of those, 424 entered custody during September, 2021, reaching the 15-month mark in foster care. Two hundred twenty-seven (227) of the 424 children were placed with relatives at the 15-month mark (53.5%), thus having an exception to the filing for TPR. Of the remaining 197 children, 12 had termination of parental rights completed and three children had TPR actions filed (7.6%, 15/197).

In preparation for the CFSR Statewide Assessment Event, surveys were sent to judges, juvenile officers, attorneys who represent children and families, case management staff, and supervisors. For information on the survey distribution process, please refer to the “Description of Stakeholder Involvement in the Statewide Assessment Process” at the beginning of this document. Survey participants were asked to respond to the statement “I believe TPR petitions are filed in accordance with timelines outlined in the Adoption and Safe Families Act (ASFA)”. Judges/juvenile officers strongly agreed or agreed with the statement most frequently at 76% (32/42). Sixty-eight percent (68%) of attorneys who responded to the survey strongly agreed or agreed with the statement (33/49) followed by 69% of case management staff (193/340). Less than a majority (47%) of supervisory and management staff strongly agreed or agreed with the statement (61/128).



Case reviews have been completed for 28 foster care children using the Onsite Review Instrument (OSRI) for Round 4 since September 2022. Sixteen (16) cases were applicable for the assessment of timely filing of termination of paternal rights petitions.

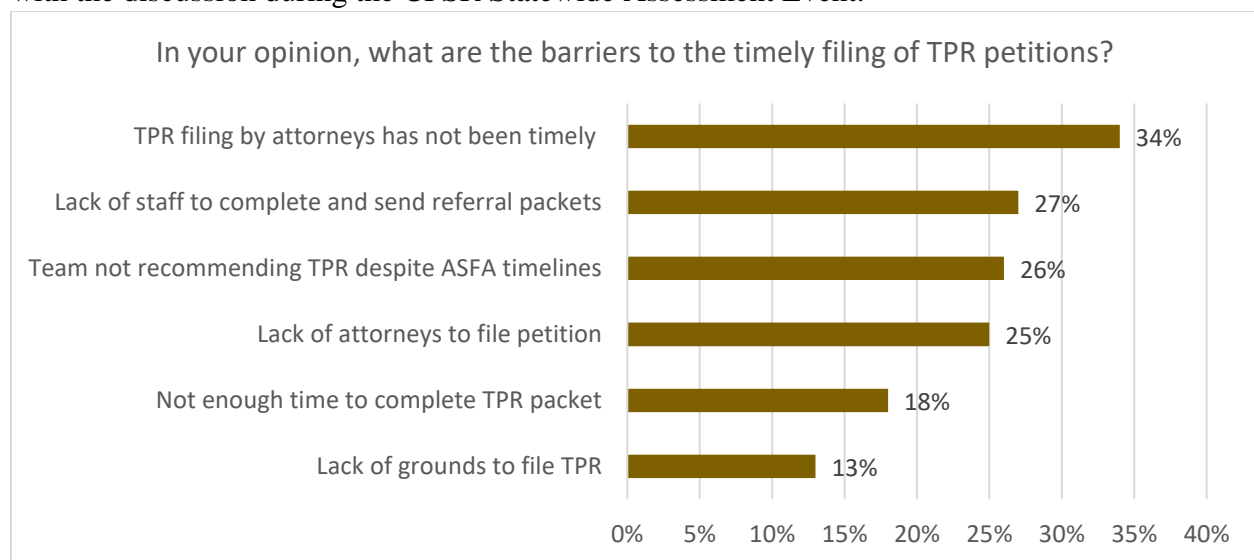
- 12 of the 16 children assessed were rated as strengths for this requirement (75%)
  - 6 children had TPR petitions filed timely prior to or during the period under review
  - An additional 6 children had an exception to not file a TPR petition
    - Five children were being cared for by relatives at the 15/22-month timeframe
    - Documentation of a compelling reason that filing for TPR would not be in the child’s best interest was present in the case record for one child
- 4 of the 16 children assessed were rated as area needing improvement (25%)
  - Two children did not have a TPR petition filed and a compelling reason not to file was not documented
  - Two children had a TPR filed, but beyond the 15-month mark

As indicated in the case review data, one of the reasons that Missouri needs improvement on TPR filings is due to lack of timely filing. Participants in the CFSR Statewide Assessment Event were asked to describe the barriers to filing TPR petitions within the guidelines of the ASFA.

Responses were as follows:

- Lack of information in the child’s Children’s Division file.
- Lack of time for counsel to file the petition.
- TPR referrals are not received from the Children’s Division in a timely manner.
- There is a significant amount of information gathering that is required prior to filing the petition. The process to get to the point of filing a TPR is cumbersome and can be difficult to meet timeframes as required.
- The process to reach the point of filing the petition varies in some areas of the state. Some are more burdensome than others.

The chart below represents survey results from Children’s Division and FCCM supervisors and managers. A total of 129 surveys were returned. Respondents were asked to mark all barriers to the timely filing of TPR petitions that applied, in their opinion. These barriers were consistent with the discussion during the CFSR Statewide Assessment Event.



- TPR filing by attorneys has not been timely (44/129)
- Lack of staff to complete and send referral packets (35/129)
- Team not recommending TPR despite ASFA timelines (34/129)
- Lack of attorneys to file petition (32/129)
- Not enough time to complete TPR packet (23/129)
- Lack of grounds to file TPR (17/129)

The other reason indicated by case reviews that Missouri needs improvement on TPR filings is a lack of documentation of exceptions or compelling reasons not to file. The consensus of the CFSR Statewide Assessment Event participants was that the process for documentation differs depending on the area of the state. Participants indicated that some areas rely on narrative documentation in the Children’s Division’s file. Documentation in some areas is found in court reports and orders. Other circuits file a motion for a finding of compelling reasons, holding court

hearings with testimony centered on compelling reasons. Variation across circuits for how to document compelling reasons results in a general lack of clarity for Children's Division and Foster Care Case Management staff since a single process cannot be trained and reinforced. This is particularly troublesome when staff turnover rates are high, and the child welfare workforce is relatively new.

As evidenced by the data provided, the timely filing of termination of parental rights petitions in Missouri remains a challenge, leading to the assertion that Item 23 is an area needing improvement for the child welfare system.

## **Item 24: Notice of Hearings and Reviews to Caregivers**

How well is the case review system functioning statewide to ensure that foster parents, pre-adoptive parents, and relative caregivers of children in foster care (1) are receiving notification of any review or hearing held with respect to the child and (2) have a right to be heard in any review or hearing held with respect to the child?

Missouri was not in substantial conformity with this item in CFSR Round 3, based on information gathered in stakeholder interviews. During those interviews, stakeholders reported that the process for providing notice varies across the state. Stakeholders said that in most circumstances, when caregivers do attend hearings, they are provided an opportunity to be heard. Missouri believes that Item 24 is in substantial conformity with federal requirements for CFSR Round 4.

Missouri ensures caregivers are aware of their right to be notified of and heard in court hearings through a variety of mechanisms. Caregivers are provided a copy of the Missouri Resource Parent Handbook at initial licensure. With each license renewal, the foster parents are reminded of the handbook and that it is also available on the internet at <https://dss.mo.gov/cd/foster-care/pdf/fcresource.pdf>. The handbook informs the caregiver they are part of a team, including when in court, and that their opinions matter. The handbook also provides information about the process and purpose of court (pages 29-30). The information included in this section informs the caregiver about the Caregiver Court Information Form and about their right to be heard. Resource parents are provided a copy of the Foster Parent Bill of Rights at the time of placement of a child in their home. The Foster Parent Bill of Rights (RSMo 210.566) states, “Foster parents shall be informed by the court no later than two weeks prior to all court hearings pertaining to a child in their care, and informed of their right to attend and participate, consistent with section 211.464, RSMo”. <https://revisor.mo.gov/main/OneSection.aspx?section=210.566>

The legal right for resource parents to be heard in court is also taught in the foster parent pre-service training. During the training, participants are informed of the Foster Parent’s Bill of Rights. Resource parents are also required by policy to complete five hours of laws, policies, and procedures governing child welfare which includes information about their right to be notified of court hearings and to be heard in court. These activities occur in the same manner for licensed and unlicensed providers and there is no distinction in processes for foster parents, pre-adoptive parents, or relative parents.

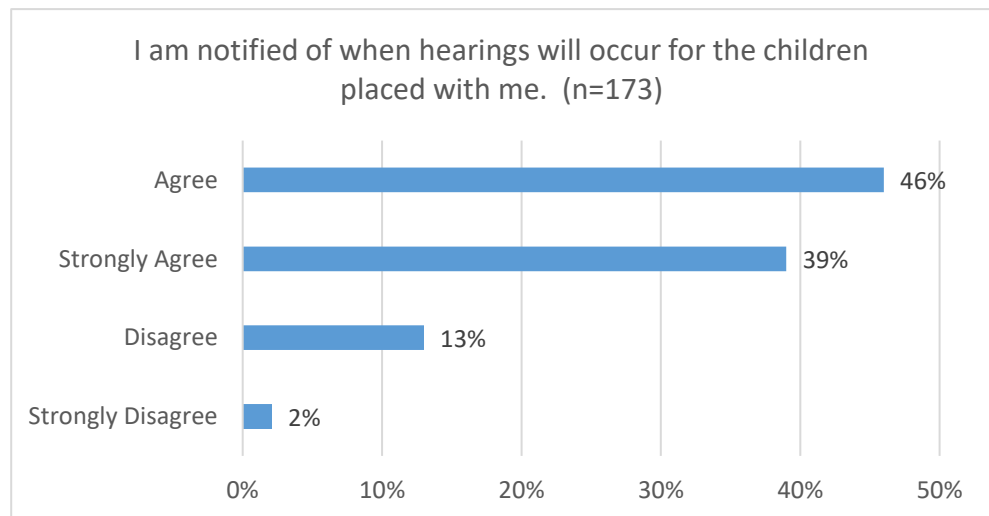
The current version of the Caregiver Court Information Form was created jointly by the Missouri Office of State Courts Administrator (OSCA) and the Children’s Division. It is posted on the Children’s Division internet page along with instructions for completing the form and where to send it once completed. Information about this form is contained within the Missouri Resource Parent Handbook. The children’s case managers also provide hard copies of the form to foster parents prior to court hearings. The form affords caregivers the opportunity to provide child-specific information concerning medical and educational status, extracurricular activities, observations of family interactions, and other pertinent topics the caregivers would like the court to know. Foster parents can provide this form to the child’s case manager or juvenile officer

three weeks prior to the court hearing or as outlined in local protocol and it will be filed with the court.

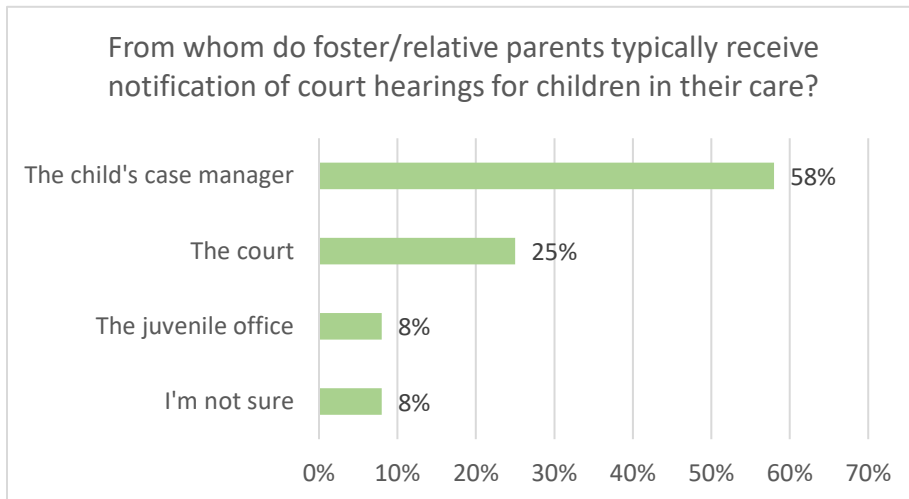
The juvenile court is responsible for notifying caregivers about court hearings per Missouri Statutes 211.171, 211.464 and 210.566. Written notification of the upcoming hearing is mailed to the resource parent by the juvenile court prior to upcoming hearings. Information about their right to be heard in court is included in the document provided by the court. If caregivers are present in court, any subsequent hearing dates and times are verbally shared, as well. As placement changes occur, this can pose challenges if the court is not notified of the name and address of the new caregiver. As such, case managers also notify caregivers of upcoming court hearings and their right to be heard in court through their ongoing contact with foster/relative parents. While notification may come from different or multiple sources, the majority of caregivers receive notification of when court hearings are scheduled to occur as supported by the following information.

In preparation for the CFSR Statewide Assessment, all foster and relative caregivers were provided an opportunity to participate in a survey to gather information throughout the month of January, 2023. For a description of the survey distribution process, please refer to the “Description of Stakeholder Involvement in the Statewide Assessment Process” section of this report. Survey responses were received from 191 foster/relative parents.

In the survey, caregivers were asked to respond to the statement “I am notified of when hearings will occur for the children placed with me”. Eighty-five percent (85%) of respondents strongly agreed or agreed with that statement (147/173). The remaining 18 survey responses were not applicable for this question, as they had no foster care placements in the previous six months.



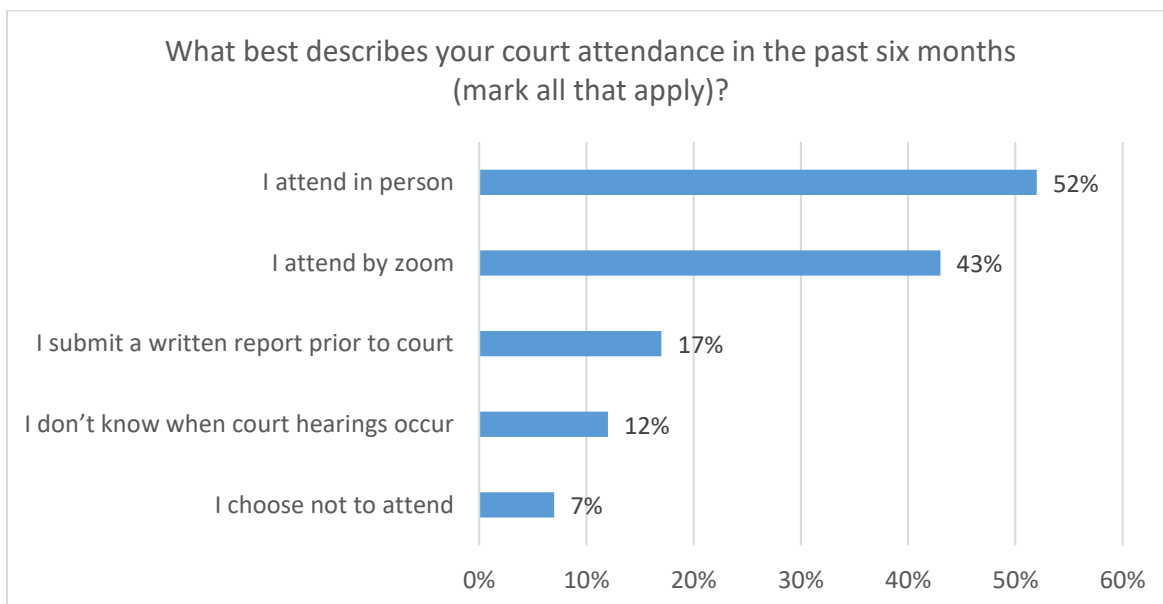




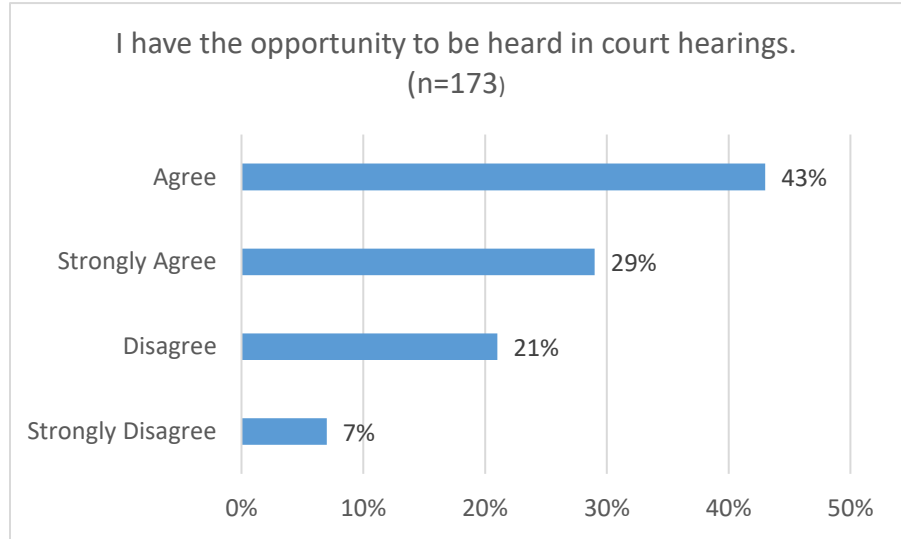
During the CFSR Statewide Assessment Event, participants were also asked to indicate from whom notification of court hearings typically come. There were 12 participants who responded to this poll. Participants included foster and relative parents, Children’s Division,

and contracted staff with licensing responsibilities, juvenile office representatives, and agency leadership. The majority of event participants felt that the case manager typically provides notification of court hearings.

Survey respondents were also asked to multi-select all responses that described their court attendance in the past six months. One hundred seventy (170) caregivers responded to the question. Only 12% (20/170) indicated that they did not know when court hearings occurred. Seven percent (7%) indicated that they chose not to attend (12/170).

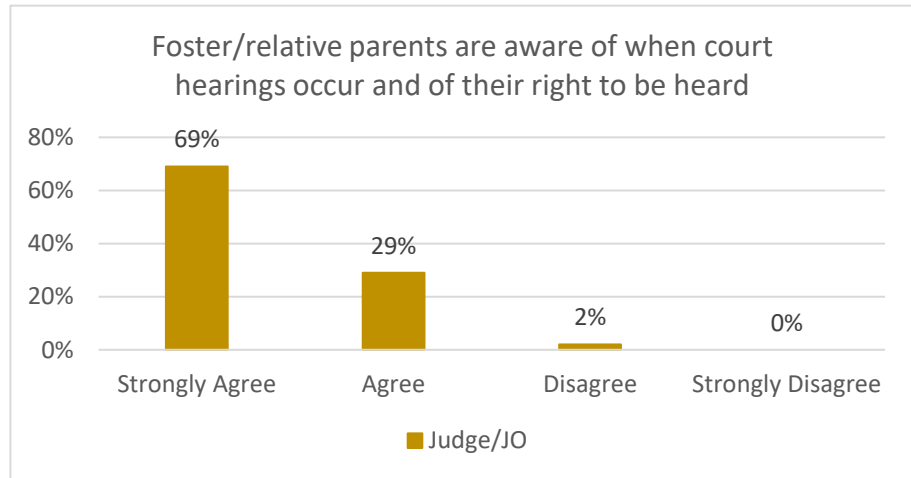


An additional survey question asked whether caregivers have the opportunity to be heard in court hearings. Seventy-two percent (72%) of caregiver respondents indicated that they agreed or strongly agreed with the statement that they have the opportunity to be heard in court hearings (125/173).



Surveys were also sent to members of the judiciary and Juvenile Officers in each of the 46 circuits in Missouri. Survey links were emailed by OSCA personnel to 147 people. Forty-two (42) respondents participated in the survey. Among these respondents, 98% (41/42) of Judges and Juvenile Officers believed that foster parents are aware of when court hearings occur and of their rights to be heard.

During the CFSR Statewide Assessment Event, stakeholders were asked to describe what is being done to help caregivers feel engaged in the court process. Participants included foster and relative caregivers, judges, juvenile officers, Children’s Division



attorneys, parent attorneys, Children’s Division and contracted case management staff, and agency leadership. Feedback indicated that in some areas, court personnel will specifically inform the judge when foster/relative parents are present in court so the judge knows to allow time should they wish to speak. The Caregiver Court Information Form referenced above was noted as an avenue for engagement, as well. Court reports provided by the child’s case manager may also include foster parent feedback and information.

Based on the discussion above, Missouri asserts that Item 24, Notice of Hearings and Reviews to Caregivers, is a strength for the child welfare system. While notification may come from a variety of sources, foster and relative parents indicate that they are aware of when court hearings

occur for the foster children in their homes. The data also indicate that the majority of foster and relative parents are aware of opportunities afforded them to be heard in court.

## QUALITY ASSURANCE SYSTEM

### Item 25: Quality Assurance System

How well is the quality assurance system functioning statewide to ensure that it is

1. Operating in the jurisdictions where the services included in the CFSP are provided,
2. Has standards to evaluate the quality of services (including standards to ensure that children in foster care are provided quality services that protect their health and safety),
3. Identifies strengths and needs of the service delivery system,
4. Provides relevant reports, and
5. Evaluates implemented program improvement measures?

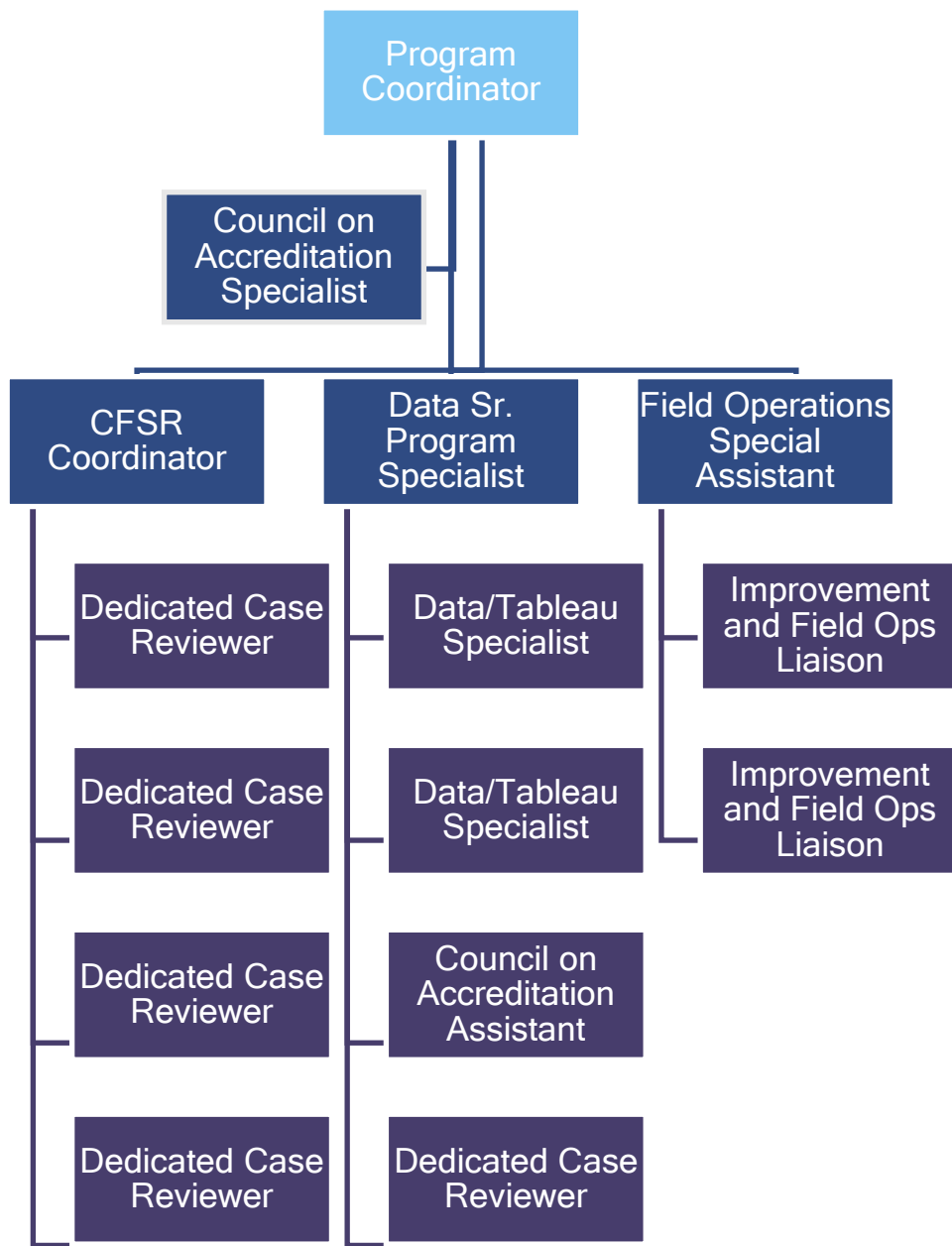
Missouri's Quality Assurance System was determined to not be in substantial conformity with federal requirements in Round 3. Missouri was in the implementation stages of establishing a consistent statewide case review process and coordinating quality assurance activities to systematically assess services included in the Child and Family Services Plan. Because Missouri's case review process did not include dedicated case reviewers, consistently achieving accurate ratings was a challenge that needed to be addressed.

Missouri has addressed the challenges identified in Round 3 and asserts that the Quality Assurance System is in substantial conformity with federal expectations in CFSR Round 4.

Missouri is divided into 46 judicial circuits and the work of the Children's Division corresponds with the same circuit structure. Services included in the Child and Services Plan are provided in all 46 circuits of the state.

#### *Quality Assurance System Structure*

Oversight of the Children's Division Quality Assurance System (QAS) is provided by the QAS Program Coordinator who has responsibility for implementation of all QAS activities. Under the leadership of the Deputy Director for Operations and Administration, the QAS is comprised of 14 additional staff who perform QAS functions throughout the state. The following organizational chart provides a visual representation of the QAS structure.



The CFSR Coordinator is responsible for all activities related to the Child and Family Services Review (CFSR), and the reporting requirements associated with the Child and Family Services Plan (CFSP) and the Annual Progress and Services Report (APSR). CFSR case review administration is also a function of the CFSR Coordinator. There are five identified staff whose primary job function is the completion of CFSR case reviews utilizing the On-site Review Instrument (OSRI).

The Children’s Division is an accredited public child welfare agency under the standards of the Council on Accreditation (COA). As such, there are two staff members in the QAS whose primary function is to focus on accreditation activities. Distribution of self-assessment materials

to the various circuits, coordination of accreditation site visits, gathering evidence for Maintenance of Accreditation reporting, and giving guidance to Children's Division leadership on the standards of COA are among their ongoing responsibilities.

With support from the QAS Program Coordinator and a Senior Program Specialist, the data management functions of the Children's Division are administered by two QAS staff members. They are in frequent communication with the Department of Social Services' Research and Evaluation Unit (DSS Research). The DSS Research unit is responsible for data extraction from the FACES case management system. The data output is then provided to QAS staff members for analysis and visualization. The Department of Social Services issues guidance for data governance. According to this guidance, all new requests for Children's Division data are funneled through the QAS Program Coordinator to ensure consistency regarding the business needs for data and the methodology behind the reports developed and distributed to staff throughout the agency.

The Improvement and Field Operations branch of the QAS provides the communication link between the centralized operations of the Quality Assurance System and Children's Division staff across the state. The field operations QAS staff members extract data from CFSR case reviews, review the visualizations created by the data management team and synthesize the information applicable to each region and circuit. This information is then given to Field Ops specialists within the six geographic regions who lead program improvement efforts among the circuits they serve. For areas needing technical assistance in program improvement planning, the Improvement and Field Operations liaisons within the QAS are available to provide support. The Improvement and Field Operations branch also provides data to quality assurance staff within the Foster Care Case Management contract agencies to support their improvement efforts.

### *Evaluation Standards*

Measuring, monitoring, and improving the quality of service provision are central to ensuring positive outcomes for children and families served by the Children's Division. QAS staff evaluate trends and outcomes on a regular basis for CFSP programs in order to determine service delivery effectiveness.

The Children's Division's Quality Assurance System utilizes federal best practice standards as the measure for evaluation. In-home and foster care cases are reviewed using the federal On-Site Review Instrument (OSRI). Interviews with the case manager, parent(s), child (if school age), and foster parent, if applicable, are completed with every case review. The five dedicated case reviewers within the QAS touch the majority of case reviews that are completed, either as reviewers or as first-level approvers. The remaining staff within the Quality Assurance System also complete case reviews, but the number assigned to them is more limited. In addition, the regional Field Operations specialists also complete at least one CFSR case review each quarter. Second level approval is provided by the CFSR Coordinator, the QAS Program Coordinator, or a select group of QAS staff with the most case review experience. This structure was modeled after the Children's Bureau-led on-site review process and has served Missouri in maintaining fidelity and reliability among reviewers.

Cases to be reviewed are selected every 2-3 months using a randomization feature built into the FACES case management system. The randomization feature is consistent with CFSR case elimination criteria. For example, in-home cases selected with this tool must be open for at least 45 days and the foster care sampling tool can be specified to exclude youth who have reached their 18<sup>th</sup> birthday. Cases are randomly selected from across all 46 circuits, and include cases managed by FCCM contractors. The number of cases reviewed can vary slightly, but usually include a sample of 18-22 cases. One-third of the cases reviewed are in-home families and two-thirds of the sample come from children in foster care. Forty of the 46 (87%) circuits in Missouri have been the subject of at least one case review since September 2022. All but one circuit has had a case selected and reviewed since October of 2019 (98%, 45/46).

Prior to being eligible to complete a CFSR case review, new reviewers attend training with the CFSR Coordinator and one of the dedicated case reviewers who assists in all training efforts. New reviewers co-review at least once with an experienced reviewer to gain a more complete understanding of the tool and the interview process before being allowed to complete a case review on their own. Upon the release of the Round 4 version of the OSRI, a virtual meeting was held with reviewers to provide an overview of the changes to the tool. All new information about the application of the tool provided by the Children's Bureau or its contractors has been disseminated to the QAS staff.

Evaluation standards within the OSRI include elements of child safety, permanency, and child and family wellbeing, as well as an assessment of services and whether the services being provided to the family meet their identified needs.

In addition to using the OSRI to assess the safety and permanency of children in Missouri, the CFSR Statewide Data Indicators are used as methods of evaluation within the child welfare system upon their publication each six months.

#### *Identification of Strengths and Needs*

Using the case review results and Statewide Data Indicators, the Children's Division QAS is able to identify the strengths and areas of need on both a case-level and a system-level.

As each case review is completed, the assigned worker, the assigned supervisor, and the management staff of the circuit and region associated with the case are provided a PDF copy of the completed case review tool. The completed tool is also provided to the Field Operations specialist within the region. Reviewers are encouraged to highlight strengths of practice that were identified during the case review process, as well as any areas of practice challenge. This provides opportunity for all levels of staff to review the case review outcomes, learn about the evaluation criteria, and apply lessons learned to their individual casework practice. Case managers are able to communicate with the reviewers, as well, to ask any questions they may have about the application of the OSRI.

From a systems-level perspective, case review data is compiled and shared with Children's Division executive leadership at the completion of each bi-monthly or quarterly case review to help them identify trends in casework practice and next steps toward system improvement.

Reports from the Online Monitoring System (OMS) are utilized to provide overall statewide ratings for each item and outcome. The Improvement and Field Operations staff within the QAS also provide case review reports for each region, circuit, and FCCM agency for more targeted analyses of strengths and areas needing improvement, as those may vary according to location.

A Tableau dashboard has been created to assist in the identification of system-level practice strengths and challenges, as well. Several of the dashboard measures are linked to federal expectations and measurements are informed by the logic of the statewide data indicators. The dashboard is being built in three phases. Phase one of the dashboard was implemented in March 2023 and includes the following measures:

- Worker/Child Visit Completion
- Victimization in Foster Care
- Parent/child visit completion to the extent that the visits are not contrary to the orders of the court
- Healthy Child & Youth Exam (HCY/EPSDT) Completion
- Worker/Parent Visit Completion
- Re-Entry to Foster Care
- Average Number of Workers Per Child in Care Less Than 12 Months and 12+ Months

Phases two and three will include, but not be limited to, measures such as timely achievement of the court ordered permanency plan, completion of trauma training for case management and supervisory staff, stability of placements, timely development and implementation of the Social Service Plan and effective ratios of supervisors to case management staff.

Each measure of the dashboard is updated monthly and provides data at the county-level, for Children's Division performance and/or Foster Care Case Management agency performance.

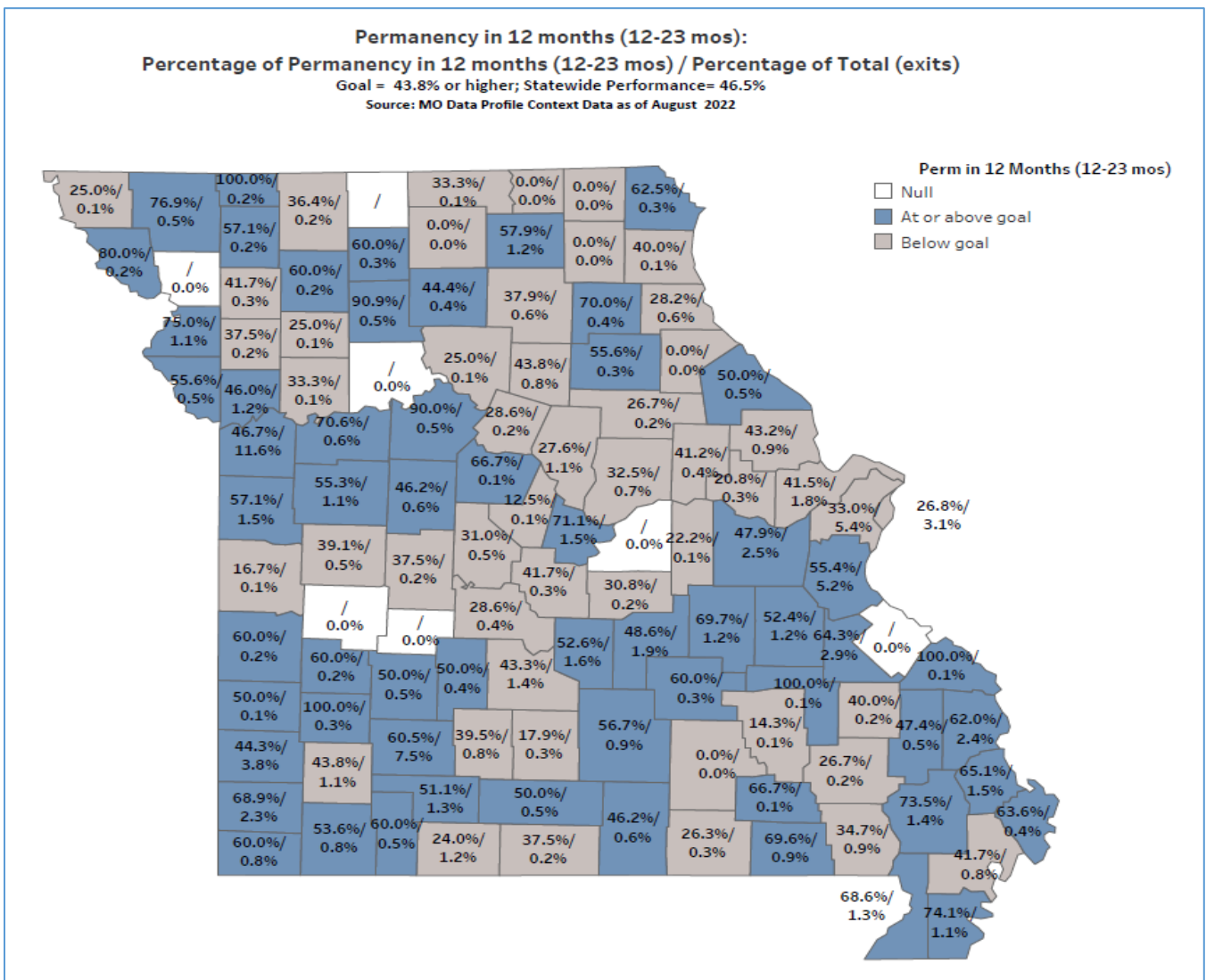
The supplemental context data for each CFSR Statewide Data Indicator is examined each six months for trends by age, race, and geographic location. Each indicator is mapped using Tableau for Children's Division management to easily evaluate the areas of the state performing better than the national performance and those areas performing worse than the national performance. Tableau maps have also been provided to community partners, including the courts, to give other members of the child welfare system the opportunity to evaluate strengths and areas of needed improvement in a clear and easy-to-read format. An example of geographic context data presented in a Tableau map is presented at the conclusion of this section.

There are many avenues to involve community partners in the identification of strengths and needs within the child welfare system. Case review data is routinely shared with the CFSR Advisory Committee. This group also reviews the CFSR Statewide Data Indicators following their semi-annual release. Case review results and mapped context data have also been shared with the Children's Justice Act Steering Committee, the Juvenile Court Improvement Project Steering Committee, as well as the State Youth Advisory Board, the Foster Parent Advisory Board, and some local Fostering Court Improvement groups. Discussions following data



presentations are opened for the groups to identify the positive information that stood out and areas that pose challenges for the child welfare system as a whole.

The most recent opportunity for system-wide analysis of strengths and needs occurred during the CFSR Statewide Assessment Event held in preparation for the publication of this report. Members of the child welfare community from across the state came together to review case review results, the Statewide Data Indicators, recent survey data, and administrative data from the Children’s Division and the Office of State Courts Administrator (OSCA). Membership from the judiciary, the Juvenile Office, the legal community, public and private partner agencies, service providers, persons with lived experience, and the foster parent community were represented throughout a two-week event encompassing 15 individual sessions. System strengths and areas for improvement were identified as a result of the data presented and discussed among these stakeholders.



### *Provision of Relevant Reports*

Missouri is fortunate to have a wealth of data available to use in evaluating the quality of the services provided to children and families involved in the child welfare system.

In addition to the reporting methods described above, a variety of management reports are provided to supervisory staff on a monthly basis. These can be used for ongoing monitoring of process measures that have been identified for performance improvement. Some examples include monthly reporting on worker with child visitation, worker with parent visitation, timely initial safety contact for child abuse and neglect hotline calls, and the timely conclusion of hotline investigations and assessments.

Monthly listings of all open in-home cases and foster care cases are provided to supervisory staff, as well. These can be used to verify the accuracy of information in the FACES case management system and to evaluate the caseloads and workloads of individual staff members.

Quarterly data reports designed to facilitate conversation between local Children's Division offices and their court partners are also provided for each circuit. Data elements include information on re-entry into foster care, child abuse and neglect in foster care, average number of placements, average time from foster care entry to termination of parental rights, and average time from termination of parental rights to final adoption.

Several Children's Division publications are available each year and posted on the Department of Social Services website, the Children's Division internal intranet page, or both. The publications include statistical information as well as outcome data. Publications include the Children's Division Annual Report, the Child Abuse and Neglect Annual Report, the Quarterly Outcome Measures Report, and Federal reports such as the ASPR. Monthly Management reports are also regularly posted for public access. Staff and managers are referred to the publications routinely by QAS staff in support of local collaboration and improvement planning efforts. Stakeholders have access to the publications which are posted on the internet.

### *Evaluation of Implemented Program Improvement Measures*

The QAS staff participated in a 3-day data analysis training through Casey Family Programs in January 2023. The Children's Division executive leadership joined the training on the third day, participating in the last two sessions. The training topics included:

- Using Data for Continuous Quality Improvement
- Key Analytic Concepts in Child Welfare
- Managing Data Quality and Developing Actionable Analytic Products
- Measuring What Matters and Promoting a Positive Data Use Culture
- Strengthening Performance Measures
- Moving Forward – Action Planning

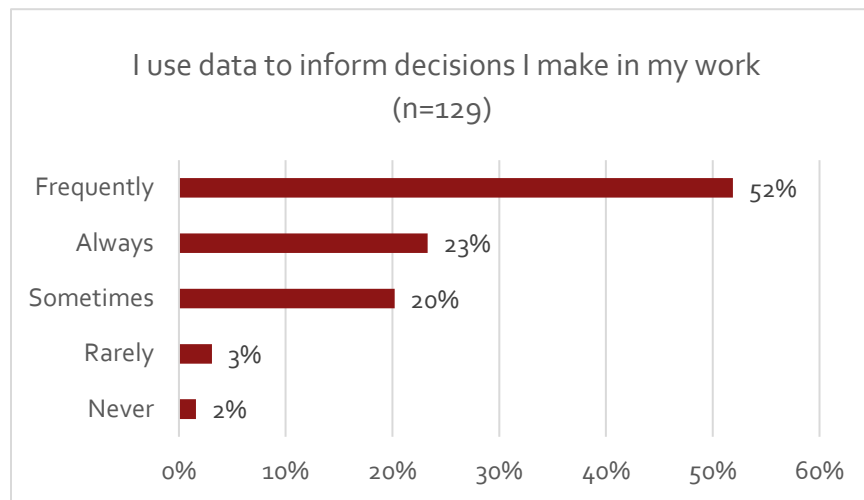
Using Children's Division data, the training encouraged participants to practice developing program improvement strategies while simultaneously considering evaluation components. The

training challenged the Children's Division leaders to think about evaluation measures, both process and outcome, so there are methods to determine if the strategies put in place bring about the desired change. And, if the strategies are not working as intended, decisions to make shifts in practice can occur more quickly.

A recent example of program improvement evaluation occurred between November 2021 and May 2022. The Social Service Plan described in Item 20, Written Case Plan, was introduced in policy in August 2021. A targeted case review tool was developed by QAS staff and foster care program staff. The tool was based on policy instruction and was used to review randomly chosen foster care cases to determine the level of policy implementation. Quarterly case reviews occurred for the first nine months of implementation. By the conclusion of the implementation review (May 2022), a total of 115 cases were reviewed across the state. Findings indicated that the initial Social Service Plan was completed in 37% (43/115) of the cases reviewed. The results of the case reviews led leadership to reconsider the volume of requirements outlined in policy and to streamline some of the practice expectations for the Social Service Plan.

The Central Consult Unit (CCU) was established in February 2022 with the expressed goal of more quickly completing hotline reports for children who were immediately assessed to be safe, with no concerns for abuse or neglect. CCU is staffed with a group of specialists whom investigators can call when steps have been taken to assure and document child safety. Investigators staff their cases with a specialist at the CCU who makes a determination if the case is ready for closure, or if additional steps are needed prior to closing the case. These additional steps may include contacting collaterals to gather additional information or requesting written reports from medical professionals or law enforcement. If the case is determined to be appropriate for closure, the CCU specialist documents the case consultation and completes the steps in the FACES case management system to close the report. Evaluation efforts for this new process included a quality assurance process in which identified QAS and other Children's Division staff members listened to random calls each month and completed a survey to assess if policy was followed. In addition, a variety of reports were developed to assist local investigative supervisors in managing the workload of their employees, ensuring case consultations occurred, and providing a method to track hotline investigations and assessments that required additional steps to be taken prior to case closure.

In preparation for the CFSR Statewide Assessment Event, surveys were provided to supervisors and managers to determine the effectiveness of Missouri’s Quality Assurance System. The



survey asked participants to identify how frequently they use data to inform work decisions. Seventy-five percent (75%, 97/129) of respondents stated that they always or frequently use data to inform decisions they make in their work.

Participants during the Quality Assurance System session of the CFSR Statewide Assessment

Event included Children’s Division executive leadership, QAS staff members, Quality Assurance designees of the FCCM agencies, and supervisors and managers from both the Children’s Division and FCCM agencies. Using an online poll, participants were asked to respond to the statement “The data that are available are relevant to my work”. Of the 12 participants who answered the polling question, 58% (7/12) strongly agreed and 42% (5/12) agreed with the statement. None of the respondents disagreed with the statement.

When session participants were asked to identify outcome or process data that is not available that would make system evaluation more effective, information about caseloads, workloads, and staff and foster parent retention were most frequently identified.

Missouri’s Quality Assurance System is functioning in all areas of the state to apply consistent standards for case practice evaluation. Strengths and areas of need within the child welfare system are identified as a result of the established case review process. Reports that assist supervisors and managers in their day-to-day decision making are provided on a regular basis. Recent initiatives have included components of program evaluation to determine their effectiveness. For these reasons, Missouri asserts that the Quality Assurance System is in substantial conformity with federal requirement.

## STAFF AND PROVIDER TRAINING

### Item 26: Initial Staff Training

How well is the staff and provider training system functioning statewide to ensure that initial training is provided to all staff who deliver services pursuant to the CFSP so that:

- Staff receive training in accordance with the established curriculum and timeframes for the provision of initial training; and
- The system demonstrates how well the initial training addresses basic skills and knowledge needed by staff to carry out their duties?

Initial staff training was determined to be an area needing improvement in CFSR Round 3. Previously, initial training for contracted case management was not consistent with Children's Division training, and a considerable number of the state's child welfare cases were managed by contracted agencies. A notable finding in Round 3 was that the state agency did not monitor or track initial training for contractors. As noted in the final report from Round 3, new child welfare agency staff met initial training requirements within established time frames. However, stakeholders' opinions varied with regard to whether initial training routinely provided new caseworkers with the knowledge and skills needed to perform their duties. Missouri has implemented many changes in the staff and provider training format and requirements. Therefore, for CFSR Round 4, Missouri asserts that Item 26, Initial Staff Training, is a strength for the child welfare system.

The current structure for Child Welfare Practice Training (CWPT) consists of a five-week, 120-hour classroom training program. Due to extreme staffing shortages throughout the state, the on-the-job portions of the program were made voluntary by region in July, 2022 and the original ten-week program was shortened to five weeks. Classroom instruction continues to provide the same coursework, but in a more condensed period of time to allow new staff to assume case management responsibilities sooner and provide needed relief to over-burdened co-workers.

The following initial staff classroom instruction is a competency-based program that promotes learning in a manner that prepares new workers to assess child safety, move children towards permanency, and support child and family wellbeing. The curriculum was recently revised in August of 2022 to eliminate practice elements no longer found in Children's Division policy and procedures.

- CWPT Foundations - Includes an overview of the agency and the legal basis for Children's Division work. During all topics, participants practice and hone their critical thinking skills. The content includes evaluation of participants' values and beliefs and how they align with the agency. The agency's mandate around child safety is introduced to participants. Included in the curriculum is a discussion around the NASW Code of Ethics. Participants are introduced to the Framework for Safety concepts of threats/worries, child vulnerabilities, and caregiver protective capacities.

- CWPT Practice Model - Introduces the key concepts and elements of a wellbeing orientation including the Five Domains of Wellbeing (5DW) and the concept of tradeoffs as a foundational framework and approach for working with families and colleagues. The course provides an increased understanding of the primary drivers of behaviors and how and why people make decisions. This class also introduces trauma and its effects on the families served by the Children's Division.
- CWPT Child Abuse and Neglect (CAN) - Introduces participants to the statutory mandate to receive and respond to child abuse and neglect reports. Participants learn state law, agency policy, and rules and regulations that govern this program area. Participants practice interviewing skills as well as practice assessing and responding to threats of safety. Participants learn how to engage family court and other multi-disciplinary teams that assist in the response to allegations.
- CWPT Team Decision Making (TDM) - Includes discussions about the important roles of parents, caregivers, and youth, extended family, and community partners in case planning decisions. Participants learn to identify the key elements of the TDM process. Content also provides for an understanding of how the TDM process can meet the child/youth's need for safety, permanence, and wellbeing.
- CWPT CA/N Systems - Provides instruction and practice opportunities in the FACES screens that would most frequently need to be completed over the course of a Child Abuse or Neglect report. Workers have the opportunity to familiarize themselves with the purpose of the information that is required. Workers accept a practice hotline report and enter information into the system from beginning to closure.
- CWPT FCS (Family Centered Services)/Prevention - Introduces new team members to case management with an intact family. Participants study the Generalist Intervention Process and the activities needed to engage, assess, plan, intervene, evaluate, and terminate case planning services over the life of a case. Participants learn to create immediate safety interventions as well as plan for long-term safety.
- CWPT Case Management Systems I - Provides instruction and practice opportunities in FACES screens that would most often need to be completed over the course of a Family-Centered Service case. Staff members open a practice case and enter information into the system from opening to closing.
- CWPT Alternative Care - Provides participants with the knowledge of the impact of out-of-home placement on children and families. Participants explore the family-centered out-of-home care process which includes: Adoption and Safe Families Act (ASFA), reasonable efforts, permanency goals, developing and utilizing permanency planning, and an understanding of permanency time frames. Participants discuss placement planning and selecting a home for a child, including planning for older youth in placement. Specific attention is placed on facilitating family support team meetings, court testimony, and ongoing responsibilities of staff including the continuous work of ensuring the safety and well-being of children/youth in the care and custody of the agency.
- CWPT – Case Management Systems II - Provides instruction and practice opportunities in FACES screens that would most often need to be completed over the course of an

Alternative Care case. Staff members open a practice case and enter information into the system from opening to closing.

Training specialists within the Children's Division Professional Development and Leadership team provide all classroom training to newly hired Children's Division staff. Missouri utilizes Foster Care Case Management (FCCM) contractors who also provide case management services to children in foster care. The classroom training curriculum for new staff within the FCCM agencies is the same as described above, minus the Child Abuse and Neglect session, as Children's Division is statutorily required to complete that body of work. The training is consistent with instruction received by newly hired staff within the Children's Division. The FCCM contractors may choose to join Children's Division classes, train the material themselves, or hire a pre-approved training vendor to provide instruction to their new staff.

Initial staff training requirements for Children's Division staff are tracked in the Employee Learning Center (ELC), a web-based database utilized throughout the Department of Social Services. The ELC provides the student notification of upcoming training classes that are required and scheduled, and access to their training record of completed classes.

For FCCM staff who join Children's Division classes, initial training is also tracked through the ELC. If FCCM staff receive the instruction through their own agency, the Children's Division Professional Development and Leadership team manager is provided quarterly reports to ensure those staff are receiving initial training, as required. The information includes the number of individuals who have attended training, the number who have completed the initial training, and if they completed the program on time.

The following table provides initial staff training data for calendar year 2022. The Child Welfare Practice Training program should be completed within four months of hire. Seventy-seven percent (77%, 310/403) of Children's Division staff members who completed initial staff training finished within the required timeframe. Eighty-six (86%, 177/205) of newly hired FCCM case managers who completed initial staff training finished within the required timeframe.

	Children's Division	Foster Care Case Management
New staff enrolled	498	237
Percentage who terminated employment before training was complete	19% (95/498)	14% (32/237)
Number who should complete training	403	205
Number remaining in training	59	28
Percentage who completed training	85% (344/403)	86% (177/205)
Completed training on time	310	177
Percentage completed on time	77% (310/403)	86% (177/205)

Training participants are surveyed immediately following each of the CWPT sessions. The following questions are asked on the surveys and responses are rated on a zero – 10 scale, with zero being not at all and 10 being all the time.

- How well did this training meet the objectives outlined?
- How likely are you to apply the knowledge and skills gained in this course to your work?
- How relevant was this training to your position?
- How effective were the trainers in helping you gain an understanding of your role in working with families?

Below are the average ratings that were given for the CWPT classes held in 2022. The ratings are representative of the 344 Children's Division staff who completed all sessions of CWPT.

	Objectives Met	Application	Relevancy	Trainer Effectiveness
<b>Foundations</b>	9	9	9	10
<b>Practice Model</b>	9	9	9	10
<b>Child Abuse/Neglect (CA/N)</b>	9	8	9	9
<b>Team Decision Meeting</b>	9	9	9	9
<b>CA/N Systems</b>	9	9	9	9
<b>Family-Centered Services</b>	9	8	8	9
<b>Case Management Systems I</b>	9	9	9	9
<b>Alternative Care</b>	9	9	9	9
<b>Case Management Systems II</b>	9	9	9	9

Employees are also given onboarding surveys that allow for input on the training received. These surveys are given at 30, 90, 180 and 365 days following employment. Surveys are reviewed by the Professional Development unit. This feedback has been used recently in the new



development of the Child Welfare Practice Training. Additionally, information is solicited from Regional Leadership during monthly meetings in regards to how the training is being implemented in the field. Lastly, staff are given a yearly training survey which they can give their input on classes that they would like to receive. These suggestions for training are then reviewed and considered for development during the creation of the training plan for the upcoming year.

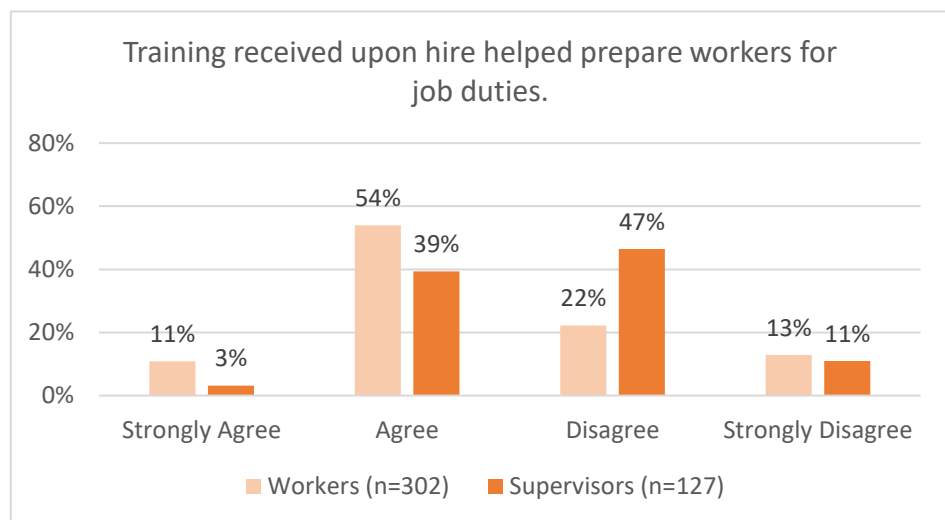
In July, 2023, the training department will implement Kirkpatrick’s Four Levels of Training Evaluation. All future classes will be written with behavioral outcomes that can be measured for performance. While employee surveys will still be utilized, the training department will also evaluate training through tests of knowledge, evaluation of behavior in the field, and performance results. This will allow the Professional Development unit to not only evaluate employee feedback but also to evaluate for outcomes.

In preparation for the CFSR Statewide Assessment event, Children’s Division and FCCM case managers and supervisors were asked to complete surveys which contained questions concerning initial staff training. For information on the survey distribution process, please refer to the “Description of Stakeholder Involvement in the CFSR Statewide Assessment” section of this document.

Case managers were asked to respond to the following question if they had been employed for less than two years: “The training I received upon hire helped prepare me for the job duties I was asked to perform”. There were 302 responses to this question.

Respondents strongly agreed or agreed with the statement 65% of the time (196/302).

Likewise, supervisors and managers were asked to respond to the statement: “The training workers



receive upon hire helped prepare them for the job duties they are asked to perform”. Of the 127 supervisors and managers who responded, 42% strongly agreed or agreed with the statement (53/127).

During the CFSR Statewide Assessment event session on Staff Training, there were several thoughts about why the discrepancy on preparation for job duties between workers and supervisors is present. Participants in the session represented both the Children’s Division and Foster Care Case Management agencies. Roles included front-line workers and supervisors,

trainers, training managers, and Children's Division Permanency Attorneys. Some of the thoughts mentioned were:

- Supervisors think the training should be how they were trained. Practice has changed in the past few years.
- Supervisors can't expect new staff to know everything. Supervisor expectations should be tempered.
- Workers don't know what they don't know until they don't know it.
- CWPT trains what policy states. Supervisors want to do things differently than training.
- Supervisors want CWPT to be skills based. Right now, it is knowledge based.
- Timing of the survey could be part of the difference. Some supervisors have had to carry a caseload. There is not much time to supervise.
- New workers are being pushed through training too quickly due to the staffing crisis.
- There is too much packed into the first few weeks and then they don't remember it when they are out of training.

It is a requirement in Missouri for case assignments not to occur until after a new worker has finished the initial staff training coursework. In an informal survey of the six Children's Division Regional Directors, they were asked to respond to the case assignment process in their geographic areas of responsibility. For new workers who will be assigned to investigation/assessment field work, no individual assignments are given before staff are finished with CWPT. New staff may join a more experienced staff member on home visits or to court hearings to observe the processes, but reports are not put in their names. For new workers who will be assigned to case management roles (either in-home or foster care), there is an increased likelihood that in areas with extreme staff shortages, new staff may be assigned cases prior to finishing training. However, if that happens, the cases are families that they will continue to serve post-training and the cases are selected very intentionally to be straightforward with limited known complicating factors. There is close supervision and mentoring in instances where new workers are assigned cases before training is complete. In situations where new workers are not assigned cases prior to training completion, their upcoming assignments are typically identified in advance and new staff shadow experienced staff on those cases to begin building relationships with the children and families.

While there has been a need for the training program to make adjustments over the past year due to the staffing situation in Missouri, the information provided has remained consistent. The Children's Division and FCCM agencies now train the same curriculum and there is a process for monitoring the initial training that FCCM agencies provide to their newly hired staff. Survey responses from staff hired within the past two years are more positive than negative. For these reasons, Missouri asserts that Item 26, Initial Staff Training, is a strength for the child welfare system.

## **Item 27: Ongoing Staff Training**

How well is the staff and provider training system functioning statewide to ensure that ongoing training is provided for staff that addresses the skills and knowledge needed to carry out their duties with regard to the services included in the CFSP so that:

- Staff receive ongoing training pursuant to the established curriculum and timeframes for the provision of ongoing training; and
- The system demonstrates how well the ongoing training addresses the skills and knowledge needed by staff to carry out their duties?

Ongoing staff training was determined to be an area needing improvement in CFSR Round 3. At that time, the training program did not provide the state with a mechanism to ensure that the ongoing training curriculum was consistent and delivered with fidelity in each region, due to regionalization of training unit staff. Stakeholders reported a need for specific ongoing training on topics such as domestic violence, mental health, and substance-affected infants. The Children's Division did not have a mechanism to monitor the completion or quality of ongoing training for contracted case management staff.

While some of the concerns noted in CFSR Round 3 have been resolved, other challenges for the successful functioning of an ongoing staff training program have arisen. For CFSR Round 4, Missouri asserts that Item 27 is an area needing improvement for the child welfare system.

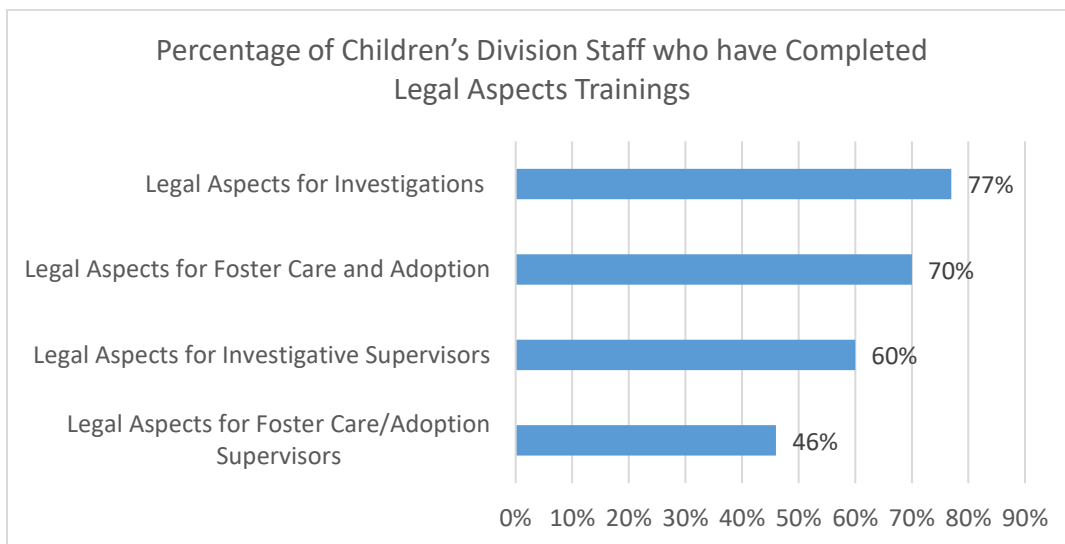
In August of 2020, the Children's Division's Professional Development and Training Unit was centralized under one manager to ensure consistent information is provided to training participants and to strengthen fidelity in delivery. A course on domestic violence is available as a web-based e-learning in the training catalog. Mental health courses have been offered in-person since CFSR Round 3, but are not currently available for staff to attend.

The Manager Center for the Employee Learning Center (ELC) allows supervisors to manage and track their staff's training. Supervisors can review and schedule classes as they appear on the employee's Training Plan and Training Record. Gap analyses are run for a number of required classes on the training plan. These are run quarterly to identify staff who need to complete certain classes. Staff and their supervisors receive email notifications when required trainings are coming due or are overdue. Supervisors then follow-up with individual staff who need to attend specific classes. Supervisors also have the ability to enroll their staff in any of the missing classes.

Chapter 210.180 of Missouri statute states that Children's Division employees who are responsible for the investigation or family assessment of reports of suspected child abuse or neglect shall receive no less than forty hours of pre-service training on the identification and treatment of child abuse and neglect. In addition to such pre-service training, such employees shall also receive no less than twenty hours of ongoing training each year on the subject of the identification and treatment of child abuse and neglect.

The annual 20 hours of required ongoing training for investigative/assessment staff can be obtained through identified course offerings through the agency training program, such as Trauma Toolkit, Legal Aspects trainings, and Human Trafficking, as well as external conferences, workshops, seminars and certain local community trainings. In fiscal year 2022, 74% (329/442) of staff received the required 20 hours of 210 trainings. Foster Care Case Management staff are not required to participate in 210 trainings since they have no responsibility for the completion of investigations or assessments.

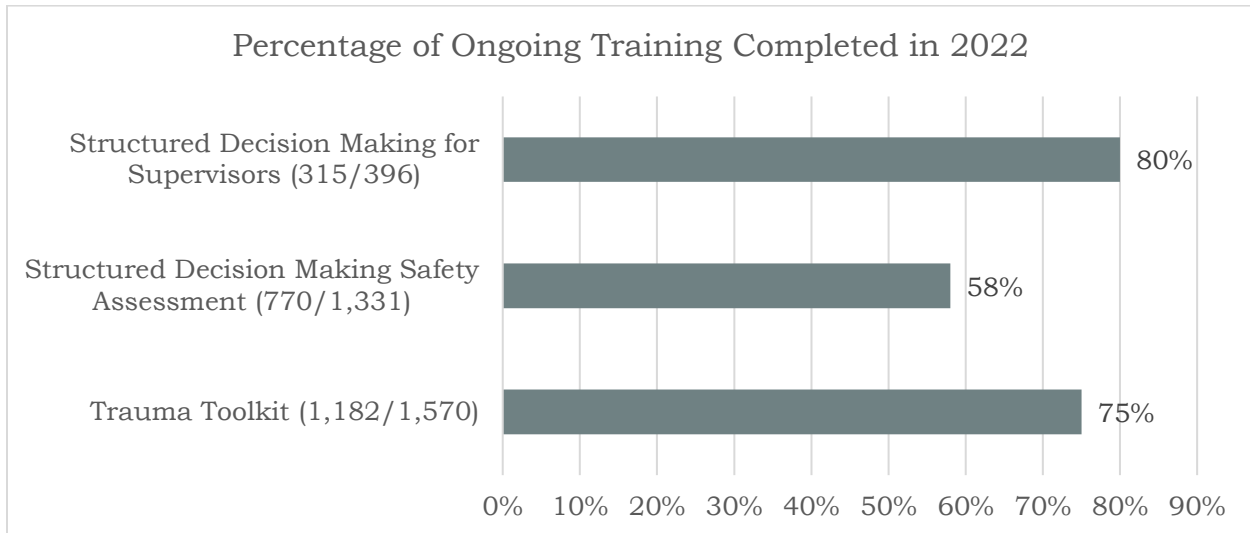
The ongoing staff training package includes a variety of Legal Aspects trainings that educate staff on requirements found in federal and state legislation. These sessions are taught by attorneys specializing in child welfare law. The chart below outlines the percentage of staff who have completed the classes as required in calendar year 2022. Legal Aspects for Investigators was completed with the most frequency (77% - 298/386). Legal Aspects for Foster Care and Adoption Supervisors was completed with the least frequency (46% - 86/187). The other Legal Aspects classes had completion rates of 70% (383/545) and 60% (83/139) as noted in the chart. Foster Care Case Management contractors assumed responsibility for training the Legal Aspects for Foster Care and Adoption classes for their workers and supervisors in the fall of 2022, however turnover in the training unit of one of the FCCM agencies caused a delay in FCCM staff receiving the Legal Aspects sessions. In addition to the virtual classroom education, the Legal Aspects trainers host Lunch and Learn sessions each month. Registration for those events is open to any Children’s Division or FCCM staff who wish to attend.



Other required ongoing trainings include Structured Decision Making (SDM) for Supervisors, SDM Safety Assessment for Frontline Staff, and Trauma Toolkit for New Staff. Capacity of the training unit staff has been impacted by the staffing shortage and frequent turnover in new worker positions. The trainers have been asked to prioritize initial staff training and to offer shorter CWPT sessions more frequently to ensure newly hired staff are able to assume case management duties, providing relief to more tenured staff. Due to this, the ability to offer the SDM and Trauma Toolkit sessions has decreased. The Professional Development and Training

Unit is working on an E-learning package for the SDM classes. Trauma Toolkit classes continue to be offered, but not at the frequency needed to ensure all required staff are able to attend at their convenience.

The following chart provides the completion rates for these ongoing staff trainings. Despite the challenges, over half of the staff who needed to attend the sessions in 2022 have done so.



Education about Human Trafficking is also an ongoing training package that is required for all staff. The Children’s Division decided to bring this training in-house in 2021 instead of it being contractor-led prior to 2021. The Introduction to Human Trafficking classes and completion rates are outlined below.

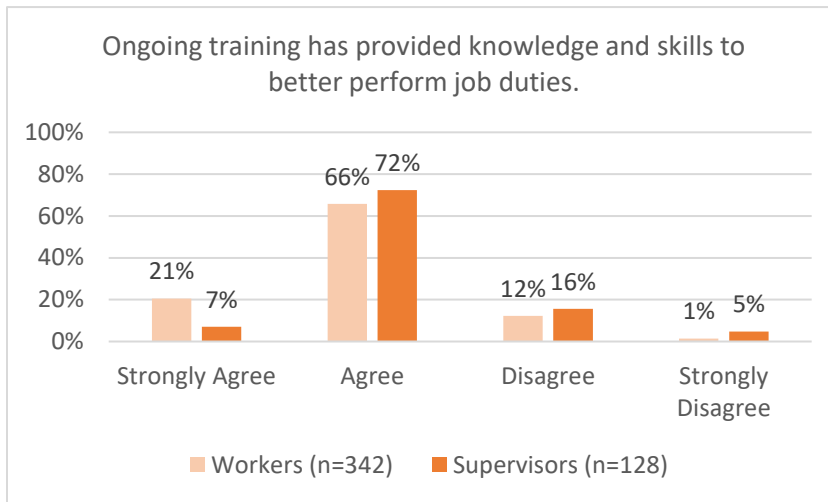
	<b>Children’s Division</b>	<b>FCCM</b>
Introduction to Human Trafficking for Frontline Staff	46% (1,068/1,678)	14% (43/301)
Introduction to Human Trafficking for Supervisors	40% (161/403)	10% (7/71)

The introduction classes are e-learnings housed on the Employee Learning Center. There have been problems with the training stopping mid-way through, not allowing the participant to advance and complete the session. The Professional Development and Training Unit staff are working to resolve the issue and increase the completion rates.

A follow-up Advanced Human Trafficking training was introduced in August of 2022. This is an instructor-led virtual learning class. Sessions have been held twice monthly since its introduction. However, the capacity of the training unit is such that they are unable to offer more sessions to provide staff access to the training in a timely manner. The FCCM trainers were recently trained to teach this class to offer more availability.

In preparation for the CFSR Statewide Assessment event, Children’s Division and FCCM case managers and supervisors were asked to complete surveys which contained questions concerning ongoing staff training. For information on the survey distribution process, please refer to the

“Description of Stakeholder Involvement in the CFSR Statewide Assessment” section of this document.

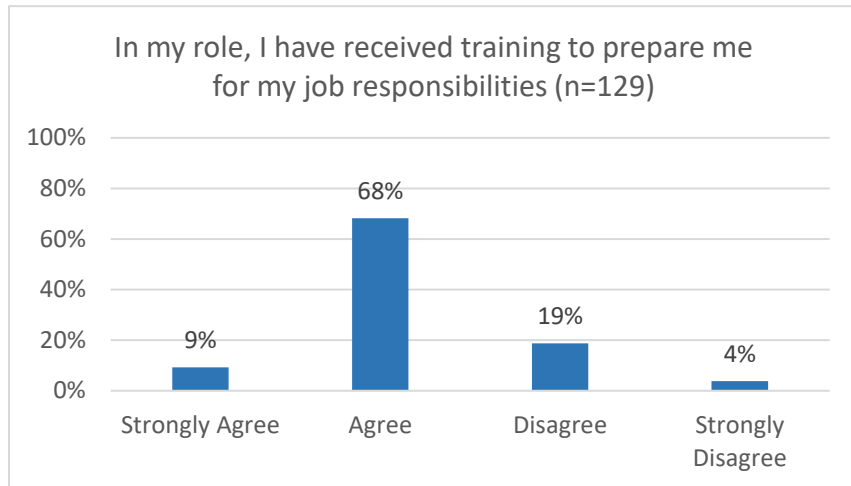


Case managers and supervisors were asked to respond to the statement “Ongoing training has provided knowledge and skills to better perform job duties”. Eighty-seven percent (87%) of workers strongly agreed or agreed with this statement (298/342) while 79% of supervisors strongly agreed or agreed (101/128).

The topics for needed ongoing training is informed through a variety of mechanisms. Changes to state or federal law often dictate when new training sessions are developed. In the past year, the Professional Development and Training Unit has conducted focus groups with supervisors and workers to ask them to describe their training needs. In addition, a survey was sent to all Children’s Division staff in the summer of 2022 to further assess whether the trainings being offered were meeting their learning needs. Some feedback from those activities pointed to a desire for more trauma awareness training and court testimony training.

During the CFSR Statewide Assessment event session on Staff Training, participants were asked via an online poll to identify training topics that need to be provided on an ongoing basis that are not routinely available. Participants in the session represented both the Children’s Division and Foster Care Case Management agencies. Roles included front line workers and supervisors, trainers, training managers, and Children’s Division Permanency Attorneys. Some of the topics that were consistently mentioned include documentation training, conflict management/resolution skill building, and strengthening relationships with parents and foster parents.

Supervisors across the Department of Social Services were required to receive 52 hours of leadership training in fiscal year 2022. This number has reduced to 40 hours of training for FY2023. The MO Learning website through LinkedIn Learning offers a variety of online educational opportunities on a large variety of topics. In FY2022, 95% of required staff completed at least 52 hours of leadership training.



Supervisors surveyed in preparation for the CFSR Statewide Assessment Event were also asked to respond to the statement “In my role, I have received training to prepare me for my job responsibilities”. Strongly agree or agree were selected by 77% of the respondents (99/129).

A Children’s Division training focused solely on those in supervisory roles was in development, but has been placed on hold due to the current attention being placed on Child Welfare Practice Training (pre-service training).

Information is solicited from Regional Leadership during monthly meetings in regards to how the training is being implemented in the field. Lastly, staff are given a yearly training survey which they can give their input on classes that they would like to participate in. These suggestions for training are then reviewed and considered for development. This is completed during the creation of the training plan for the year so to include staff input in future training.

While ongoing staff training has continued to be offered to frontline staff and those in supervisory and management roles, there have been roadblocks to fully implementing the program as designed. Due to the staffing shortage, tenured staff are assigned caseloads that exceed normal standards, limiting the amount of time they are able to attend ongoing training opportunities. The Professional Development and Training Unit has been asked to focus their efforts on initial staff training so newly hired workers can receive training more quickly and provide relief to current staff. For these reasons, Missouri believes that Item 27, Ongoing Staff Training, is currently an area needing improvement.

## **Item 28: Foster and Adoptive Parent Training**

How well is the staff and provider training system functioning to ensure that training is occurring statewide for current and prospective foster parents, adoptive parents, and staff of state licensed or approved facilities (who receive title IV-E funds to care for children) so that:

- Current or prospective foster parents, adoptive parents, and staff receive training pursuant to the established annual/biannual hourly/continuing education requirement and timeframes for the provision of initial and ongoing training; and
- The system demonstrates how well the initial and ongoing training addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children?

Item 28 was rated as an area needing improvement during the Round 3 CFSR. Missouri asserts that Foster and Adoptive Parent Training is a strength for CFSR Round 4.

For foster home license approval, 27 hours of pre-service training is required. Missouri has been in an assessment period to determine the pre-service curriculum that will best meet the needs of prospective foster and adoptive parents moving forward. The Children's Division's current foster parent pre-service curriculum is called STARS. The STARS curriculum is competency-based, teaching foster parents the importance of:

- Protecting and Nurturing
- Meeting Developmental Needs and Addressing Developmental Delays
- Supporting Relationships between Children and their Birth Families
- Connecting Children to Safe, Nurturing Relationships Intended to Last a Lifetime
- Working as a Member of a Professional Team

The Northeast and St. Louis regions of the state have continued to utilize this training.

The Children's Division was selected from a finalist list of 16 tribes and states for a national training curriculum pilot, National Training and Development Curriculum for Foster and Adoptive Parents (NTDC). The NTDC was funded through a five year cooperative agreement with the Department of Health and Human Services, Administration for Children and Families, Children's Bureau and the following: Spaulding for Children, School of Social Work, University of Washington, National Council for Adoption, North American Council on Adoptable Children, Center for Adoption Support and Education, and Child Trauma Academy. The pilot was completed in 2022 with the Kansas City and Northwest regions participating. Those regions continue to utilize the NTDC curriculum.

In response to concerns reported to Department of Social Services regarding the length of time it takes to complete the licensure process of a new resource home applicant, a taskforce was developed in late spring of 2019 to explore the barriers and how to expedite the process. The result was a project to develop a pre-service training that takes less in-class training time. The Southern regional training units worked together during the summer of 2019 to create STRONG



(Supportive Team Relations for Ongoing Nurturing and Growth of Children and Families). The STRONG pre-service training incorporates the required competencies listed above. The Southwest and Southeast regions have been training this model since September of 2019.

In the fall of 2022, the Children's Division began synthesizing the information from all three pre-service curriculums to determine which would best serve Missouri foster and adoptive families. The new curriculum is expected to be introduced in July of 2023, incorporating elements of all three programs. The new curriculum will be called Missouri Caregiver and Adoption Resource Education (MO C.A.R.E.).

In 2022, there were 1,194 household members who required pre-service training. Ninety-six percent (96%) completed the required number of pre-service training hours prior to their home being licensed (1,143/1,194).

In addition to the 27 hours of pre-service training, parents who wish to be considered for adoption are required to have 12 hours of Making the Commitment to Adoption (Spaulding) Pre-service training prior to receiving approval as an adoptive home. Ongoing training for adoption approval is not required. The majority of homes which are approved for adoption are also licensed as a foster or relative provider and must meet in-service training hours to maintain their license.

Also in 2022, 1,665 household members were in the initial adoption approval period. Of those prospective adoptive parents, 96% (1,665/1,731) received the required training prior to approval.

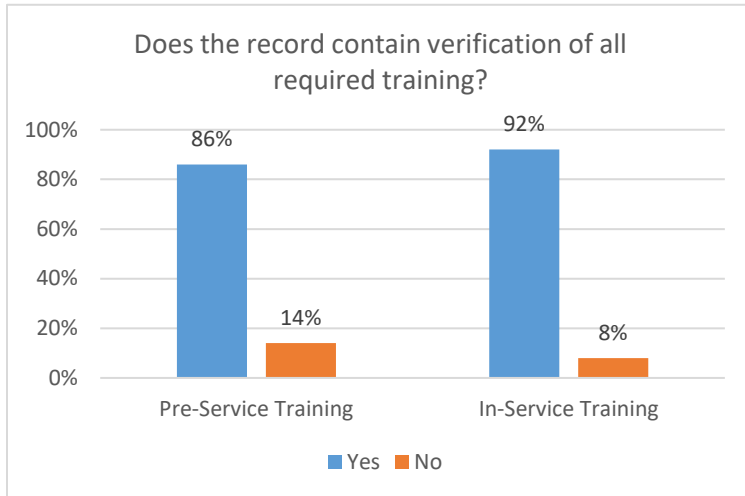
Foster home licenses are renewed every two years. Prior to renewal, 30 hours of in-service training are required. All training hours are entered into the FACES system. Each resource vendor has a screen where the completed training classes and hours may be viewed.

Policy requires that if the home does not meet the training hour requirement, the home is closed. Reminders to complete the required hours of training are given at each quarterly home visit. At 90, 60, and 30 days prior to license expiration, a letter is sent informing the resource home of any delinquencies to have their license renewed prior to expiration. This letter includes training hours that may still need to be completed in order for renewal to occur.

As identified in Children's Division policy, some examples of required in-service trainings are listed below.

- CPR and First Aid
- Trauma Care
- Psychotropic Medication Management
- Informed Consent
- Laws, Policies, and Procedures Governing Child Welfare
- Importance of Sibling Placement
- Reasonable and Prudent Parenting Standard
- Foster Care Bill of Rights

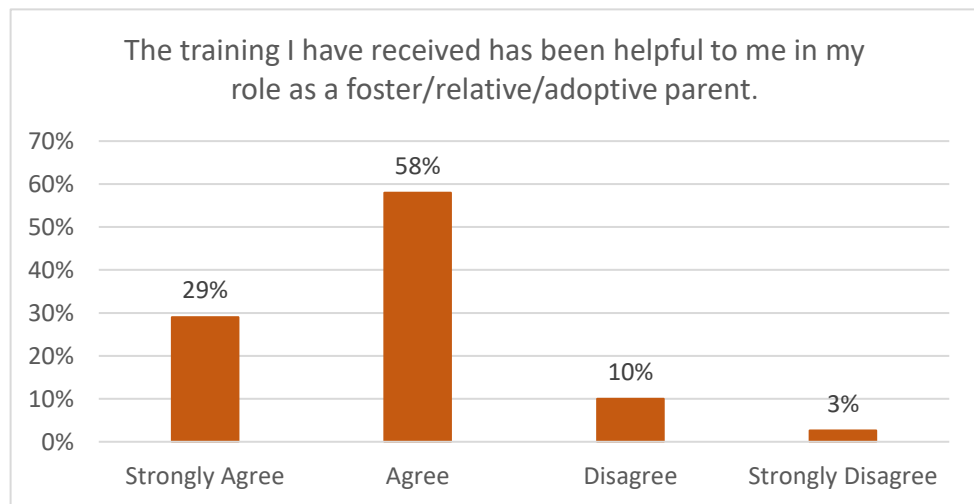
In 2022, 83% percent of homes were re-licensed with all household members receiving at least 30 hours of in-service training (1,110/1,342).



A case review of vendor records was completed in the fall of 2021 by the Quality Assurance System and Foster Parent Licensing, Recruitment, and Retention staff. The review tool asked if the foster parent licensing record contained verification of all required pre-service and in-service trainings. Pre-service trainings were documented in 86% of the records (12/14) and in-service trainings were documented in 92% (22/24) of the records reviewed.

In preparation for the CFSR Statewide Assessment event, foster, relative, and adoptive parents were asked to complete surveys which contained questions concerning pre-service and ongoing training for parents who care for foster children. For information on the survey distribution process, please refer to the “Description of Stakeholder Involvement in the CFSR Statewide Assessment” section of this document.

Foster, relative and adoptive parents were asked to respond to the statement “The training I have received has been helpful to me in my role as a foster/relative/adoptive parent”. Survey participants strongly agreed or



agreed with the statement 87% of the time (166/191), noting that the training they have received has been helpful in caring for the children in their homes.

The survey also queried what trainings topics would be helpful in their roles as foster parents. The questions was a short-answer, so parents responding were able to type in their responses The top five most frequently listed topics are below:

- Dealing with children’s behaviors

- Understanding trauma
- The “system” and how it works
- Working cooperatively with biological parents
- Understanding court proceedings

During the CFSR Statewide Assessment event session dedicated to foster parent issues, participants were asked via an online poll to identify if the topics above are offered to foster parents. Participants included foster and relative parents, Children’s Division executive leadership, Children’s Division and contracted workers and supervisors who license foster parents, and juvenile office representatives. The results of the online polling indicate that for most of the topics identified, training is available.

	Yes	No	I’m Not Sure
Dealing with children’s behaviors	91% (10/11)	9% (1/11)	--
Understanding trauma	73% (8/11)	--	27% (3/11)
The “system” and how it works	70% (7/10)	20% (2/10)	10% (1/10)
Working cooperatively with biological parents	60% (6/10)	20% (2/10)	20% (2/10)
Understanding court proceedings	55% (6/11)	27% (3/11)	18% (2/11)

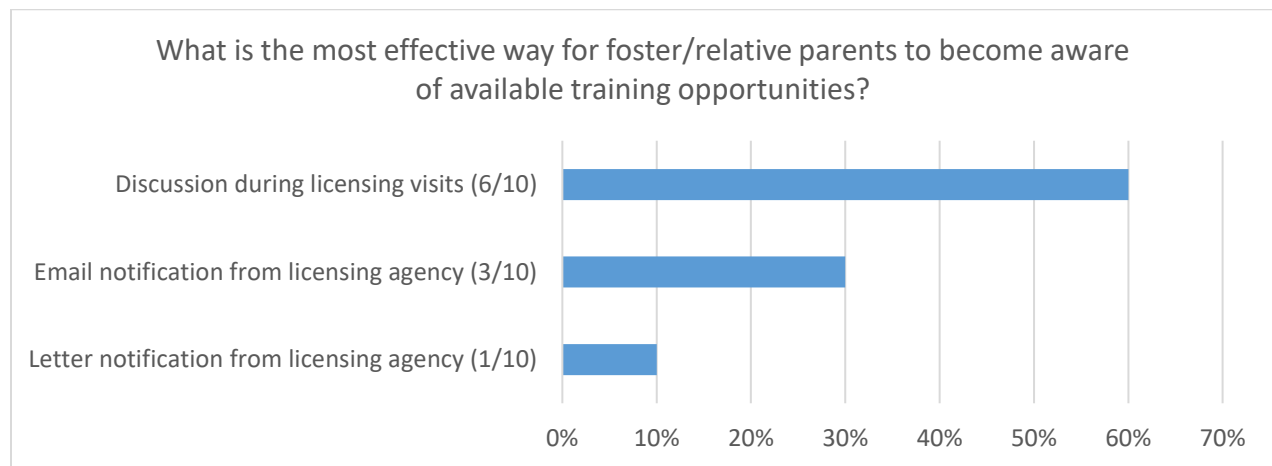
During each quarterly home visit of the licensing worker to the foster parent home, the worker and the foster parent(s) review the Professional Family Development Plan (PFDP) to determine what in-service trainings would be beneficial to enhance the parenting skills of the parents. The PFDP includes conversation around the following questions:

- What are the family’s strengths? How does the family plan to build on these strengths? What are the concerns and stressors the family has regarding providing services as a foster/relative provider? What are the family’s goals within this program (continue as they are, change the ages of children they accept for placement, take teens or infants, become approved to provide level A foster care services, etc.) How is the family meeting each competency?
- What training needs can be identified to address the concerns and issues identified? (Targeted areas for skill development and enhancement – are they concerned about discipline techniques, need skills in working with teens, would like information on working with children who have been sexually abused, etc.)
- What specific areas will be improved when change has occurred? What will it look like when change has fully occurred? (goals)

The worker and the foster parents then develop a plan to address any training needs. The worker provides information to the foster parents, letting them know where and how to access training opportunities to meet their individual needs. These visits are also an opportunity for the foster

parents to provide feedback about the effectiveness of any trainings they have received in the weeks preceding the visit and discuss how they are putting the learning into practice.

Participants in the CFSR Statewide Assessment event were asked to identify the most effective ways for foster and relative parents to receive notification of available training opportunities. Consistent with the process described above, the majority of event participants indicated that discussions between the licensing worker and the foster parents is the most effective method.



The following training requirements for the staff of state-licensed or approved facilities are established in the Rules for Licensing. An agency shall establish and submit to the licensing unit an annual written plan of training each year for all employees and contracted personnel.

Employees and contracted personnel shall have 40 hours of training during the first year of employment and 40 hours annually each subsequent year. At the time of license renewal, non-accredited agencies submit a form (RPU-10 Personnel Report) which documents the hours of training for every employee. During the on-site license renewal visit and supervisory visits, the Licensing Consultant reviews a random sample of employee files and will verify that the employee has had 40 hours of training.

Direct care staff and immediate supervisors must maintain certification in a certified medication training program, crisis management, a current recognized and approved physical restraint program (where applicable), first aid, and cardiopulmonary resuscitation.

All training must be documented on a training database/training log with the date, location, and subject, the number of hours earned, and person(s) who conducted the training.

The training may include, but not be limited to, short-term courses, seminars, institutes, workshops, and in-service training provided on site by qualified professionals. Activities related to the supervision of the staff member's routine tasks shall not be considered training activities for the purpose of this rule.

The training plan shall include, but not be limited to:

- Developmental needs of children;
- Child management techniques;
- Basic group dynamics;
- Appropriate discipline, crisis intervention, de-escalation techniques, and behavior management techniques;
- The direct care and professional staff roles in the operating site;
- Interpersonal communication;
- Proper, safe methods, and techniques of physical restraint;
- First aid and cardiopulmonary resuscitation training;
- Medication training and/or certification;
- Suicide prevention;
- Legal rights of children and their families, including basic information on the constitutional rights of children and their families while children are in care and basic information on the Missouri juvenile justice system; and
- Water safety for those agencies allowing water activities.

If it is found that the residential staff does not have the 40 hours of required training, the agency will be asked to develop and submit a corrective action plan to RPU (Residential Program Unit). As a general rule, the agency has 30 days from the date of the supervisory visit to submit the corrective action, but variations can occur.

RPU Licensing staff conduct supervisory visits during the two (2) year licensing period for all licensed residential agencies. Supervisory visits may include but are not limited to; review of a random sample of personnel records, review of a random sample of resident records, inspection of the building and grounds, review of program and/or policy changes, review of non-compliances found on a previous supervisory visit. Training is reviewed in the personnel records. Licensing staff will review a random sample of personnel records for compliance with licensing regulations. At least three personnel records from each licensed agency are reviewed in-depth each year. In addition, 10 or 10%, whichever is greater, of the agency's personnel records are reviewed for compliance with background checks each year. Licensing staff verify that the personnel have received their 40 hours of training annually and that they have received all of the required trainings per licensing regulations. Licensing staff will verify that direct care staff and supervisors are current with CPR/First Aid, Medication Management, and Restraint/De-escalation, if applicable.

Between July 1 and December 31, 2022, there were 102 agency visits conducted by members of the RPU Licensing Unit. As a result of those visits, there were 21 non-compliance citations for issues related to staff training (21%). Non-compliances for training could include missing and/or lack of training documentation, missing and/or lack of training due to non-completion, failure to complete the required number of annual training hours, or expired required training certifications such as First Aid, CPR, medication management, and de-escalation/restraint (for agencies that use restraint).

Foster, relative, and adoptive parents are regularly receiving the trainings as required by Missouri statute and state policy. The trainings are seen as effective and meet the needs of foster parents. There are avenues in place to identify training needs of individual foster parents through ongoing conversations with their assigned licensing workers. For these reasons, Missouri asserts that Item 28 is a strength for the child welfare system.

## SERVICE ARRAY AND RESOURCE DEVELOPMENT

### Item 29: Array of Services

How well is the service array and resource development system functioning to ensure that the range of services specified below is available and accessible in all political jurisdictions covered by the CFSP?

- Services that assess the strengths and needs of children and families and determine other service needs;
- Services that address the needs of families in addition to individual children in order to create a safe home environment;
- Services that enable children to remain safely with their parents when reasonable; and
- Services that help children in foster and adoptive placements achieve permanency.

Item 29 was rated as an area needing improvement during the Round 3 CFSR. During interviews, stakeholders described gaps in services and waiting lists for services such as Intensive Family Reunification Services, Intensive In-Home Services, substance abuse treatment, mental health services, domestic violence services, and housing assistance. Missouri asserts that Array of Services is a strength for CFSR Round 4.

#### Services Assessing the Strengths and Needs of Children and Families and Determine Other Service Needs

The Children's Division primarily becomes aware of children and families who might need services through referral to the Child Abuse/Neglect Hotline. The Children's Division assesses the strengths and needs, to include service needs, of children and families throughout the investigation/ assessment process. Investigation/assessment services reach all jurisdictions throughout the state of Missouri and are provided by Children's Division staff. If it is determined families need services, there are several avenues by which families can continue to be assessed and provided with the needed assistance to address child safety and well-being. Referrals to community agencies may occur, if deemed appropriate, or it may be determined that families would benefit from formal services provided by the Children's Division and/or the court system.

Families with open Family-Centered Services (FCS) cases or whose children enter foster care, are continually assessed for service needs throughout their work with the Children's Division. Assessment can occur informally, through ongoing conversation between the assigned case manager and parents and/or children. Case managers meet with families on a regular basis and portions of those conversations focus on determining what services best meet the needs that brought the families to the attention of the Children's Division as well as how active services are addressing the needs. Assessments also occur through formal avenues, including psychological evaluations and substance use assessments, for example. Ongoing contact between the case managers and service providers who work with families provide information to accurately assess families' needs. Team Decision Making meetings for FCS families and Family Support Team

meetings for families with children in foster care, also provide opportunities for assessment of needs and involved all parties involved with the children and families.

The Show Me Healthy Kids Health Plan (SMHK) provides health care to Missouri's foster care children. The plan works with many doctors, clinics and hospitals to provide regular checkups, exams, primary care, and specialist care when needed. Each child in foster care is assigned a case manager who completes health risk screenings to assess for medical, dental, and behavioral health needs. This service is available throughout the state of Missouri.

With few exceptions, youth in foster care are enrolled in the Older Youth Program and assigned a Chafee worker who works with youth ages 14 and older to assess their needs around preparation for adulthood, regardless of permanency goal. Chafee staff meet with the youth at least once a quarter to identify the areas of need the youth is most concerned about or interested in and to develop steps to address those needs.

### Services Addressing the Needs of Families and Individual Children to Create a Safe Home Environment

Head Start and Early Head Start services are available throughout the state to help families ensure children are receiving quality child care services to help with school readiness. First Steps is another early childhood program available for families throughout Missouri. First Steps is provided through the Department of Elementary and Secondary Education and offers coordinated services and assistance to young children with special needs and their families. First Steps is designed for children, birth to age three, who have delayed development or diagnosed conditions associated with developmental disabilities.

Crisis Care provides temporary care for children whose parents/guardians are experiencing an unexpected and unstable/serious condition requiring immediate short term care, and without this care, the children are at risk for abuse and neglect or at risk of entering state custody. Crisis Care services are provided free of charge to families voluntarily accessing services in response to a family emergency. Crisis Care services are available twenty-four hours a day, seven days a week. A child will be accepted at a crisis care facility at any time, day or night if space is available. Currently, there are eight crisis care facilities across the state.

In January 2021, the Governor of Missouri signed an Executive order to increase collaboration between most state agency programs serving pregnant women and families with children up until kindergarten entry. This has led to the establishment of the Office of Childhood (OOC) within the Department of Elementary and Secondary Education (DESE) beginning in August 2021, providing the opportunity for home visitation programs from DESE, DHSS, and DSS to become the Home Visiting Section within the OOC. In this newly formed office, the DSS Home Visiting Program (now titled Child Abuse and Neglect (CA/N) Prevention Home Visiting), has the opportunity for direct collaboration with the DESE Home Visiting Program, which currently implements the Parents as Teachers model in all Missouri school districts. The program provides various opportunities for parents to gain skills in the areas of early childhood development and education, improving parenting skills, school readiness, and child abuse and neglect prevention. The Home Visiting program also provides the parents with training and support groups,



developmentally appropriate books and toys for the children, as well as various incentives for the parents to keep them engaged in the program. After the child ages out of Home Visiting, they are referred to a Head Start or another early learning program to maintain educational services with the family.

#### Services Enabling Children to Remain Safely with their Parents when Reasonable

Families entering the child welfare system due to reports of child abuse or neglect receive case management services referred to as Family-Centered Services (FCS). Family-Centered Services are available throughout the state and are provided to help children safely remain in their homes when possible. FCS include a range of treatment and support services that focus on strengthening families for the well-being of children. Services aim to prevent child maltreatment and promote healthy and appropriate parenting skills. FCS programming is available in all areas of the state and is provided by Children's Division staff.

Intensive In-Home Services (IIS) is a short-term, intensive, home-based program which offers families in crisis an alternative to out-of-home placement through the enhancement of family capabilities. Intensive In-Home Services are typically provided to families with a significant risk of maltreatment, which would likely lead to child removal from the home if intervention to address child safety is not immediate. An initial referral and intake meeting with the family occurs to assess the family's need and commitment to participating in the program. Cases typically remain open for four to six weeks. During this intensive service provision, a Family-Centered Services case is also opened to provide an additional layer of support to the family and to continue case management services beyond the four to six weeks of the program, should they be needed.

Intensive Family Reunification Services (IFRS) is a short-term, intensive, family-based program for children who are in out-of-home care and who, with intensive intervention, can reunify with their family. The Intensive Family Reunification Services program is based on the belief families can, through intensive intervention, improve their functioning, learn to meet the needs of their children, and gain support from within their community. The goals of IFRS are to assist the family in removing barriers to the return of their child(ren), assist in the transition of returning the child(ren) home, and develop a plan with the family who will maintain the child(ren) safely in the home following the intervention.

For both Intensive In-Home and Intensive Family Reunion Services, contracted service providers are in the home between 10-20 hours each week and provide direct services to meet families' needs. Direct services may include assistance with household management, child development or parenting education, job readiness assistance, or nutritional training. Intensive In-Home and Intensive Family Reunification Services are available to all 46 circuits within the State of Missouri. The IIS and IFRS program is provided through purchased services by vendors contracted with the state.

## Services Helping Children in Foster and Adoptive Placements Achieve Permanency

Case management services for children in foster care are provided statewide by the Children's Division staff or Foster Care Case Management contracted partners. Foster care is intended to be short term until permanency may be achieved. The goal for most children in foster care is to return to their caregiver(s) when circumstances which led to out-of-home placement have been resolved. However, sometimes children are not able to return home and another avenue to permanency is pursued.

When reunification is no longer a viable option for permanency, adoption or guardianship may be pursued to provide permanency for children. Family Resource Centers are available throughout each region of Missouri and work with Children's Division to provide support, services, and resources to meet the unique needs of foster, adoptive, relative, and guardianship children and their families. Specific examples of services include training opportunities, peer support groups, financial and material supports, and advocacy services.

The Older Youth Program (OYP) provides services to youth age 14 and older, regardless of the case plan, through life skills teaching and youth leadership opportunities including leadership boards, financial assistance for post-secondary education, and subsidized living arrangements. The OYP reflects the philosophy and the services offered to foster youth, and the program addresses permanency and positive youth development.

There are 20 Missouri Community Partnership initiatives which strive to bring together public/private partnerships to support the wellbeing of Missouri families. The prevention of maltreatment of children and the safety of families are paramount within the Missouri Community Partnership initiatives. These partnerships are all non-profit organizations governed by local, broad-based and diverse boards that seek to address local needs. Their outreach extends to the majority of the state and includes a wide array of services primarily focusing on six core result areas: Parents Working, Children Safe, Children Ready to Enter School, Children & Families Healthy, Children & Youth Succeeding in School and Youth Ready to Enter the Work Force.

Their ability to address each community's unique needs is greatly enhanced by the large source of local volunteerism. During the current fiscal year, the partnerships have generated over 140,000 hours of volunteer service to their respective communities. In addition to the many service hours generated by the partnerships, they leveraged over \$13.00 for every \$1.00 of state funding provided them in FY22 and served over 550,000 clients across the state.

Children's Division also funds a variety of therapeutic and adjunct treatment services for the prevention and treatment of victims of abuse or neglect through the Children's Treatment Services (CTS) contract. The goals of these services are to:

- Provide services which ensure the safety and well-being of the children with any active involvement with the Children's Division,
- Promote the preservation and reunification of children and families consistent with state and federal law, and

- Support concurrent and post-permanency efforts for children and families consistent with state and federal law.

The CTS contract has been revised and the following services have been added in an effort to provide more evidence-based services to facilitate better outcomes for children and families: behavioral health services, speech and vision therapy, Domestic Violence Batterer’s Intervention Program, nursing services, personal assistance (behavioral and medical), pervasive development services coordinator, and substance abuse treatment services. The contract revisions create a more streamlined contracting process and better define services and provider qualifications.

In preparation for the CFSR Statewide Assessment Event held in late February and early March of 2023, surveys were sent to a variety of stakeholder groups. For a completed description of the survey distribution process, please refer to the “Description of Stakeholder Involvement in the CFSR Statewide Assessment” section of this report.

A total of 809 surveys were returned from the following stakeholder groups regarding service array and availability in Missouri:

- Parents with lived experience – 56 surveys returned
- Foster, relative, and adoptive parents – 190 surveys returned
- Judges and Juvenile Officers – 42 surveys returned
- Attorneys who serve children and families involved with the Children’s Division – 47 surveys returned
- Children’s Division and Foster Care Case Management workers and specialists – 345 surveys returned
- Children’s Division and Foster Care Case Management supervisory and management staff – 129 surveys returned

Survey respondents were asked to select the services, by category, that they felt were readily available in their area of the state to meet the needs of children and families. They could mark all categories that they felt applied to best answer the question. The following table identifies the percentage of respondents who felt the service was available in the area of the state they live and/or work. Bolded information represents the highest (blue) and lowest (red) percentages in each region.

	KC	Northeast	Northwest	St. Louis	Southeast	Southwest
	n=75	n=122	n=121	n=52	n=187	n=218
Child Care	68%	48%	51%	44%	58%	46%
Clothing Closet	68%	68%	63%	60%	70%	65%
Dental Services	60%	59%	57%	48%	63%	59%
Employment Services	<b>37%</b>	34%	40%	<b>27%</b>	58%	47%
Homemaking Services	15%	13%	14%	20%	17%	8%
Housing Assistance	54%	54%	66%	45%	66%	50%
Legal Representation	52%	49%	48%	<b>65%</b>	52%	57%
Medical Services	<b>80%</b>	<b>71%</b>	<b>79%</b>	63%	<b>83%</b>	<b>76%</b>
Mental Health Services	64%	54%	56%	37%	71%	66%
Parenting Education	70%	56%	65%	<b>65%</b>	70%	64%
Substance Abuse Treat.	49%	52%	52%	29%	73%	62%
Transportation Services/ Public Transportation	40%	<b>17%</b>	<b>25%</b>	40%	<b>40%</b>	<b>31%</b>
Visitation Supervision	51%	42%	40%	42%	49%	47%

Notable observations from the table above include:

- Medical services were believed to be most readily available throughout the majority of the state.
- Homemaking services were believed to be the least readily available. This may be a survey flaw, with a lack of definition as to what homemaking services include. Intensive In-Home Services and Intensive Family Reunification Services described above include many options to help with the improvement of living situations for families.
- With the exception of Kansas City and St. Louis, transportation services were believed to be the least available in the more rural areas of the state.
- It was felt that substance abuse treatment is more readily available in the southern part of Missouri and least available in St. Louis.
- Mental health services were believed to be least readily available in St. Louis.
- Legal representation was believed to be most readily available in St. Louis and child care was believed to be most readily available in Kansas City.

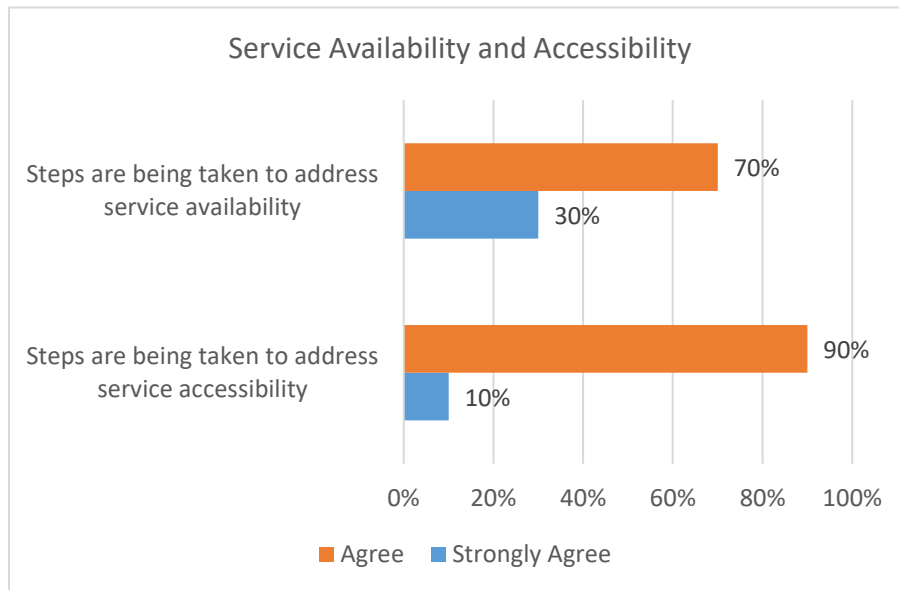
Survey participants were also asked to identify what services are needed but not readily available in their areas. The most common responses were:

- Child care, especially for children under 2
- Transportation
- Mental health services have long wait lists
  - Professionals to complete psychiatric and psychological evaluations

- Substance abuse treatment
- Housing assistance

Throughout the various sessions of the CFSR Statewide Assessment Event, common themes regarding service array were evident. Participants in many sessions identified mental health services for children as a service gap in Missouri, with particular impact to Permanency Outcome 1, Stability of Placement and Timely Permanency. Mental health services for parents and substance abuse treatment were also frequently mentioned as service needs for many communities in Missouri.

The CFSR Statewide Assessment Event that focused specifically on Array of Services was attended by a variety of stakeholders. Participants in this group included Children’s Division front line staff and central office leadership, foster parents, service providers, partner agencies to include the Department of Mental Health and the Missouri Health Department, attorneys who represent children and families, juvenile office representatives, and youth with lived experience. During the course of the discussion, it was noted that rural areas of the state may not have the variety and accessibility of services that are present in more urban areas of the state. Rural citizens may have to travel some distance to locate services. Service challenges in the urban areas include the volume of people who need access to the available services, creating wait lists in some instances. Discussion among these participants noted that many services are available throughout the state, but in some instances there may be a lack of knowledge or understanding by parents, foster/relative parents, or adoptive parents about how to access the services that do exist.



Through the use of online polling, session participants were asked whether they agreed or disagreed that there were steps being taken to address service availability and service accessibility. Ten participants chose to respond to the online poll. All respondents either strongly agreed or agreed with both statements (100%, 10/10).

Session participants were also asked to identify if there are services available in Missouri that are underutilized. Transportation contracted services, legal representation for parents, visitation

supervision services, and health services available through Show-Me Healthy Kids were identified as underutilized services throughout the state.

While there are notable challenges to service array in Missouri, there are continual steps being taken to increase the availability and accessibility of needed services throughout Missouri. Community-based services, Family Resource Centers, and Show-Me Health Kids are among the strong partners with the Children's Division to continually increase the availability and knowledge of families in Missouri about the accessibility of services across the state. For these reasons, Missouri asserts that Item 29, Array of Services, is a strength for the child welfare system.

### **Item 30: Individualizing Services**

How well is the service array and resource development system functioning statewide to ensure that the services in Item 29 can be individualized to meet the unique needs of children and families served by the agency?

- Services are developmentally and/or culturally appropriate (including linguistically competent), responsive to disability and special needs, or accessed through flexible funding, as examples of how the unique needs of children and families are met by the agency.

Item 30 was rated as an area needing improvement in CFSR Round 3. Transportation, accessibility to services, and lack of culturally sensitive services/interpreters were identified as barriers to providing individualized services, as determined by the statewide assessment and stakeholder interviews.

Missouri asserts that Item 30 is a strength for the child welfare system in CFSR Round 4.

Meaningful access to relevant resources, one of the aspects of the Five Domains of Wellbeing philosophy, is defined as the ability to meet basic needs without shame, danger or hardship. The Children’s Division strives to ensure that services provided to children and families engaged in the child welfare system meet those criteria.

The introduction of the Social Service Plan provides the opportunity for families to have a voice in their service plan, including the chance to express preferences in service providers. As families move through services to resolve the concerns brought them to be involved in the child welfare system, there are ongoing opportunities for them to speak into their case plans through Family Support Team meetings and court hearings, if applicable. Individual meetings with the case manager assigned to their case also provide opportunities for families to provide input about the services in which they are participating.

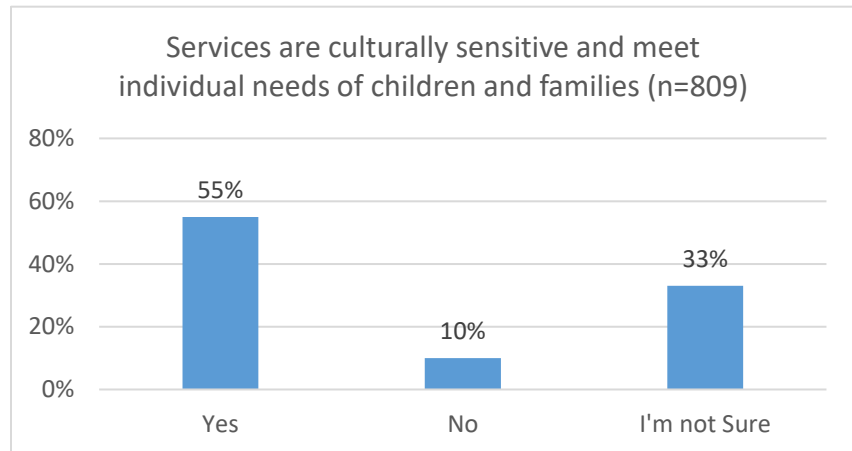
In preparation for the CFSR Statewide Assessment Event held in late February and early March of 2023, surveys were sent to a variety of stakeholder groups. For a completed description of the survey distribution process, please refer to the “Description of Stakeholder Involvement in the CFSR Statewide Assessment” section of this report.

A total of 809 surveys were returned from the following stakeholder groups regarding service array and availability in Missouri:

- Parents with lived experience – 56 surveys returned
- Foster, relative, and adoptive parents – 190 surveys returned
- Judges and Juvenile Officers – 42 surveys returned
- Attorneys who serve children and families involved with the Children’s Division – 47 surveys returned

- Children’s Division and Foster Care Case Management workers and specialists – 345 surveys returned
- Children’s Division and Foster Care Case Management supervisory and management staff – 129 surveys returned

Survey respondents were asked to answer the question “Are the services children and families receive culturally sensitive and meet their individual needs?” The majority of respondents answered affirmatively that services are culturally sensitive and meet individual needs of children and families (55%, 445/809).



Survey participants were then asked to identify ways that services could better meet the individual needs of parents and children served by the child welfare system. The five most common answers are below:

- Language/interpretation services, specifically Spanish and Russian
- More minority service providers
- Services that are culturally sensitive if the recipient is not from a white, Christian background
- Services that are sensitive to the LGBTQ+ and transgender populations
- Services specifically for black hair care

Participants in the Service Array session of the CFSR Statewide Assessment event were asked to respond to the following online polling statement: “Services are individualized to meet the disability and special needs of the children and families in Missouri”. Participants represented the following stakeholder groups: Children’s Division front line staff and central office leadership, foster parents, service providers, partner agencies to include the Department of Mental Health and the Missouri Health Department, attorneys who represent children and families, juvenile office representatives, and youth with lived experience. Fifty-five percent (58%, 7/12) of the participants agreed that services are individualized to meet the disability and special needs of the children and families in Missouri. Forty-two percent (42%, 5/12) disagreed with the statement.

The ability to provide individualized services is impacted by the richness of service array in the area and the specialized needs of the children and families. This may pose the most challenges in the rural areas of Missouri, as service options are more limited than in urban areas. Transportation and accessibility to services are often identified as barriers to providing



individualized services, however, transportation contracts are available throughout the state through Children's Treatment Services (CTS) contracts and were identified as an underutilized service by participants in the CFSR Statewide Assessment Event that focused on service array. Translation and interpretation services are also available through CTS contracts and available throughout the state to help address language barriers that arise during service provision.

Missouri asserts that Item 30, Individualizing Services, is a strength for the child welfare system. While challenges are present, the majority of persons surveyed and the majority of the participants in the CFSR Statewide Assessment Event who discussed this topic, felt that services available to children and families in Missouri are culturally sensitive and meet their individual needs.

## **AGENCY RESPONSIVENESS TO THE COMMUNITY**

### **Item 31: State Engagement and Consultation with Stakeholders Pursuant to CFSP and APSR**

How well is the agency responsiveness to the community system functioning statewide to ensure that in implementing the provisions of the CFSP and developing related APSRs, the state engages in ongoing consultation with Tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child- and family-serving agencies and includes the major concerns of these representatives in the goals, objectives, and annual updates of the CFSP?

This item was determined to be a strength for the child welfare system in Missouri during CFSR Round 3. Missouri asserts that Statewide Engagement and Consultation with Stakeholders continues to be a strength in CFSR Round 4.

During the second round of the Child and Family Service Reviews, Missouri developed the CFSR Advisory Committee. As defined in the current charter, the purpose of this collaborative advisory committee is twofold; primarily, to serve as a vehicle for cross system collaboration to promote the achievement of better outcomes for the children, youth and families; and secondary, to fulfill an ACF requirement for a collaborative process.

The CFSR Advisory Committee's centralized focus is to build an advisory resource infrastructure to result in positive outcomes for children, youth and families. A broad collaboration of this kind benefits families in improved access and service availability, and a reduction of service and funding fragmentation. The responsibilities of the CFSR Advisory Committee as described in the current charter are as follows:

- To provide feedback on the Child and Family Services Plan
- To provide assistance to the Children's Division with the CFSR process
- To identify additional local stakeholders throughout the state of Missouri who might provide assistance and/or services through or in conjunction with the Children's Division
- To assist the Children's Division in identifying and increasing resources for at risk families
- To assist in the development of a Program Improvement Plan (PIP)
- To develop a stakeholder process to collaborate on the PIP

With the consultation support of the Capacity Building Center for States (CBCS), the Children's Division began the work of assessing the purpose and functioning of this group in October 2022. The group had become large in number and their role had become unclear. Meetings continued to occur on a quarterly basis, but served as an opportunity for the Children's Division to provide updates with limited advisory conversations occurring.

At the November 2022 meeting, the CBCS led the group in activities to inform the assessment of the committee's purpose and functioning from their own perspectives. Many felt the group was too large and the focus had become information-sharing instead of action-oriented. The group

expressed a desire to concentrate on continuous quality improvement discussions and activities for the betterment of the child welfare system as a whole.

In response to the assessment, the Children's Division and CBCS contractor reviewed the membership list and identified the most pertinent roles. Current membership includes the Children's Division Deputy Director with responsibility for foster care, one Children's Division Regional Director, and a front-line supervisor. Foster Care Case Management (FCCM) agencies are represented with members from two separate agencies. Court is represented by membership from the Office of State Courts Administrator. The membership includes two foster care youth from the State Youth Advisory Board, a parent with lived experience, and a current licensed foster/relative provider who also provides counseling services to children in foster care. The legal community is represented by the Executive Director of Missouri CASA and a practicing Guardian ad Litem. Partner agencies also include the Department of Mental Health and the Department of Elementary and Secondary Education's Office of Childhood. Service providers are represented through the Missouri Family and Community Trust (FACT). The CFSR Coordinator facilitates the meetings with a non-Children's Division co-lead. The Quality Assurance System Program Coordinator and the Deputy Director for Operations and Administration also receive invitations to the meetings. Vacancies remain for a representative from the judiciary and a front-line worker. Recruitment for these positions continues to occur so these important voices are seated at the virtual table.

The March 2023 meeting of the CFSR Advisory Committee included an overview of the most recent CFSR case review data completed and compiled by the Children's Division's Quality Assurance System. The discussion that followed identified strengths within the data. Areas needing improvement were also highlighted, this being low performance ratings for assessment of parents' needs, parental involvement in case planning, and the frequency of visits between caseworkers and parents. The meeting attendees agreed on next steps to include having discussions within their working relationships and communities about parent engagement. The membership was asked to bring their observations to the next meeting for a continued conversation about successful strategies and opportunities for growth surrounding parent engagement.

Another piece of work with the support of CBCS has been to review and revise the charter for the CFSR Advisory Committee. The charter was developed in 2011 and has not been revised since the group's inception. The revisions are in process and will be presented to the group for their feedback at an upcoming meeting.

The CFSR Advisory Committee has continued to routinely review the Statewide Data Indicators, Children's Division case review data, and administrative data as it relates to agenda topics. In addition, the group members have reviewed draft sections of the APSR, and provided comment and feedback on the 2020-2024 CFSP prior to its submission.

The Division continues to collaborate with the courts through a variety of mechanisms. The Children's Division Director, the Deputy Director with responsibility for foster care, the Foster Care Program Coordinator, and the CFSR Coordinator attend the Juvenile Court Improvement

Project Steering Committee meetings and regularly share data related to the Child and Family Services Review. There are 19 Fostering Court Improvement (FCI) sites in the state. The FCI groups are a collaborative effort, initiated by the circuit judge, to use agency and court data systems to improve case handling and outcomes through intensive data-focused interaction and training for personnel in participating judicial circuits.

Another avenue for court collaboration is the Partnership for Child Safety and Wellbeing (PCSW). In 2022, the PCSW continued their efforts to bring together the judiciary, juvenile office, child welfare agencies, advocates, and stakeholders to build effective and respectful working relationships that ensure children are safe, healthy, and thriving. The group met five (5) times in 2022: March, July, September, October and December. The priorities of the group, established jointly between OSCA and Children's Division include: meeting the residential requirements related to Independent Assessments and the development of Qualified Residential Treatment Programs (QRTP); improving initial case assessment activities; updating judicial education materials; and creating better practices with law enforcement who are conducting investigations of juveniles. Current projects of the PCSW in 2023 include cross-agency data sharing to assess needs and inform priorities, planning for upcoming regional convenings, and the development of risk and needs assessments for both the Children's Division and the Juvenile Office.

Many other stakeholder groups are also involved in providing consultation to the Children's Division. A description of some of these groups is below.

*State Youth Advisory Board (SYAB)* - Members of the SYAB represent all children and youth who have been or are currently in out-of-home placements from their area of the state. Each member of the board is an outstanding youth in foster care or youth who obtained adoption or guardianship after the age of sixteen. SYAB members are responsible for providing the Children's Division administrative staff with input on policy and procedures. The SYAB determines the goals and activities to pursue at meetings and carries those out accordingly. The SYAB also works as a network by bringing back important information to their local youth advisory boards, which are active in each region of the state.

Two of the major activities of the SYAB are the state youth conference and Child Advocacy Day at the State Capital. The conference is held bi-annually and Child Advocacy Day occurs annually. Members of the SYAB identify and plan the sessions of the conference that they feel will be timely and applicable to youth in foster care. The SYAB members also decide what they would like the members of the legislature to know in regards to foster care and work to prepare talking points for use during Advocacy Day. Then, they have the opportunity to talk with senators and representatives about issues that are important to them.

Members of the State Youth Advisory Board provided valuable feedback regarding the survey that was distributed to youth in preparation for the CFSR Statewide Assessment Event. They provided feedback on the questions that were asked, as well as the process for survey distribution.

*Missouri State Foster Care and Adoption Board* – Established by statute in the 2011 legislative session, the purpose of the board is to provide consultation and assistance to the department. The board’s authority exists to provide an independent review of the Children’s Division’s policies and procedures related to the provision of foster care and adoption in Missouri. Recent activities of the Foster Care and Adoption Board included two surveys designed to gain foster parents’ perspectives on the recruitment and retention of foster parents and their thoughts on efforts to increase the number of homes that will accept placement of children with challenging behaviors.

The Foster Parent board members also provided feedback on the survey that was distributed to foster parents in preparations for the CFSR Statewide Assessment Event that was held in March 2023.

*Healthcare Coordination Committee* - This multidisciplinary team is comprised of the Children’s Division, the MO HealthNet Division (Missouri’s Medicaid agency), the Department of Mental Health, the Department of Health and Senior Services, as well as other state agencies, pediatric and health care experts, and stakeholders. The group meets quarterly to develop strategies for improving the accessibility and provision of quality healthcare services to children in foster care. This group maintains the Health Care Oversight and Coordination Plan, as required by the Child and Family Service Plan. Several members formed a sub-committee to dedicate more time and focus on the goal to examine children’s access to quality and meaningful behavioral health care.

There are groups within the Children’s Division that also provide consultation to leadership regarding child welfare system issues. The Supervision Advisory Committee (SAC) provides formal recommendations to the Division Director following quarterly meetings in an effort to influence Children’s Division leadership in moving forward the agenda of continually improving supervision in the state of Missouri. During each quarterly meeting, the Supervision Advisory Committee reviews the strategic plan and determines which goals and objectives to focus on over the upcoming months. Current strategic plan goals include:

- Supervisory skill building
- Recruitment and retention of staff
- Practice enhancement

Another internal advisory group is the Social Work Advisory Group (SWAG). SWAG envisions an agency culture that values the skills and knowledge of social workers who strive for positive outcomes for children and families while promoting ethical standards of quality practice. The purpose the SWAG is to provide advice, influence, and promote ethical and culturally informed recommendations to leadership of the Children’s Division about child welfare practice. Additionally, SWAG reviews the implementation and outcomes of strategies adopted by the agency to improve the quality of such practice. Current projects of this group include internship programming and supporting staff wellness.

The child welfare system in Missouri is a collaboration of many organizations and agencies striving to provide the most beneficial and effective services to Missouri’s children and families. Ongoing collaborative work with many groups both at the state and local levels allow the

Children's Division to identify and include the voices of youth, parents, public and private service providers as well as other state agencies in the improvement planning processes. For these reasons, Missouri asserts that Item 31 is a strength for the child welfare system.

### **Item 32: Coordination of Child and Family Service Plan (CFSP) Services with other Federal Programs**

How well is the agency responsiveness to the community system functioning statewide to ensure that the state's services under the CFSP are coordinated with services or benefits of other federal or federally assisted programs serving the same population?

This item was determined to be a strength for the child welfare system in Missouri during CFSR Round 3. Missouri continues to assert that Coordination of CFSP services with other federal programs is a strength in CFSR Round 4.

The Children's Division works with many other state agencies and federal programs with regard to accessing and coordinating services to positively impact the children and families that are served in common.

- **Department of Mental Health (DMH)** – Staff within the Children's Division's state office foster care unit participate on various workgroups, training, and child-specific cases with both the Division of Developmental Disabilities and Division of Comprehensive Psychiatric Services. This has resulted in formalized Memorandums of Understanding to ensure the transition of services from the Children's Division to DMH and for access to services offered while the Children's Division is involved with children and youth.

Collaborative Systems Team Meeting project: The Children's Division is currently engaged in several collaborative projects with the Missouri Department of Mental Health. In March 2018 the Missouri Collaborative Systems Team Meeting (CSTM) meeting was launched. The objective of CSTM is to improve collaboration, practice, policy, and service delivery at the systems level for youth and adults who are involved with the Children's Division and also qualify for services through the Department of Mental Health (DMH). This meeting has a different focus than the traditional Systems of Care meeting in that it focuses on systemic level issues instead of specific individual case level treatment issues. Participants in CSTM meetings are executives who have decision making authority and the ability to implement policy and practice changes and to create legislative proposals for consideration by the Missouri Legislature. Core CSTM membership is comprised of the Children's Division, the Division of Youth Services, the Department of Mental Health's Division of Developmental Disabilities (DD) and Division of Behavioral Health (DBH). CSTM is reaching out to add core members from the juvenile court, and an adult or youth consumer and their family members or guardians. CSTM meetings are held quarterly at the state level and are currently attended by state-level executives.

Some of the topics identified by the state level group include: developing a structured pathway to provide DMH services to youth living in and being discharged from residential facilities, identifying cross-training opportunities, and developing a shared crisis response to provide community-based services to keep children in their homes.

Residential Care Screening Team (RCST) coordinator's meeting with the inclusion of DMH-DD staff: At these meetings, discussions occur to identify opportunities to collaborate more

efficiently, identify service array challenges, engage in developing solutions and identify best practices for youth requiring DMH services while in the custody of Children’s Division. This meeting is attended by Children’s Division RCSTs, Children’s Division Central Office staff, DMH-DD Regional Office Directors, Assistant Directors, and Deputy Directors.

- **Family Support Division (FSD)** – The Children’s Division staff coordinate with members of the Family Support Division with regards to programs funded through TANF, such as the Customer Service Partnership whereby former foster youth are enrolled in training and receive support services through collaboration with local community colleges, community partnerships, and Division of Workforce Development entities for the purpose of opportunities for employment in customer service jobs. TANF funding is also used throughout other child welfare programs, including child care.

Child Care Subsidy for Income Eligible and Protective Service Children - The Purchase of Child Care program supports low-income, working families through the Family Support Division and children receiving protective services child care through the Children’s Division. This program supports quality improvement activities. Child care is essential in assisting families in achieving self-sufficiency and breaking the cycle of poverty. Research has proven that quality early childhood care and education experiences are critical for children to enter kindergarten prepared to succeed. Child care also prevents children from being left in inappropriate, unsafe, or unsupervised environments.

- **MO HealthNet Division (MHD)** – The Children’s Division has a specified liaison who works daily with MHD to ensure children in the Children’s Division’s custody are appropriately enrolled in Missouri’s Medicaid program. Coordination is necessary when children enter care from a Medicaid eligible household or return from foster care back to that household to ensure there is no disruption in services. Also, the Children’s Division coordinates with MHD about rates paid for services in common. One example is psychology/counseling services offered to a parent who is not Medicaid eligible. MHD has been a partner with the Health Care Coordination Committee and has provided valuable information on specific initiatives such as the use of psychotropic medications. There is also a collaboration with MHD to establish a health home model for children in foster care.
- **Division of Youth Services (DYS)** – It is not uncommon for youth who are involved with the Children’s Division also to have involvement with the juvenile justice system. To that end, the Children’s Division and DYS are working with several jurisdictions on identifying and assisting these crossover youth to ensure that all needs are met by the appropriate entity.

The Division of Youth Services offers Day Treatment Services and has expanded their population to include youth in the custody of Children’s Division and youth at risk for coming into custody. Each Circuit coordinates between Children’s Division, DYS, and the Juvenile Office to make referrals, case plans, and transition plans once the youth completes treatment. The DYS website describes the program as “...an alternative for at-risk youths so



they do not have to be removed from their families and placed in residential programs. Instead, they spend six hours each day in school, even in the summer, and return home in the evenings.” Each student works with day treatment teachers to design an individual education plan outlining the goals and expectations of both staff members and the youths. They then work toward those goals at their own pace. Since the majority of these students struggled in the public school system, training toward high school equivalency (HiSET) is offered. Career planning and job-seeking skills also are emphasized. The educational program is reinforced with individual, group, and family therapy services, along with community services. Community services may include outpatient substance abuse treatment, involvement in prosocial activities, and are tailored to the youth needs.

- **Department of Elementary and Secondary Education (DESE)** – Children’s Division has several collaborative efforts in place with DESE. The Early Childhood Unit coordinates and provides federal funds for a variety of joint initiatives such as School Age Afterschool Care, School Age Resource and Referral, and Child Development Associate Degrees for individuals to become child care facility employees.

In addition to the Early Childhood funding, the Children’s Division coordinates with DESE on projects such as ESSA in which local school districts must identify and ensure that children who enter foster care can stay within their home school whenever possible. The Children’s Division staff throughout the state work to develop relationships with local school districts within the circuits to coordinate efforts to keep children in their home districts when they enter foster care.

DESE provides an annual report on First Steps infants referred through the Child Abuse Prevention and Treatment Act (CAPTA).

In response to an executive order signed on January 28, 2021 by Governor Mike Parson, nearly all early childhood programs across state government were consolidated into a single Office of Childhood within the Department of Elementary and Secondary Education (DESE). This re-alignment of programs within one state agency would allow for greater opportunity for improved coordination of services, resulting in early childhood work across state government to become more streamlined and effective. As of August 28, 2021, the CA/N Prevention Home Visiting program officially became part of this new office.

- **Department of Health and Senior Services (DHSS)** – The Children’s Division provides funding related to supporting child care initiative to DHSS. These funds offer health consultation services to child care providers and health and sanitation inspections of licensed child care facilities as well as funding for child care regulation. The Children’s Division is currently facilitating collaboration among members of the Safe Sleep Coalition to bring consistent awareness and education around the topic of Safe Sleep practices to Missouri citizens. This is a joint effort among the Department of Social Services, Children’s Division, Department of Health and Senior Services, STAT (State Technical Assistance Team) members, Infant Loss Resources, SIDS Resources, SSM Health, Children’s Trust Fund, The

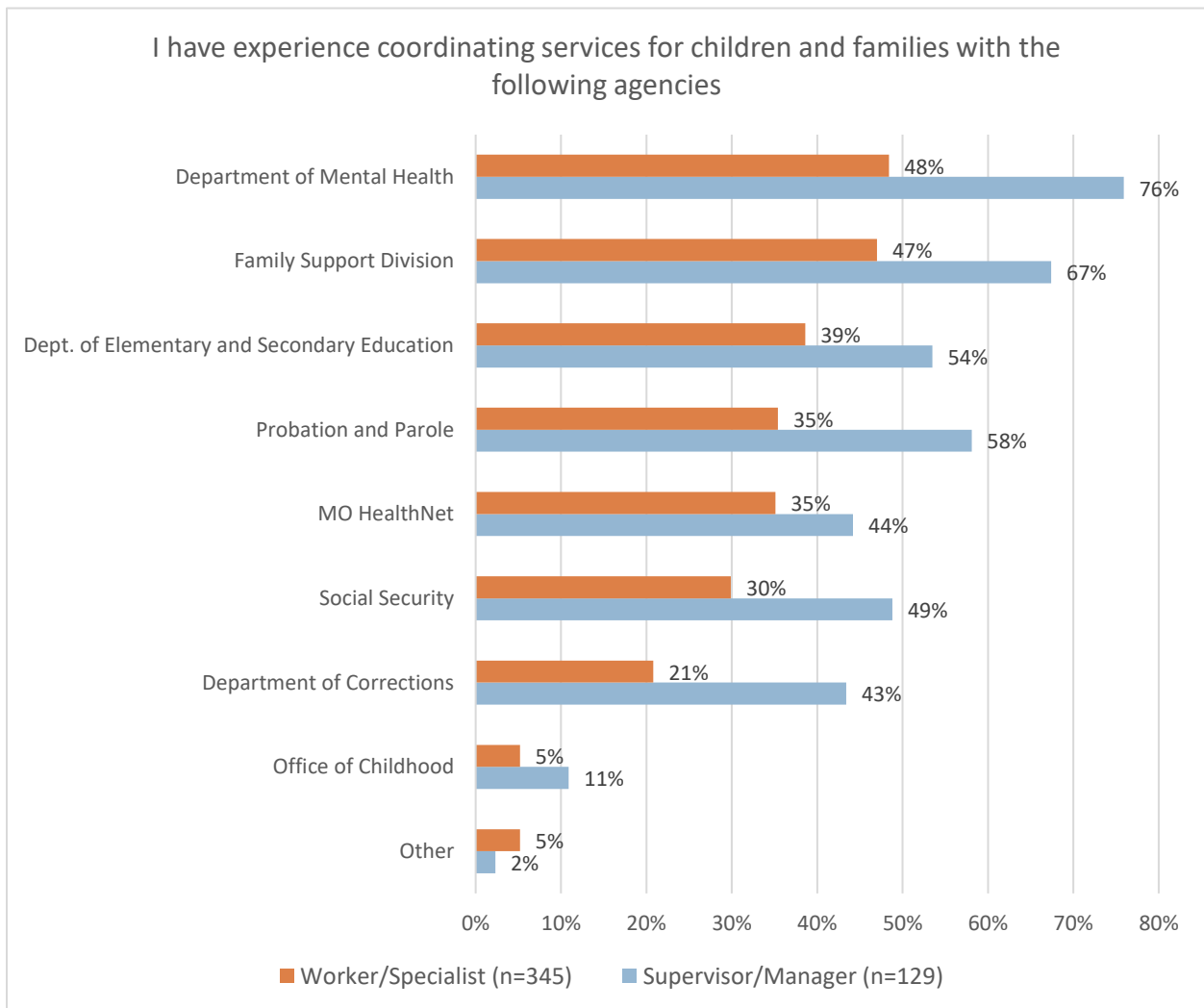
Office of Child Advocate, and Children's Mercy with a focus on combatting the growing rates of infant mortality in the State of Missouri. The Safe Sleep Coalition will be meeting regularly to discuss and develop training materials, social media publications, initiatives, and available resources to cultivate community awareness that will aid in the reduction of unsafe sleep-related deaths among infants in Missouri.

- **Child Support Coordination** - As required by Title IV-E regulations, the Children's Division makes a referral to the Title IV-D agency as appropriate. Title IV-E agencies are required to refer children receiving Title IV-E foster care to Title IV-D for child support enforcement, but are afforded some degree of flexibility by Title IV-E in determining which cases are appropriate for referral. The Children's Division evaluates these on an individual basis, considering the best interests of the child and the circumstances of the family. For example, is the parent working towards reunification with the child, consistent with the case plan? Would the referral impede the parent's ability to reunify with the child? Has the parent agreed to pay for the costs of out-of-home care or to accept a reduction in the adoption assistance payment temporarily? The Children's Division FACES system interfaces with the Child Support (CS) system so whenever a child enters or exits custody or circumstances impacting IV-E eligibility change, Child Support is notified so appropriate action can be taken.
- **Child Care Subsidy Program** – This program provides a necessary service to families within the child welfare system by providing concrete support during their time of need. The Child Care Subsidy Program assists in supporting the safety and well-being of children in low-income families by providing parents with choices for safe environments for their children. Maximizing funding for Child Care Subsidy ensures the Department of Social Services (DSS) can serve the greatest number of families in need. Timely and accurate payment ensures higher quality providers are willing to accept DSS subsidized children.
- **Head Start** - Local collaboration plans are designed to improve the coordination of services for the children and families served by both the Children's Division and Head Start. The Children's Division may use the Head Start/Early Head Start Referral form to refer children/families to the Head Start agencies in the area that may be eligible. Head Start/Early Head Start services, when accessed, can have a direct bearing on the actions the Children's Division workers use in their day-to-day interactions with families. By accessing Head Start/Early Head Start services, families can ensure their children are receiving quality child care services to help with school readiness.
- **Housing and Urban Development** - Children's Division is currently a collaborative partner with local Public Housing Authorities, Continuum of Care and Balance of States in applying for federal housing vouchers in five jurisdictions. The Continuum of Care and Balance of States are developed through collaboration with a broad cross-section of the community who plan, organize and deliver housing and services to meet the specific needs of people who are homeless as they move to stable housing and maximum self-sufficiency. It includes action steps to end homelessness and prevent a return to homelessness.

These housing vouchers are designated for families known to the child welfare agency and are designed to keep families together, reunify families, and provide safe, stable housing for youth transitioning out of foster care. The Children’s Division is a party to an MOU committing to implementation should any of the five jurisdictions be granted vouchers.

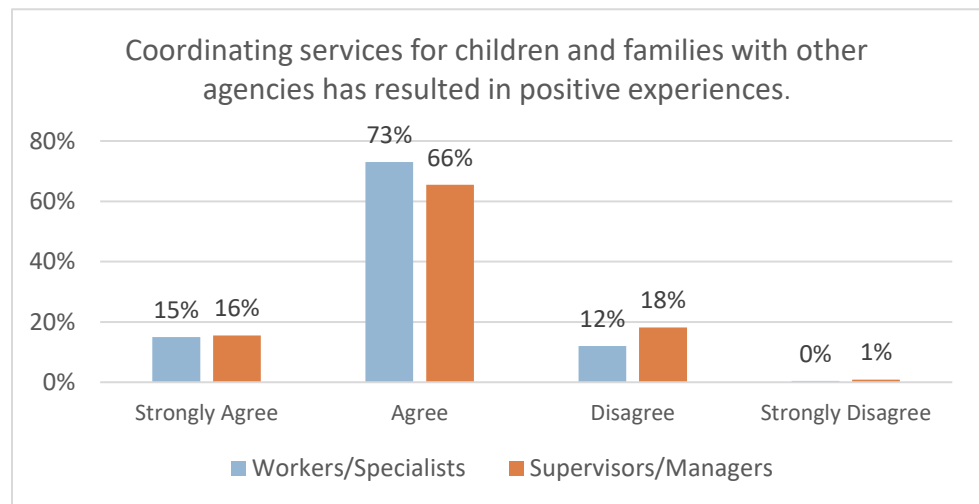
In addition to the state-level coordination that occurs between agencies to improve system delivery for families in common, case-level coordination occurs at the local level to directly impact individual families.

In preparation for the CFSR Statewide Assessment Event, surveys were distributed to all workers and specialists within the Children’s Division and Foster Care Case Management agencies and to all supervisory and management staff within the same organizations. Survey respondents were asked to identify all agencies with which they have had experience coordinating services for children and families. The Department of Mental Health and the Family Support Division were most frequently identified for both workers and supervisory staff.



- Department of Mental Health
  - Workers (48%, 165/345)
  - Supervisors (76%, 98/129)
- Family Support Division
  - Workers (47%, 162/345)
  - Supervisors (67%, 86/129)

The same survey gave respondents the opportunity to react to the outcome of coordination services for children and families. Eighty-eight percent (88%, 304/345) of workers and specialists and 82% (106/129) of supervisors and managers either strongly agreed or agreed that “coordinating services for children and families with other agencies has resulted in positive experiences”.



Due to the many examples demonstrating how the state coordinates services and/or benefits with other federal or federally assisted programs serving the same population, Missouri asserts that Item 32 is a strength for the child welfare system.

# FOSTER AND ADOPTIVE PARENT LICENSING, RECRUITMENT, AND RETENTION

## Item 33: Standards Applied Equally

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that state standards are applied to all licensed or approved foster family homes or childcare institutions receiving title IV-B or IV-E funds?

This item was rated as an area needing improvement during CFSR Round 3. Missouri asserts that this item is a strength for the child welfare system in CFSR Round 4.

State regulation 13 CSR 35-60.030 requires the following minimum qualifications for all licensed foster parents and all elements are addressed in the foster home written assessment:

(1) Age of Foster Parent(s). Applicant(s) shall not receive a license when one (1) or both are younger than twenty-one (21) except as provided for relative care in section 210.565, RSMo.

(2) Citizenship Status of Foster Parent(s). Applicants to provide foster care must be a citizen of the United States, either through birth or naturalization or be able to verify lawful immigration status.

(3) Personal Qualifications Required of Foster Parent(s).

(A) Foster parent(s) must be able to acquire skills and demonstrate performance based competence in the care of children including, but not limited to:

1. Protecting and nurturing;
2. Meeting developmental needs and addressing developmental delays;
3. Supporting relationships between children and families;
4. Connecting children to lifetime relationships; and
5. Working as a member of a professional team.

(B) Foster parents shall cooperate with the division in all inquiries involving the care of the foster children. The foster parents' ability to meet these competencies shall be reevaluated at each re-licensure.

(C) Foster parent(s) shall be responsible, mature individual(s) of reputable character who exercise sound judgment, display the capacity to provide good care for children, and display the motivation to foster.

(4) Health of Foster Family.

(A) At the time of application for an initial license and at the time of license renewal, foster parents shall authorize their physician to submit a statement on a prescribed form, regarding his/her opinion of the mental health of each foster family member and certifying that a physical examination was completed within the past year and that all household members were free from communicable disease or are not a threat to the health of foster children and are up-to-date on all immunizations. If any member of the family is not up-to-date on immunizations, there must be a statement from the family physician indicating that the health of foster children is not at risk. A tuberculosis (TB) test and a chest X-ray may be completed, if recommended by the physician.

(B) Foster parents and all foster family members must be determined by a physician to be in good physical and mental health. The licensing agency shall review the examination reports.

(C) If the licensing agency has reason to question the physical or mental health of any member of the foster family, the agency shall require additional mental or physical evaluations.

(5) Foster Parent Training.

(A) Pre-service Training. Prior to licensure, each adult with parenting responsibilities is required to successfully complete a competency based training approved by the Children's Division.

(B) In-Service Training. To maintain a foster home license each foster parent shall meet performance based criteria as part of a professional family development plan and complete a prescribed number of foster parent training hours as approved by the licensing authority during each two- (2-) year licensure period. The subject of training shall be directly tied to the foster parent professional development plan and related to the needs and ages of children in their care.

(6) Personal information elicited in the home assessment shall include, but not be limited to:

(A) Family size and household composition of the foster family;

(B) Ethnic and racial background of the foster family;

(C) Religious preferences and practices of the foster family;

(D) Lifestyles and practices of the foster parents;

(E) Educational practices of the foster family; and

(F) Employment of the foster parents.

(7) Parenting Skills Information Elicited in the Home Assessment.

(A) Foster parent structures environment so that it is safe and healthy for the child.

(B) Foster parent expresses positive feelings toward the child verbally and physically.

(C) Foster parent recognizes and responds appropriately to the child's verbal and physical expressions of needs and wants.

(D) Foster parent consistently uses basic behavior management techniques in dealing with the child.

(E) Foster parent consistently uses appropriate techniques to discipline the child and does not use or will not use corporal punishment on any child in the custody of the division.

(F) Foster parent guides the child toward increasing independence.

(G) Foster parent behaves in a way that recognizes the immaturity of the child.

(8) All information which is collected by the division in the licensing study will be condensed to comprise a foster home profile which will be available to team members when children are placed into the care of the division, in order for placement decisions to be made in the best interests of the child. The profile will not contain any protected health information, financial information, or information on biological or adopted children of the foster family.

There are 13 non-safety standards that may be waived for a relative to be licensed if it is determined that the safety and well-being of foster youth in the home can be assured. A workgroup met after the 2008 Fostering Connections to Success and Increasing Adoptions Act

was signed into law by the President (P.L. 110-351). The workgroup reviewed and selected from the Licensing of Foster Family Homes regulations, 13-CSR 35-60, requirements that would not put children at a safety risk. The Non-Safety Licensing Standard Waivers for Licensing of Relative Resource Provider Homes Tracking Form (CD152), is completed by the licensing worker and approved by the supervisor and regional office. The non-safety standard waivers are listed in policy and state regulation. They include the following:

- Maximum number of children in the home
- Limits on number of children under the age of five
- Limits on number of elevated needs foster youth
- Minimum age of 21
- Physician statement and all immunizations up-to-date at initial licensure and renewal for all household members
- Physician determination that all household members are in good physical and mental health
- Required 30 hours of in-service training hours for license renewal which does not include required in-service trainings including but not limited to; CPR, First Aid, RPC Trauma, Reasonable and Prudent Parenting Standard, or any Children's Division specified in-service training
- Location of home
- Size and floor plan of home
- Opposite sex in same room
- No foster youth sleep in same room with adult age 21 and older
- No foster youth age 2 and over sleep in same room with relative provider
- Drawer and Closet space specifications

There were 277 relative homes approved for a foster home license in CY22 using one of the non-safety licensing standards. The standards that were waived to license the 277 homes were:

- Over the maximum number, 31
- Age of resource parent, 1
- Over maximum number of ages under five, 5
- Over the maximum number of children with elevated needs, 5
- Physician statement of immunizations up-to-date for all household members, 113
- Physician statement that all household members are in good physical and mental health, 44
- Required 30 hours of in-service training for license renewal, 21
- Location of the home, 5
- Size and floor plan of the home, 19
- Children of the opposite sex in the same room, 10
- No foster youth sleeping in the same room with an adult age 21 and older, 8
- No foster youth age two sleeping in the same room with the relative provider, 13

- Drawer and closet space, 2

The 277 relative homes licensed using a non-safety standard represents 8.3% of the 3,331 relative homes licensed during CY22.

The state of Missouri assures that state standards for licensure and approval are applied to all licensed or approved foster family homes or child care institutions receiving Title IV-B or IV-E funds by utilizing a review process. Adoptive home approvals are included, as well. This review process involves managers and oversight staff. For each assessment completed, the licensing staff's work product is reviewed by the immediate supervisor, and approval for licensure is given by the manager. For families who are assessed by a Foster Care/Adoption Recruitment and Training Contractor, the assessment is reviewed by the contract supervisor and then again by the Children's Division contract supervisor before the license/approval is granted. In areas where all functions of recruitment, licensure, and retention are contracted, the home assessment is reviewed by the supervisor within the contract agency, and then the licensure/approval is sent to Children's Division oversight specialist for final review and approval. The review by the oversight specialist includes assuring training has occurred, and criminal background checks have been completed and returned with no precluding record for licensure.

In addition, the Children's Division's electronic case management system, FACES, includes an edit that prohibits licensure without entering the date that the worker, worker's supervisor, and foster or relative parent(s) reviewed and signed the home assessment. There are no exceptions provided for licensing a resource home that does not meet all of the competencies.

Foster home licenses are renewed every two years in Missouri. A renewal assessment is completed which includes a re-evaluation of the foster parent competencies and physical home environment.

Visits to the foster or relative home are completed by the licensing worker every quarter. Visits should include, but are not limited to, a walk-through of the home to assure the home continues to meet licensing standards. Quarterly visits are conversational, allowing for the sharing of concerns as well as accomplishments and development of a mutual relationship of trust. The visits are to be used as a prompt to have meaningful conversations about pertinent issues and assure compliance with licensing requirements. In addition, the visits are an opportunity to identify resources for the resource provider such as support groups, to have discussions about respite care, and the resource parent meeting their own needs. Discussions about training needs and any behaviors of the child(ren) that may need addressing occur as well.

The Children's Division reviewed a total of 34 foster and relative provider case records in the fall of 2021 to assess compliance with licensing standards using a newly developed Vendor Case Review tool. Of the records reviewed, 91% (31/34) had either the Resource Provider Initial Family Assessment or the Renewal Assessment in the case record. The foster parent competencies mentioned above were addressed in 94% (32/34) of the assessments. Documentation of all required quarterly home visits by the licensing worker were present in 70%



(23/33) of the case records. One home had been licensed for less than 90 days, not requiring a quarterly home visit.

The Vendor Case Review tool is currently being revised to better capture compliance with licensing standards.

Licensing standards for residential care facilities that receive Title IV-B and Title IV-E funds are outlined in Missouri Regulation 13 CSR 35-71.020.

(1) Licensing Authority.

(A) Any person who desires to develop, establish, maintain or operate, or both, a residential treatment agency for children and youth, except for those persons exempt from licensing pursuant to section 210.516, RSMo, must file an application for licensure form with the division and must receive a license prior to accepting any child for care.

(B) Before a license may be granted, an agency must be in compliance with sections 210.481-210.536, RSMo, sections 210.1250 through 210.1286 RSMo, and these rules.

(2) Application Procedures.

(A) To apply for a license to operate a Licensed Residential Care Facility (LRCF) in Missouri, the person, or the person's legally authorized designee, shall file an application with the division on forms provided by the division.

(B) The Application shall contain the following information:

1. The name, street address, mailing address, fax number and phone number of the residential care facility.
2. The name, street address, mailing address, e-mail address and phone number of the Director, Owner and Operator of the LRCF.
3. The name, street address, mailing address, e-mail address, phone number and job title of the individual or individuals who are designated to submit the application on behalf of the residential care facility. This individual shall be an individual who is legally authorized to act on behalf of the residential care facility and to legally bind the residential care facility to the statements made and information provided in support of the application;
4. The name and description of the person operating the residential care facility, including a statement as to whether the person operating the residential care facility is a firm, corporation, benevolent association, partnership, association, agency, or an incorporated or unincorporated organization, regardless of the name used. If the owner or operator of the residential care facility is incorporated a corporation state the type of corporation, the state in which the corporation was incorporated in and the date of incorporation.
5. The name and address of the sponsoring organization of the residential care facility, if applicable;
6. The name and address of every school attended by, or to be attended by, the children served by the residential care facility;

7. A certification that officers, managers, contractors, volunteers with access to children, employees and other support staff of the residential care facility, and owners who will have access to the facilities have, or will have, completed Background Checks and have been found eligible as required in section 210.493, RSMo and 13 CSR [35-71.015](#).

(C) The residential care facility shall submit the additional documentation and information in support of the application as provided in this subsection. This information may be submitted on a form or forms provided by the division, or it may be submitted separately as attachment(s) to the application.

1. Local health department inspection certificates.

A. The residential care facility shall successfully complete and obtain any and all local health department inspection certificates required in the jurisdiction in which the facility operates. If the residential care facility operates in more than one county or local jurisdiction, then the residential care facility shall obtain the required certificates for each facility in each location.

B. The residential care facility shall submit a copy of all local health department inspection certificates with the application, and shall indicate the date of the inspection and the date that each certificate expires, if any.

C. If there is no local or county government health department in which the residential care facility is located, or if the local or county health department will not perform a health inspection, the residential care facility shall request that decision in writing and submit that information with the application.

D. If the residential care facility is unable, after exercising diligent efforts, and due to no fault of its own, to obtain a local inspection certificate, then the residential care facility shall submit a statement describing the efforts made to obtain the certificate(s) and the reason why the residential care facility was unable to obtain the certificate. The residential care facility shall attach copies of any correspondence from any state, county or local jurisdictions declining to conduct the inspection.

2. Proof that medical records are maintained for each child. The division will accept copies of the LRCF's administrative policy regarding the maintenance of medical records as prima facie proof that the LRCF is maintaining medical records for purposes of submitting an application. However, proof that the LRCF is maintaining medical records on each child will be subject of verification and monitoring. The LRCF shall provide the division access to the facility upon request to inspect the medical records maintained by the LRCF on the children served by the LRCF in order to verify that the medical records are being kept.

3. Evidence of compliance with local building and zoning requirements;

4. A floor plan of the proposed site in which the specific use of each room is identified;
5. A signed and dated copy of the civil rights agreement;
6. A chart depicting the agency's organizational structure and lines of supervision;
7. Written policies and procedures established by the board of directors which clearly set forth the authority and the responsibilities delegated to the executive director;
8. A copy of the articles of incorporation, bylaws, and board roster, including the mailing address and place of employment of each member, and a list of board officers;
9. A proposed budget for a period of not less than one (1) year, including sources of income and/or fund raising methods;
10. Verification of availability of not less than three (3) months' operating capital;
11. A copy of the residential care facility's written intake policy;
12. Written identification of specific program models or designs which shall include the methods of care and treatment to be provided;
13. The job title, job description, and minimum qualifications for all staff;
14. A projected staffing plan for the anticipated capacity;
15. Written child abuse and neglect reporting policy;
16. Written personnel practices, including staff training and orientation;
17. Written discipline policy;
18. Written visitation policy;
19. Written health care policy;
20. Written restraint policy utilizing a recognized and approved physical restraint program;
21. A needs assessment conducted and submitted as evidence of need for the type and scope of program proposed. This written assessment shall include, but is not limited to:
  - A. An identification and survey of potential referral sources, existing resources, and unmet community needs;
  - B. A business plan that details the agency's proposed venture explaining the vision, mission, current status, expected needs, defined markets, and projected results;
  - C. A description of how treatment will be provided and documented and how the proposed operating site meets therapeutic needs;
  - D. A description of how the agency will be financed and how fiscal viability will be maintained; and
  - E. A description of the results of a meeting planned and hosted by the agency with key community participants with the intent of enhancing communication, gathering information for the needs assessment,

addressing interaction with community resources, and addressing community questions and comments regarding the proposed residential treatment agency for children and youth;

22. Evidence of compliance with fire safety requirements of the State Fire Marshal;
23. Verification of a medical examination that includes tests for communicable diseases including, but not limited to, tuberculosis and hepatitis when recommended by a licensed physician for all staff, completed by a licensed physician, certified nurse practitioner, advanced practice nurse in a collaborative practice agreement with a licensed physician, or a registered nurse who is under the supervision of a licensed physician, shall be submitted within thirty (30) days of initial licensure using the form prescribed by the division;
24. A certification that all individuals who are required to complete a background check and be found eligible for employment or presence at the LRCF as provided in section 210.493 RSMo and 13 CSR [35-71.015](#);
25. Verification of the education, licensing credentials, and experience for all professional staff;
26. A copy of the resume for all professional and administrative staff;
27. Written description of the recreational program, and the manner in which staff are qualified and prepared to create, organize, and supervise them;
28. A copy of the annual written staff training plan;
29. A copy of the personnel manual for the agency;
30. A copy of the program manual for the agency;
31. For any agency operating a swimming pool on grounds, documentation that the pool is operated and maintained in accordance with all applicable ordinances and/or state guidelines;
32. Documentation that each operating site's food service is in compliance with the requirements of the Department of Health and Senior Services and/or any local applicable ordinances;
33. Written volunteer policies;
34. Written policy for the use of visiting resources;
35. Written confidentiality policy;
36. Written policy for the use of locked isolation;
37. Written instructions for fire, severe weather, and other emergency evacuations;
38. Written description of the agency's religious requirements and practices;
39. Written policy governing the use of medications, including psychotropic medications;
40. A copy of any newsletter, brochure, or flyer used by the agency for fundraising or marketing purposes; and

41. Documentation of insurance for the agency for professional and commercial liability, worker's compensation insurance, fire and disaster insurance, and agency vehicle insurance.

(D) Upon receipt of the application form and supporting documentation, the division will send a request to the State Fire Marshal to conduct a fire and safety inspection and provide the LRCF and the division with a copy of the approved fire and safety certificate.

(E) The application will be complete when the residential care facility submits a completed application with all of the required supporting documents and information to include all required inspection certificates.

(3) Licensing Assessment.

(A) When the application is complete the division will conduct a thorough assessment of the residential care facility to determine whether the residential care facility meets all of the requirements for licensure in compliance with the licensing law and applicable rules.

(B) If an applicant for licensure is determined not to be in compliance with the licensing law and applicable rules, or if the division issues a provisional license and the residential care facility does not achieve full compliance within six (6) months of the date of the issuance of the provisional license, the application will be denied. A new application for licensure must be filed if the agency desires to pursue licensure.

(4) The License.

(A) Upon determination of compliance with the licensing law and applicable rules, the director shall issue a license for an initial six- (6-) month probationary term.

(B) Following the probationary period, upon determination of continued compliance with Missouri statutes and applicable licensing rules, the director shall extend the term of the license for a period not to exceed two (2) years.

According to the Department of Social Services website, Missouri currently has 57 licensed residential care facilities serving children and youth.

Residential Program Unit staff conduct supervisory visits during the two (2) year licensing period for all licensed residential agencies. Supervisory visits may include but are not limited to: review of a random sample of personnel records, review of a random sample of resident records, inspection of the building and grounds, review of program and/or policy changes, review of non-compliances found on a previous supervisory visit. Training is reviewed in the personnel records and training plans are submitted for license renewal. Licensing staff will review a random sample of personnel records for compliance with licensing regulations. Typically, three personnel records from each licensed agency are reviewed in-depth during a record review. In addition, 10 or 10%, whichever is greater, of the agency's personnel records are reviewed for compliance with background checks during a record review. Licensing staff verify that the personnel have received their 40 hours of training annually and that they have received all of the required trainings per licensing regulations. Licensing staff will verify that direct care staff and supervisors are current with CPR/First Aid, Medication Management, and Restraint/De-escalation, if applicable.

Missouri's licensing standards for all foster and relative homes, as well as residential care facilities, are clearly outlined in regulations. Licenses are granted when all standards are met, with the only exceptions being made for non-safety standards in situations involving licensure of relative homes. For these reasons, Missouri asserts that Item 33, Standards Applied Equally, is a strength for the child welfare system.

### **Item 34: Requirements for Criminal Background Checks**

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that the state complies with federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements, and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements of children?

This item was determined to be a strength for Missouri during CFSR Round 3. Missouri continues to assert that Item 34 is a strength for the child welfare system in CFSR Round 4.

The Children's Division uses five methods of research to determine a caregiver's criminal and child abuse history. The following steps for background screening are completed for every foster/adoptive applicant and all other household members age 17 and older.

The Child Abuse and Neglect Registry (CA/N) background screenings are conducted by the local Children's Division office personnel.

CA/N background screenings are requested from every state where the applicant and household member 17 years old and older has lived in the past five years.

Case.net, the Missouri State Courts Automated Case Management System, is examined for any reference to Orders of Protection filed, either for a child or an adult.

Each household member 17 years of age and older must register with the Family Care Safety Registry (FCSR). The registry is maintained by the Department of Health and Senior Services (DHSS) and searches the following systems:

- CA/N records (findings of "Preponderance of Evidence" or "court adjudicated," or prior to August 28, 2004, "Probable Cause" findings)
- Employee Disqualification List, maintained by DHSS
- Child-care facility licensing records maintained by DHSS
- Residential living facility and nursing home records, maintained by DHSS
- Employee Disqualification Registry, maintained by Department of Mental Health
- Foster parent licensing records, maintained by the Children's Division
- Sex Offender Registry information, maintained by Missouri State Highway Patrol (MSHP)

Resource homes are checked for any registered offenders located at the household address, using the MSHP Sexual Offender Registry. Sex Offender Registry information is also gathered by FCSR. FCSR collects the Social Security Number of resource applicants.

State and national criminal record checks are completed for each household member age 17 or older, and any person under the age of 17 who has been certified as an adult. Fingerprints are required. The MSHP completes a state criminal record check and then electronically sends the fingerprint images to the FBI for a national search of criminal records.

The criminal record check may reveal open and closed record information on individuals consisting of arrests, prosecutor and court actions, correctional supervision, and release. All felony and serious misdemeanor arrests which include sexual offender registration information as defined under 589.400, RSMo are included. All alcohol and drug-related traffic offenses are considered reportable criminal offenses.

The Children's Division utilizes the electronic scan service for the collection of fingerprints. The service is called the Missouri Automated Criminal History Site, MACHS, which is maintained by the Missouri State Highway Patrol (MSHP) Criminal Justice Information System (CJIS) Unit. After the FBI completes its search, results are forwarded to the MSHP. During 2022 there were a total of 10,246 fingerprints captured for statutory reasons 210.482, 210.487 and 43.540. Two individuals from each circuit complete CJIS security training and have access to MACHS to obtain the fingerprinting reports. This has reduced the time for obtaining criminal history results down to as little as 11 minutes from the time the applicant's fingers are scanned. The legislative proposal that was necessary to allow Children's Division access to the state and federal Rap Back system was passed during the 2018 legislative session. Beginning September 1, 2018, the Children's Division is enrolled in the state and federal Rap Back program. The Rap Back program alerts the circuit manager of any arrest of any applicant who has been fingerprinted beginning September 1, 2018. Applicant households, including any household member over the age of 17, are fingerprinted, and new FCSR checks are completed every two years as part of the re-licensure or re-approval of the home.

Per the Licensing of Foster Family Homes regulations, 13 CSR 35-60.090, the Children's Division denies licensure or revokes a current license if any household member:

- (A) Fails consistently to comply with the applicable provisions of sections 208.400 to 208.535, RSMo, and the rules of the Children's Division promulgated thereunder;
- (B) Violates any of the provisions of its license;
- (C) Violates state laws and/or rules relating to the protection of children;
- (D) Furnishes or makes any misleading or false statements or reports to the division;
- (E) Refuses to submit to the division any reports or refuses to make available to the division any records required by the division in conducting an investigation;
- (F) Fails or refuses to admit authorized representatives of the division into his/her home at any reasonable time for the purpose of investigation;
- (G) Fails or refuses to submit to an investigation by the division;
- (H) Fails to provide, maintain, equip, and keep in safe and sanitary condition the premises established or used for the care of children being served, as required by law, rule, or ordinance applicable to the location of the foster home;
- (I) Fails to provide financial resources adequate for the satisfactory care of and service to children being served and the upkeep of the premises; or
- (J) Abuses or neglects children, or is the subject of reports of child abuse or neglect which upon investigation result in a court adjudicated, probable cause and/or preponderance of evidence finding, or is found guilty, pleads guilty to, or pleads *nolo contendere* to felony crimes against a person to include, but not limited to, felony possession, distribution, or manufacturing of



controlled substance crimes as specified in Chapters 195, 565, 566, 567, 568, and 573, RSMo, or a substantially similar offense if committed in another state or country. The division may also deny or revoke a license to any person(s) who are on the respective Department of Health and Senior Services and/or the Department of Mental Health lists that exclude child or adult care employment and/or licensure.

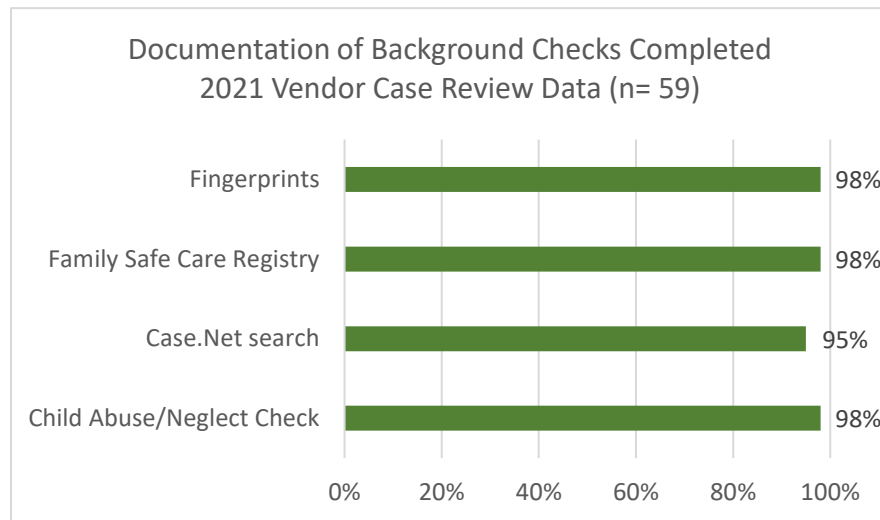
When an unlicensed relative or kinship home is used for an initial, emergency placement, a name based check is completed by local law enforcement of all household members and a safety walk through of the home is made using the Resource Home and Safety Check list, CS-45. If the home meets the safety standards on the Safety Check List and there are no individuals in the home with criminal history, the foster youth may be placed. All household members age 17 and older must complete fingerprinting within 15 days of the foster youth placed in the home. If all of the required household members do not submit to fingerprinting, the foster youth is removed immediately.

Except for the specific felony history listed in the regulation, a criminal history, child abuse/neglect history, or other review information does not automatically preclude licensure for any resource home. Staff determine the relevance of all such findings to child caring responsibilities and seek guidance from supervisors. A supervisor must review and evaluate the background information if there is a record of conviction (other than those listed above) and/or child abuse and if the decision is to approve the home assessment. The supervisor's review and decision to approve/disapprove must be documented. The approval/disapproval process is the same for foster, relative, and kinship homes.

The court of jurisdiction may also order a child to be placed or left in a home which does not meet licensing standards. The home remains an unlicensed relative or kinship home. In the event it is determined the best interest of a child would be served by placement in an unlicensed home, and a court of law has ordered the child placed in the unlicensed home, written approval must be obtained through supervisory lines to the Regional Director. The Regional Director must review the request and, if in agreement, forward with their recommendation to the Deputy Director for Children's Division for final consideration. Written requests include a thorough description of the applicant's situation and why it would be in the child's best interest to be placed in an unlicensed home. If approved by the Deputy Director, IV-E funding may not be used, and the worker is responsible for notifying the Eligibility Specialist who will ensure that state only funds are used. Missouri does track Non-Safety Licensure requirement exceptions using a request to central office for approval of these exceptions. Requests and indication of approval or denial are tracked.

Missouri's computer system, FACES, requires a criminal background check be completed for each foster or adoptive parent to be licensed or approved. An edit feature is in place which prohibits the licensing, approval, and renewal of foster and relative homes which do not have current background screenings entered.

A case review of foster home records was completed by members of the Quality Assurance System and foster home licensing policy experts from Children’s Division’s Central Office in the fall of 2021. A total of 34 case records were reviewed, involving 53 foster/relative parents and



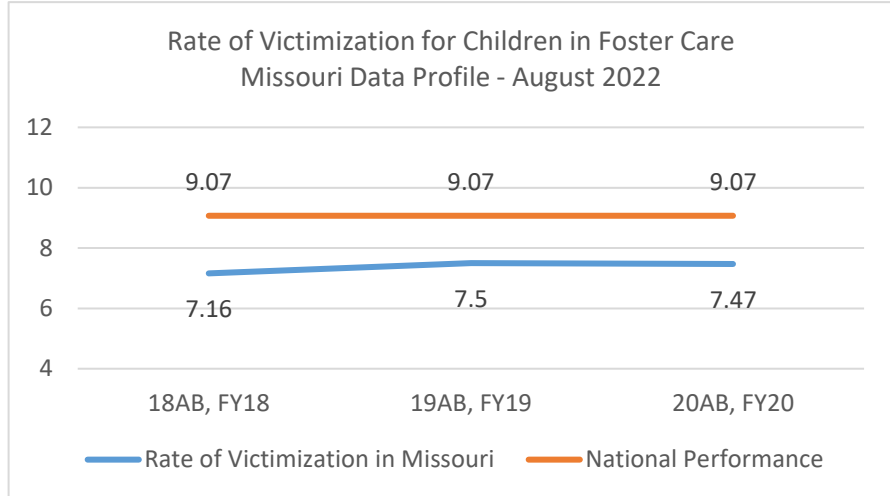
six additional household members who were 17 years of age or older. Fingerprint checks were completed as required for 98% (54/55) of those reviewed. Four did not require fingerprint checks, as they were enrolled in the Rap Back program described above. Family Safe Care Registry and Child Abuse and Neglect checks were completed as

required for 98% (58/59) of persons reviewed. Case.Net searches were completed for 95% (56/59) of those reviewed.

Missouri strives to address and assure the safety of foster and adoptive placements for children through the quarterly home visit process. Licensing workers visit the foster homes on their caseloads every quarter. During these visits there are ongoing opportunities to discuss any concerns expressed by children who are placed in the home. Any safety concerns that are observed by the licensing worker are addressed as well as any concerns that have been reported to them by other professionals who frequent the home. For children in foster care, their case managers also visit with them at least monthly to assess safety in all of their environments. In federal fiscal year 2022, 96% of children in foster care were visited at least monthly (145,935 visits/152,396 full months in foster care) and 96% of those visits occurred in the child’s placement setting (140,374/145,935).

The Children’s Division has a dedicated team of staff specifically trained to investigate concerns of child abuse and neglect that are reported to have occurred outside of the children’s family home. Examples include school or day care settings and foster/relative homes are also included. The Out-of-Home Investigation Unit (OHI) serves the entire state. Missouri has strengthened the working relationship and alliance between OHI staff and foster home licensing staff. At the time of re-licensure/re-approval, policy requires that the Out-of-Home Investigator be contacted and consulted regarding any resource homes who were subject of an Out-of-Home Investigation during the prior licensure/approval period. The intent of this policy is to ensure any and all concerns about safety are being addressed and resolved adequately to assure safety. According to the Children’s Division Child Abuse and Neglect Annual Report, in state fiscal year 2021, there were 832 foster parents identified as alleged perpetrators of abuse or neglect (as indicated by the relationship to the victim child). Of those, 28 were substantiated as perpetrators of abuse or neglect (3.4%).

The federal data profile measure of Maltreatment in Foster Care also points to the safety of Missouri's foster children. The national rate of victimization is 9.07. Missouri was below the national performance, with a victimization rate of 7.47, according to the data provided in August of 2022. Missouri has performed below the national rate for this measure for the past three reporting periods, as indicated in the chart.



The requirements for criminal background checks for foster and relative homes are clearly outlined in Missouri statute. Data presented indicates that the required checks are occurring as required and that the safety of foster children in Missouri is of utmost importance in the work of the child welfare system. Missouri asserts that Item 34 is a strength for CFSR Round 4.

**Item 35: Diligent Recruitment of Foster and Adoptive Homes**

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning to ensure that the process for ensuring the diligent recruitment of potential foster and adoptive families who reflect the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed is occurring statewide?

This item was rated as a strength during Round 3 of the CFSR and Missouri believes it continues to be a strength for the child welfare system.

Section 422(b)(7) of the Social Security Act requires that the state provide for the diligent recruitment of foster and adoptive families who reflect the ethnic and racial diversity of children in the state for whom foster and adoptive homes are sought. There are no prohibitive policies or laws in Missouri that limit the state’s ability to recruit foster and adoptive parents who reflect the diversity of children in Children’s Division’s custody. In Missouri, targeted recruitment strategies occur statewide, initiated by the local office based on the needs of each child, as well as general recruitment efforts throughout the state.

**Statewide Resource Family Home Data:**

The following data were compiled to enhance recruitment efforts for the upcoming year. In addition to these data points, Quality Assurance staff provide local reports to regions upon request such as zip code information or school district codes and specific point in time demographic information to tailor recruitment activities by regional considerations.

**Statewide Resource Family Data as of 4/30/23**

<b>Foster and Adoptive Homes</b>				
	<b>Total Homes</b>		<b>Homes with Availability</b>	
<b>Region</b>	<b>Foster Homes</b>	<b>Adoptive Homes</b>	<b>Foster Homes</b>	<b>Adoptive Homes</b>
Kansas City	252	1021	128	346
Northeast	584	966	373	265
Northwest	287	687	237	235
Southeast	518	1516	237	226
Southwest	798	1628	502	559
St. Louis	476	1114	268	253
<b>Total</b>	<b>2915</b>	<b>6932</b>	<b>1745</b>	<b>1884</b>

The following tables provide information about the racial makeup of all parents represented in the homes described above. (Some are two-parent homes, so the totals will not match.)

Foster Parent Race by Region – Total homes							
Region	White	Black/ African American	American Indian	Asian	Native Hawaiian	Multi- Racial	Unknown
Kansas City	247	95	1	3	0	2	46
Northeast	886	62	1	0	1	2	59
Northwest	436	14	2	1	0	5	40
Southeast	767	36	1	1	2	0	57
Southwest	1216	25	8	5	1	7	106
St. Louis	355	289	1	6	1	6	25
<b>Total</b>	<b>3907</b>	<b>521</b>	<b>14</b>	<b>16</b>	<b>5</b>	<b>22</b>	<b>333</b>

Foster Parent Race by Region - of homes with availability							
Region	White	Black/ African American	American Indian	Asian	Native Hawaiian	Multi- Racial	Unknown
Kansas City	135	42	0	2	0	1	23
Northeast	544	46	0	0	1	2	31
Northwest	226	5	1	0	0	3	15
Southeast	583	36	1	0	2	0	40
Southwest	765	16	5	4	1	3	60
St. Louis	188	169	1	6	1	2	9
<b>Total</b>	<b>2441</b>	<b>314</b>	<b>8</b>	<b>12</b>	<b>5</b>	<b>11</b>	<b>178</b>

Among all foster parents in Missouri (N = 4,818), 81% are White, 11% are Black/African American, and 7% have Unknown Race. Among the foster parents in homes with availability on April 30, 2023 (N = 2,969), 82% were White, 11% were Black/African American, and 6% have Unknown Race.

Adoptive Parent Race by Region – Total homes							
Region	White	Black/ African American	American Indian	Asian	Native Hawaiian	Multi- Racial	Unknown
Kansas City	958	386	4	5	3	10	186
Northeast	1353	89	11	1	0	4	152
Northwest	1021	15	1	0	0	4	45
Southeast	2305	76	3	0	0	0	165
Southwest	2476	27	4	3	4	14	256
St. Louis	851	648	3	2	2	6	106
<b>Total</b>	<b>8964</b>	<b>1241</b>	<b>26</b>	<b>11</b>	<b>9</b>	<b>38</b>	<b>910</b>

Adoptive Parent Race by Region - of homes with availability							
Region	White	Black/ African American	American Indian	Asian	Native Hawaiian	Multi- Racial	Unknown
Kansas City	342	129	3	2	1	1	58
Northeast	364	22	1	0	0	2	41
Northwest	332	20	1	0	0	6	33
Southeast	344	21	1	0	0	0	26
Southwest	906	8	1	2	0	5	98
St. Louis	205	130	2	1	6	0	19
<b>Total</b>	<b>2493</b>	<b>330</b>	<b>9</b>	<b>5</b>	<b>7</b>	<b>14</b>	<b>275</b>

Note: When homes are dually licensed, counts provided for each type of resource home are unduplicated.

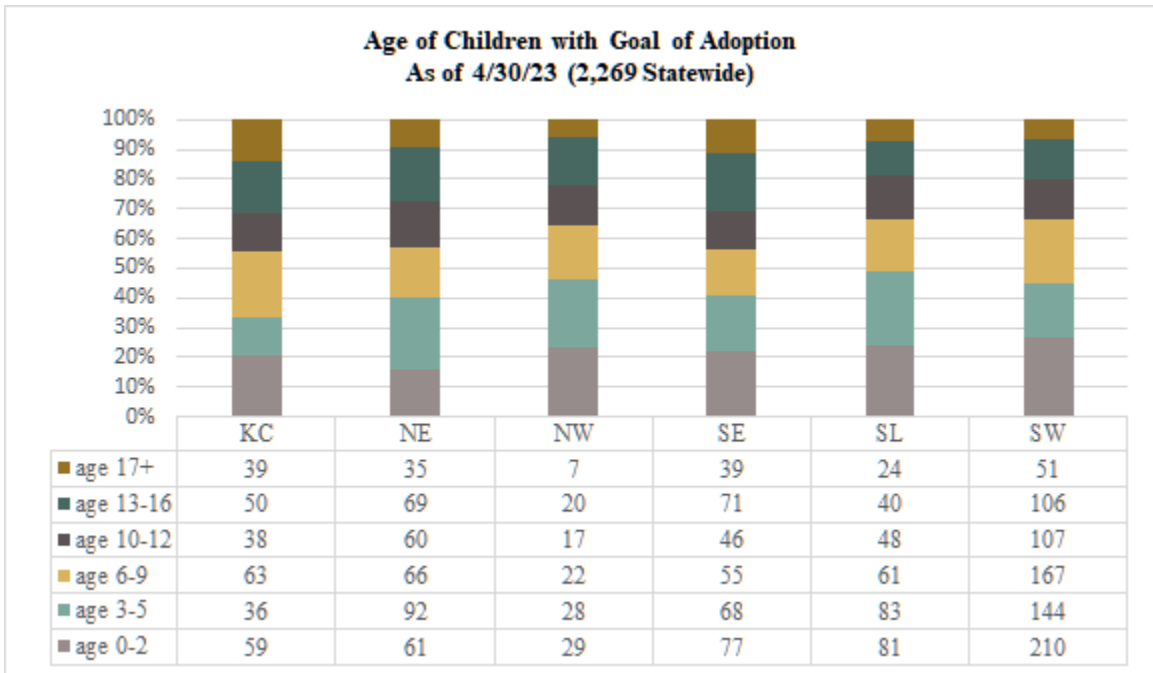
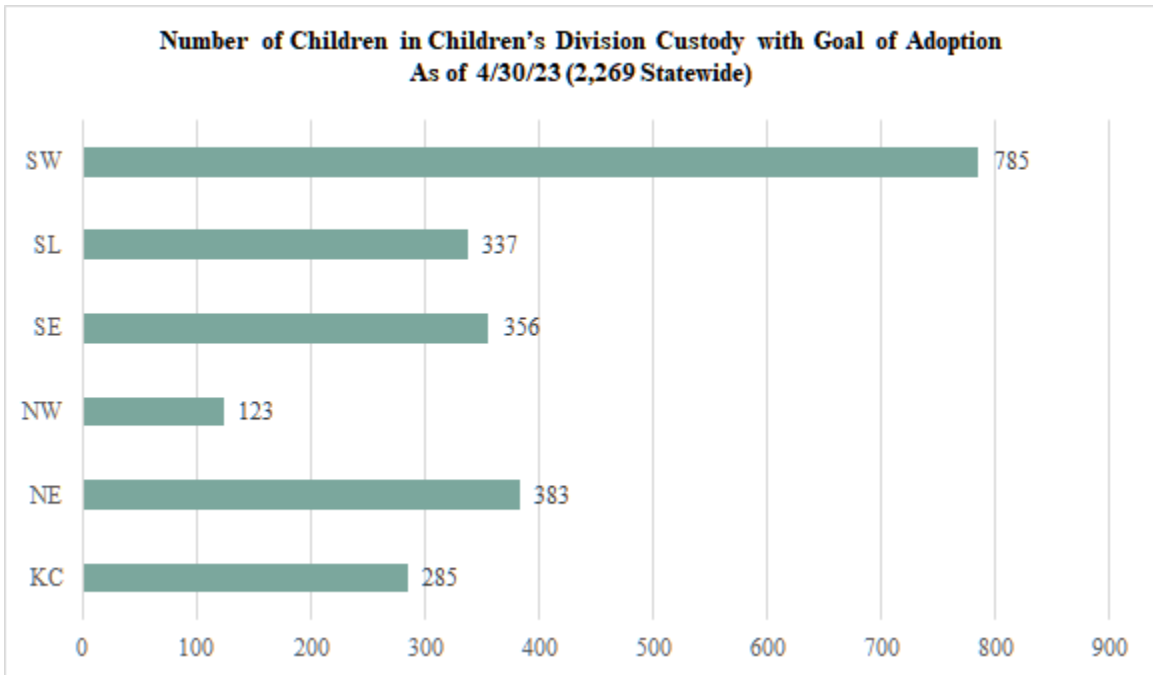
Among all adoptive parents licensed in Missouri (N = 11,199), 80% are White, 11% are Black/African American, and 8% have Unknown Race. Among the adoptive parents in homes with availability on April 30, 2023 (N = 3,133), 80% were White, 11% were Black/African American, and 9% have Unknown Race.

**Statewide Foster Care Population Data:**

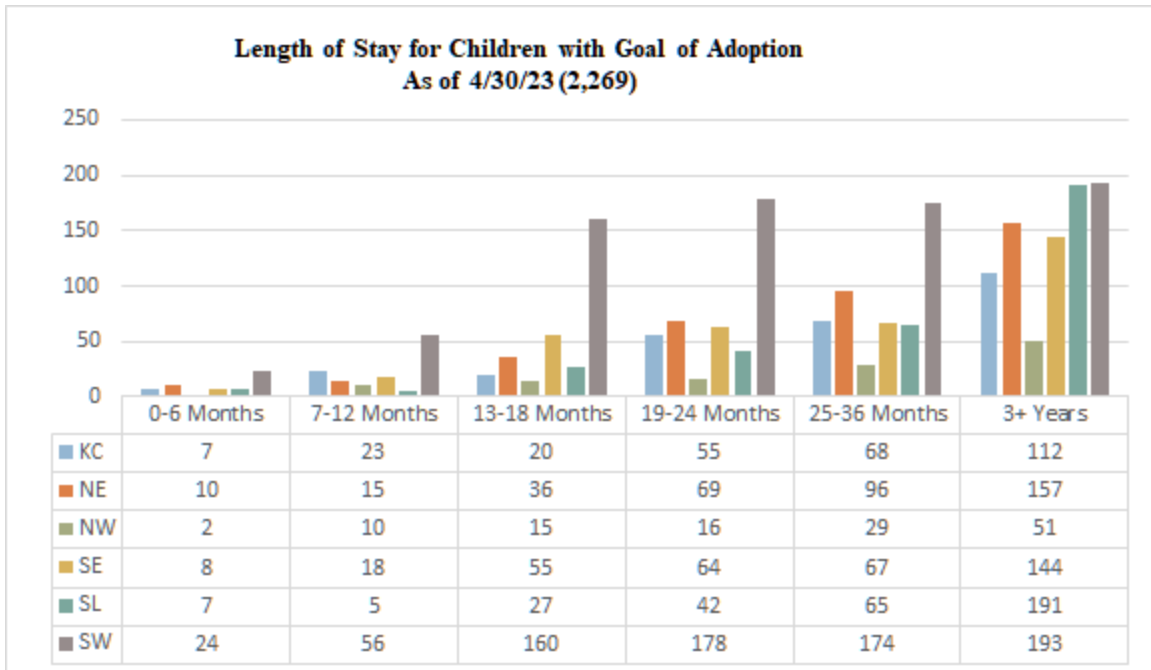
<b>Total Alternative Care Population as of 4/30/23 (13,149)</b>	
<b>Gender</b>	
Male	6703
Female	6446
<b>Race</b>	
White	8948
Black/ African American	2669
American Indian	56
Asian	28
Native Hawaiian	12
Multi-Racial	287
Unknown	1149
<b>Age</b>	
0-2	2837
3-5	2130
6-9	2174
10-12	1493
13-16	2894
17+	1621

The children in foster care in Missouri are evenly split between boys and girls. While White children make up the majority (68%) of the foster care population, a substantial portion of children are Black/African American (20%). While still less than 1% of the foster care population, 56 children in alternative care in Missouri are American Indian. A comparison of demographic data for caregivers and children in care reveals that White caregivers are over-represented among foster and adoptive caregivers in comparison to the racial and ethnic diversity of the children in care, while Black caregivers are under-represented.

**Statewide Adoption Data:**







**Placement Types of Children with Goal of Adoption by Region  
As of 4/30/23 (2,269)**

Region	Adoptive Home	Foster Home	Relative Home	Residential Facility	Other	Total
KC	8	142	102	11	22	285
NE	1	189	160	24	9	383
NW	5	53	50	5	10	123
SE	2	134	150	41	29	356
SL	6	159	129	29	14	337
SW	10	347	348	55	25	785
<b>Total</b>	<b>32</b>	<b>1024</b>	<b>939</b>	<b>165</b>	<b>109</b>	<b>2269</b>

Of the children in Missouri available for adoption, 35.2% (798/2,269) are considered to be placed in a pre-adoptive home with their foster parent or relative provider.

As presented in the data above, there are a significant number of foster and adoptive homes that have available bed space according to their licensing parameters. According to Children’s Division policy, if a foster home does not accept placement of a child for one year, the licensing staff may discuss with the family their desire to continue as a licensed resource home and, if there is agreement, the license can be closed. Anecdotal feedback points to some foster homes being very limited in the type of child(ren) they will accept into their homes. Case management staff also report that they may stop calling foster parents if the parents continually decline to take the children for whom they are requesting placement. Likewise, many of the homes approved for adoption are very specific in relation to the children they are willing to adopt.

Foster parent recruitment is spearheaded by the Resource Licensing Workgroup which meets monthly and is comprised of Children's Division staff with foster home recruitment and licensing responsibilities and Foster Parent Ambassadors representing each region of the state. The group members have committed to conduct at least one foster home recruitment or retention event in their area each month. Some examples of events may include presenting at a local church or community meeting, hosting a booth at a local fair, or supporting a foster parent appreciation event.

The Resource Licensing Workgroup has recently established the Foster Parent Ambassador program. This program partners an experienced foster parent with a newly licensed foster parent to serve as a mentor and resource for the new foster parent. The Ambassadors are also working to start foster parent support groups in their areas. There are approximately 50 experienced foster parents who have committed to serve as Foster Parent Ambassadors.

There is recognition that the number of Black and African American foster parents is under represented in relation to the number of Black and African American children in the foster care population. Efforts to increase the number of African American homes have included reaching out to minority alumni groups on college campuses within the state to determine if there are opportunities for recruitment. The Department of Social Services Communications staff is in the process of making foster parent recruitment videos specific to minority groups. Recruitment specifically targeted in primarily African American churches is also occurring throughout the state.

Two sub-groups have formed out of the Resource Licensing Workgroup. The first is a sub-group focused on the need for additional homes to accept children with elevated behavioral needs. While the sub-group has not been meeting long and there have been no specific strategies developed yet, they distributed a survey at the end of 2022 to current elevated needs foster parents to better inform their next steps. In addition, Missouri continues to engage agencies who express interest in providing Treatment Foster Care.

The second sub-group of the Resource Licensing Workgroup is focused on foster parent retention. This group also began with a survey of current foster parents to determine their priorities. The survey indicated that communication was a concern for foster parents, so a Foster Parent Newsletter was developed. It is published monthly and contains training opportunities, resources available through the Kinship Navigator program, a description of the Foster Parent Ambassador Program, and other information that foster parents may find helpful. This sub-group is also working on a customer service protocol for licensing and a flowchart from initial inquiry through licensure.

In addition to the statewide foster parent recruitment efforts, each circuit develops an annual foster and adoptive parent recruitment plan specific to their area. Demographic data on the foster care population in the circuit is provided to the circuit to inform the placement needs within the circuit. As plans are developed, they are provided to staff in central office.

Missouri continues to take a collaborative approach of engaging private and public partners in the recruitment of foster and adoptive parents. The following Missouri partners work together to establish effective collaboration strategies for adoption recruitment planning:

- Family Resource Centers in Kansas City, St. Louis, Jefferson City, Columbia, Springfield, Rolla, Macon, and Hannibal
- Resource Team of Southwest Missouri
- Cornerstones of Care Recruitment and Retention Privatization Contractor in Kansas City and the Northwest Region
- Global Orphan Project
- Raise the Future
- AdoptUSKids
- Recruitment and Retention Workgroup
- CFSR Advisory Committee
- Missouri State Foster Care and Adoption Board
- Wendy's Wonderful Kids
- Native American partners workgroup
- Faith Based partners throughout Missouri

In addition to the representatives identified above, the ARTS (Adoption Recruitment Training and Supports) committee is comprised of the following standing members:

- Staff from the Raise the Future of Missouri
- Communications Director from the Department of Social Services
- Foster Care/Adoption staff of all levels
- Privatization contract representative
- Private case management contract representative

Adoption recruitment planning is spearheaded by the ARTS (Adoption Recruitment Training and Supports) Team. This team meets quarterly and is attended by both private and public partners as well as contractors such as Raise the Future and representatives from the Adoption Resource Centers and the Recruitment and Retention Contractor for the Kansas City and Northwest regions. Meetings focus on adoption recruitment planning and strategy development which is then carried throughout the state for on-going implementation. Members are provided with information and tools to utilize in their own areas for foster and adoption recruitment.

Adoption recruitment for sibling groups, teenagers, and children with special needs that make them more difficult to place are a focus for ongoing recruitment strategies. Heart Gallery Highlights is a bi-monthly virtual meeting that features children currently available for adoption. Although the activity has occurred for the past several years, attendance by potential adoptive families was minimal. In 2023, the process for notification and invitation was changed. Instead of relying on individual workers to invite specific families to the Highlights meeting, invitations are now being sent centrally to all approved adoptive families with availability and a current

email address in the FACES electronic case management system. This change has resulted in an increased attendance rate. Prior to 2023, attendance was typically less than 10 families. During the March 2023 Highlights virtual meeting, 44 families were in attendance. In May 2023, 34 families attended. The ARTS Team set a goal of 30 families to attend each session.

The Diligent Recruitment Plan, as required by the Child and Family Services Plan, is updated annually and includes, but is not limited to, the following efforts.

### **Ongoing Recruitment Efforts:**

The Children's Division has refined and expanded its social media presence utilizing the Department of Social Services (DSS) homepage, and the DSS Facebook and Twitter accounts. Children's profiles are being posted on the DSS Facebook account once a week throughout the year as well as a few times each month on the DSS Twitter account. Many community partners share or re-tweet these posts on their agency and personal Facebook pages or twitter feeds. The MO Heart Gallery website is also being used more consistently to promote foster care, adoption, and events specific to the recruitment and support of resource parents. Video segments or digital stories continue to be added to a number of profiles featured on the Gallery. In addition, Raise the Future and AdoptUSKids websites feature the same children, thus increasing their viewing audience. Additional multifaceted approaches to foster and adoptive caregiver recruitment include:

- Person to person contacts by current foster/adoptive parents with potential foster/adoptive parents which has proven to be the single best method for recruitment. Social media features make information-sharing seamless for resource parents to share with their social groups/contacts
- Recruitment of distinct individuals based on profession or prior involvement with a child as required by a child's special need. Examples may include special education teachers, or therapists who have expertise with a certain population of special needs children
- Monthly Adoption Heart Gallery Highlight presentations through WebEx for staff to present their children to other staff and potential families
- Informational meetings and events at community locations such as shopping malls, fairs, libraries, and bookstores, to educate about foster care and adoption and featuring the Missouri Heart Gallery recruitment materials
- Adoption Information On-Line Webinars to educate the public about Missouri foster care and adoption, providing a basic overview of adoption in the state of Missouri
- Utilization of the news media (e.g., newspapers, radio station, television station, cable network station, special interest bulletins), including expanding Wednesday's child features into the Springfield television market
- Displaying flyers, pamphlets, posters, handouts and electronic web notices and social media posts
- Coordination with faith-based partners in communities throughout the state to feature photos and profiles of children currently waiting for adoption and informing churches of

the need within their community for foster and adoptive families by providing zip code specific information to faith-based partners for recruitment

- Coordination with faith-based partners to increase support of relative and non-relative resource families, which has also increased interest in providing care as a foster parent
- Distribution of informational packets and foster parent information in Heart Gallery promotional materials at recruitment and community events
- Utilizing AdoptUSKids and Raise the Future websites where Missouri's waiting children are featured in addition to the MO Heart Gallery site
- Celebrating National Foster Care month (May) and National Adoption month (November) to include media campaigns and print materials for recruitment
- Linking Hearts Event in Rolla MO which is a collaborative effort between the Phelps County Community Partnership and the Panhellenic Society at Missouri S & T University. Families are able to interact with available children and receive information about foster care and adoption
- National Recruitment Saturday Celebration in St. Louis and Jackson Counties

The Children's Division has partnered with Raise the Future to create and offer a digital Heart Gallery display to be used in the community as a new recruitment opportunity. This digital Heart Gallery display can be used in the same venues and community events as the Traveling Heart Gallery display. The digital Heart Gallery display has been updated throughout the year and offers a user-friendly format.

Changes to the Heart Gallery website have resulted in a new web design with some additional features. The website now includes the ability for the public to request information on how they can get involved by becoming a volunteer photographer, hair stylist, or to host an event. This has opened the door for more communication which has in turn created more inquiry from the public on how to become a foster or adoptive family.

Photographs are printed twice a year for the Traveling Heart Gallery. Each region in Missouri receives an 8 x10 image of the children who are featured in the Gallery for display at their events. For children to be listed on the Raise the Future website, staff must complete an on-line registration. This registers the child with Raise the Future, AdoptUSKids, and the Missouri Heart Gallery websites at the same time, as well as the DSS Facebook page and DSS Twitter account. Video segments and digital stories continue to be added to a number of child profiles featured on the Heart Gallery.

Continued coordination occurs with Raise the Future to:

- Further expand their role in recruitment of foster and adoptive parents for youth
- Increase connections to potential parent matches for youth in foster care and awaiting adoption through targeted recruitment meet and greet opportunities

- Increase the use of video/digital profiles on Raise the Future and Heart Gallery websites to bring the waiting children's personalities and interests to life
- Provide Adoption Information webinars a few times a year to educate about Missouri foster care and adoption providing a basic overview of adoption in the state of Missouri

Additional electronic or media profiles were developed and presented in local television markets and subsequently posted on the Heart Gallery website and social media platforms for featured children. In addition, more Faith Based partners are coming forward wanting to offer their time and equipment to produce video segments/digital stories for the children seeking an adoptive home.

Continued partnership with Faith and Community Partners help to:

- Ensure outreach to all communities representative of the youth population in care
- Accomplish outreach to neighborhoods for development of resource homes where children are removed to ensure children can remain in close proximity to family, school and social connections
- Recruit families committed to preserving Native American/Alaskan Native culture for children/youth with such cultural background which is being accomplished through partnership of the child welfare system ICWA workgroup
- Producing video segments/digital stories for the children seeking an adoptive home

Children's Division has created two new videos, one specifically geared to foster parent recruitment and the other specifically geared to foster and adoptive parent recruitment. Links to the video are below:

Foster Parent Video [https://www.youtube.com/watch?v=F\\_P5m-PUc-Q](https://www.youtube.com/watch?v=F_P5m-PUc-Q)  
 Adoption Video [https://youtu.be/F\\_P5m-PUc-Q](https://youtu.be/F_P5m-PUc-Q)

The Children's Division strives to increase the number of children in foster care who are placed with relatives. To this end, the Children's Division is focusing significant energy on relative assessment, training, and supports. In early 2019, a designated Relative First Program Development Specialist was added to the team in the Children's Division Central Office to spearhead this work. In 2018, Missouri was fortunate to have the National Family Focused Treatment Association (FFTA), through the Missouri chapter, facilitate a summit with Children's Division personnel and current Therapeutic Program Care providers to explore expansion of therapeutic care to relative providers. By late 2018, the local FFTA Chapter and Missouri Children's Division had developed a process to pilot provision of these services under the existing contract structure. In 2019, there were three active cases of youth residing in Relative Treatment Foster Care (TFC) homes. The goal of the pilot was to reach up to 10 cases and determine the most effective strategies and processes to develop a Relative TFC Program as an available service option for all relative children requiring a higher level of care at entry or as a stepdown option from residential care. As of February 2023, this goal has been met and Missouri now supports a total of 34 active relative TFC placements.

Efforts to heighten awareness of the need for foster and adoptive providers in National Adoption Month occurred in November 2022. Social media was maximized for this effort with children or sibling groups featured every day in November, along with interviews of adoptive parents and staff in an effort to recruit additional families. Adoption month bracelets were shared with community partners as conversation starters at each of the events held in local jurisdictions.

As a result of the Family First Prevention Services Act (FFPSA) legislation passage, Missouri Children's Division is contracting with ParentLink to provide Kinship Navigator Services to relative providers. The navigator services are available to both formal and informal kinship providers. The contract with ParentLink requires a steering committee to include management of Missouri's Adoption or Family Resource Centers to assure combined efforts for relative care providers and cross pollination of support or retention services provided to relative and non-relative resource families where appropriate.

Also as a result of the FFPSA, the Division is focusing heavily on recruitment of resource homes to assure resources are available for elevated needs children when they enter care in place of the need for residential care and also as a strategy to discharge youth from residential treatment and assure timely permanency. Jackson County began a right-sizing residential group consisting of Children's Division representatives, Foster Care Case Management partners, as well as the privatized Recruitment and Retention Contractor to develop solutions and strategies for recruiting family settings for children with more complex needs. The group has worked to assure Department of Mental Health (DMH) services are available and connected to relatives and foster families. The Tools of Choice training offered through DMH is also used to prepare and equip caregivers for elevated needs youth.

The strategies for recruiting foster and adoptive families outlined in this section highlights the myriad of ways that Missouri partners with multiple stakeholders to accomplish the work of recruiting and supporting caregivers for children in alternative care. Missouri asserts that Diligent Recruitment for Foster and Adoptive Homes is a strength for the child welfare system.

### **Item 36: State Use of Cross-Jurisdictional Resources for Permanent Placements**

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning to ensure that the process for ensuring the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children is occurring statewide?

This item was determined to be an area needing improvement during CFSR Round 3. Missouri continues to determine that this item is an area needing improvement for the child welfare system in CFSR Round 4.

The Interstate Compact on the Placement of Children (ICPC) is a legal binding contract among the member states, approved by each state's legislative body, and by the U.S. Congress. Interstate Compact has been adopted by all fifty states and includes the District of Columbia, and the U.S. Virgin Islands. ICPC is the best means available to ensure protection and services to children who are placed across state lines into the home of a parent or relative, a foster home, an adoptive home, and/or a residential treatment facility. ICPC assists in providing home studies, placement supervision, and regular reporting after a child is placed with an out-of-state resource

Missouri has a strong Interstate Compact Unit to assure cross-jurisdictional placements for children are made to support timely permanency and the most appropriate settings for children and youth in foster care. The ICPC Unit of one supervisor, two child placement coordinators, one hourly staff person, one clerical, and one manager, process referrals within five days of receipt through the National Electronic Interstate Compact Enterprise (NEICE). Missouri joined NEICE in November of 2019 and uses this tool for the exchange of required data and documents to other states in order to secure placements for Missouri children in other jurisdictions.

Missouri currently has a border agreement with the state of Kansas. The agreement allows expedited emergency placement with a relative caregiver or licensed facility (i.e. emergency shelter, residential facility including, but not limited to, a psychiatric residential treatment facility) located within 60 miles of the state's border. Prior to making an emergency placement in a relative home, Missouri is responsible for completing an in-person safety walk-through of the home and appropriate Kansas background screenings. If the relative has lived in Missouri in the past, background screenings for Missouri are also required. Within 30 days of placement, an ICPC referral must be submitted to the Missouri ICPC unit. Kansas staff will complete the ICPC home study.

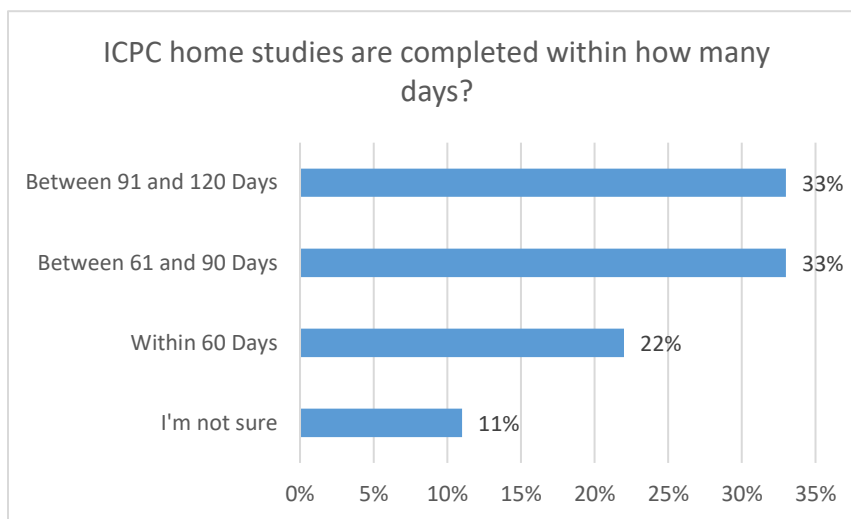
Border agreements are being pursued with the other seven states contiguous to Missouri.

When home assessments are requested from other states, staff in Missouri complete them as quickly as possible so as not to delay potential placements into the state. During the CFSR Statewide Assessment event, session members discussing ICPC were asked "When ICPC home studies are requested for Missouri homes by other states, they are most often completed within how many days?" The most frequent answers were between 61 and 90 days and between 91 and



120 days, both receiving 33% (3/9) of the responses. Two of the nine (22%) participants who completed the online poll believed that home studies were completed within 60 days.

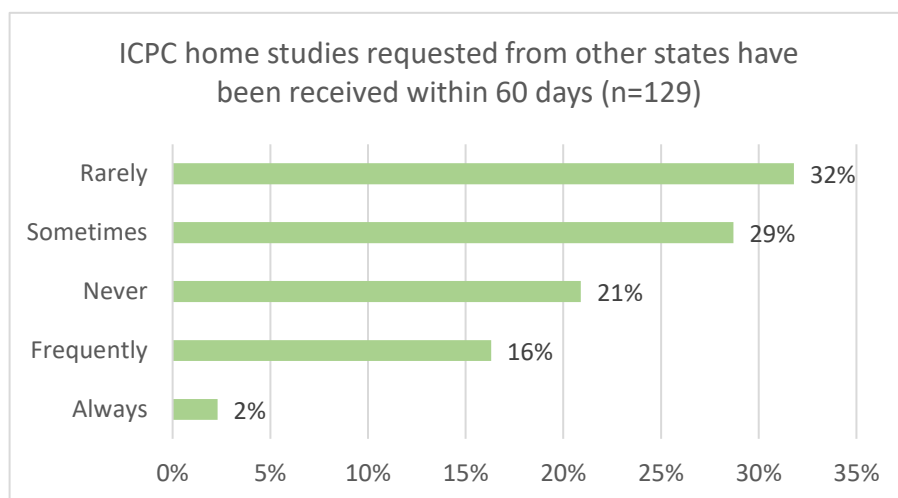
Participants involved in the ICPC session included staff members within the ICPC unit, case managers who have requested studies from other states, Children’s Division staff who routinely completed ICPC home studies on Missouri homes, and Children’s Division leadership.



Challenges to completing ICPC studies requested by

other states in a timely manner were discussed with the group. Gathering background information from other states in which the parents may have lived can slow down the home study completion. Each state, and sometimes county (if the state is county-administered), has a unique process for completing background checks and it takes time for the staff completing the study to figure out those unique steps. Often the parents do not understand all of the requirements involved in completing the home study and can hinder the timely completion.

The Missouri ICPC unit works collaboratively with other state ICPC offices to assure cases are processed in those states to allow Missouri children to be placed into receiving states when appropriate and safe. Prior to the CFSR Statewide Assessment Event, surveys were distributed to supervisors and managers from the Children’s Division and Foster Care Case Management (FCCM) agencies. For a description of the survey distribution process, please refer to the

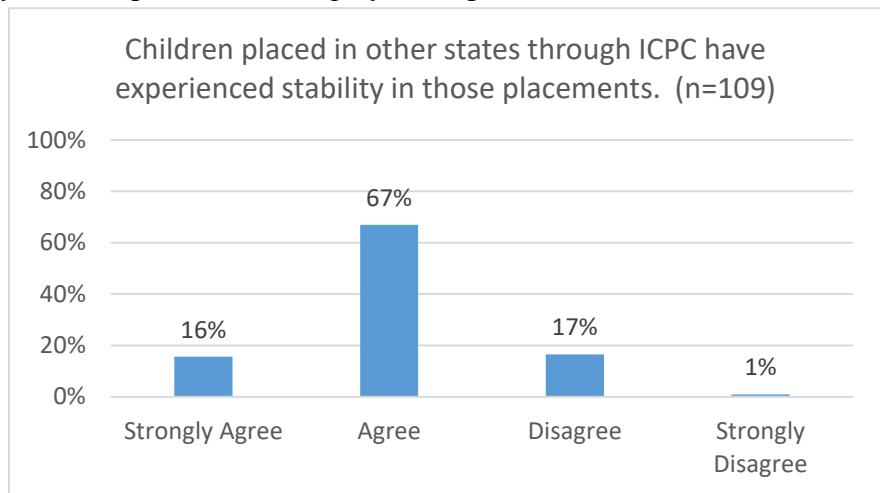


“Description of Stakeholder Involvement in the CFSR Statewide Assessment” section of this report. Survey respondents were asked to comment on how frequently ICPC home studies from other states are received within 60 days of the other state receiving the referral. Fifty-two percent (52%,

68/129) indicated home studies are never or rarely received within 60 days. Despite the time frames to receiving a completed home study, survey responses from Children’s Division and

FCCM workers and specialists who have experience with making placements outside of Missouri, indicate that for the majority of placements made through ICPC to other states, children experienced stability in those placements. Eighty-three percent (83%, 90/109) of respondents strongly agreed or agreed that placements through ICPC have been stable.

Child Placing Agencies have responsibility to complete a referral to the ICPC Unit in the same manner as Children’s Division staff when the child under consideration for out of state placement



is being managed by their agency. This management may be on behalf of the Children’s Division or of a child who is in the agency’s care and custody for adoptive planning and placement. The ICPC unit in Central office serves as the statewide ICPC office for the state of Missouri.

Internally, the Children’s Division assures that placement resources in other counties are contacted and assessed timely to assure placements can be made inter-jurisdictionally within the state, as well. For initial relative placements, the case manager will complete the required background checks and send a request to the circuit within which the relative resides. A worker within the receiving circuit will complete an in-person safety walkthrough of the home. Upon placement, if the relative wishes to pursue licensure, the child’s case manager will request a home study from the resident circuit’s licensing worker or contracted agency. Foster home placements can also occur inter-jurisdictionally by contacting the foster home’s licensing worker to discuss the need for placement and receive approval.

Missouri has no federally-recognized tribes within its borders, so placement with tribal members is not commonplace. However, children are assessed for eligibility with the Indian Child Welfare Act (ICWA) upon entry into foster care. If it is determined that the child has Indian heritage, the tribe is contacted and asked if they would like to assume placement, as required by ICWA.

ICPC in Missouri served a total of 3,798 children in fiscal year 2022.

- Total children placed outside of Missouri 289
- Total children placed in Missouri from other states 509
- Home study requests received from other states 635
- Home study requests to other states from Missouri 850

The method for data collection for ICPC is an area of concern for Missouri. The database that is used to track home studies and placements through ICPC is antiquated and gathering needed information to assess current functioning is cumbersome. Missouri was unable to use the NEICE system for several months in 2021 and 2022, so data is not available from that source, as well. Options for data collection and analysis are currently being explored.

Missouri believes that the ICPC process is functioning throughout the state, but the lack of data to accurately assess timely functioning results in an area needing improvement determination.

**Appendix A: Missouri CFSR State Data Profile (August 2022)**



# Missouri

Child and Family Services Review (CFSR 4) Data Profile  
AFCARS and NCANDS submissions as of 6-28-22

August 2022

## Risk-Standardized Performance Visualization

Risk-Standardized Performance (RSP) is the percent or rate of children experiencing the outcome of interest, with risk adjustment. The vertical bars in the line graph represent the lower RSP and upper RSP of the 95% RSP (confidence) interval, and national performance (NP) is the dotted black line.

## Safety Outcomes

**Maltreatment in Care**  
(victimizations/100,000 days in care)

9.07 NP  
7.47 RSP

Lower value is desired

Measured as the rate of abuse or neglect per days in foster care in a 12-month period that children experienced while under the state's placement and care responsibility

**Recurrence of Maltreatment**

9.7% NP  
4.2% RSP

Lower value is desired

Measured as the percent of children who were the subject of a substantiated or indicated report of maltreatment in a 12-month period and who experienced subsequent maltreatment within 12 months of the initial victimization

## Permanency Outcomes

**Permanency in 12 Months (entries)**

35.2% NP  
25.3% RSP

Higher value is desired

Among children who entered foster care in a 12-month period, the percent who exited foster care to reunification, adoption, guardianship, or living with a relative within 12 months of their entry

**Permanency in 12 Months (12-23 mos)**

43.8% NP  
46.5% RSP

Higher value is desired

Among children in foster care at the start of the 12-month period who had been in care for 12 to 23 months, the percent who exited to permanency in the subsequent 12 months

**Permanency in 12 Months (24+ mos)**

37.3% NP  
37.5% RSP

Higher value is desired

Among children in foster care at the start of the 12-month period who had been in care 24 months or more, the percent who exited to permanency in the subsequent 12 months

**Reentry to Foster Care**

5.6% NP  
4.3% RSP

Lower value is desired

Among children who discharged to permanency (excluding adoption) in a 12-month period, the percent who reentered care within 12 months of exit

**Placement Stability**  
(moves/1,000 days in care)

4.48 NP  
5.39 RSP

Lower value is desired

Among children who entered care in a 12-month period, the number of placement moves per day they experienced during that year

### Performance Key

- State's performance (using RSP interval) is statistically better than national performance.
- State's performance (using RSP interval) is statistically no different than national performance.
- State's performance (using RSP interval) is statistically worse than national performance.
- DQ Performance was not calculated due to exceeding the data quality limit on one or more data quality (DQ) checks done for the indicator. See footnotes for more information.



**Risk-Standardized Performance**

Risk-Standardized Performance (RSP) is the percent or rate of children experiencing the outcome of interest, with risk adjustment. To see how your state is performing relative to the national performance (NP), compare the RSP interval to the NP for the indicator. See the footnotes for more information on interpreting performance.

		National Performance	17B18A	18A18B	18B19A	19A19B	19B20A	20A20B	20B21A	21A21B	21B22A
<b>Permanency in 12 months (entries)</b>	RSP		30.3%	29.1%	28.9%	28.4%	25.9%	25.3%			
	35.2%▲	RSP interval	29.2%-31.3% <sup>3</sup>	28.0%-30.1% <sup>3</sup>	27.9%-30.0% <sup>3</sup>	27.4%-29.5% <sup>3</sup>	25.0%-26.9% <sup>3</sup>	24.3%-26.4% <sup>3</sup>			
		Data used	17B-19B	18A-20A	18B-20B	19A-21A	19B-21B	20A-22A			
<b>Permanency in 12 months (12-23 mos)</b>	RSP					49.3%	51.4%	48.0%	47.3%	47.0%	46.5%
	43.8%▲	RSP interval				47.7%-51.0% <sup>1</sup>	49.8%-53.0% <sup>1</sup>	46.4%-49.6% <sup>1</sup>	45.7%-48.9% <sup>1</sup>	45.4%-48.6% <sup>1</sup>	45.0%-48.0% <sup>1</sup>
		Data used				19A-19B	19B-20A	20A-20B	20B-21A	21A-21B	21B-22A
<b>Permanency in 12 months (24+ mos)</b>	RSP					39.4%	40.1%	40.8%	38.4%	37.6%	37.5%
	37.3%▲	RSP interval				37.8%-41.0% <sup>1</sup>	38.5%-41.8% <sup>1</sup>	39.2%-42.5% <sup>1</sup>	36.9%-40.1% <sup>2</sup>	36.1%-39.2% <sup>2</sup>	35.9%-39.0% <sup>2</sup>
		Data used				19A-19B	19B-20A	20A-20B	20B-21A	21A-21B	21B-22A
<b>Reentry to foster care</b>	RSP			4.9%	5.6%	4.8%	3.7%	4.2%	4.3%		
	5.6%▼	RSP interval		4.3%-5.6% <sup>2</sup>	4.9%-6.3% <sup>2</sup>	4.2%-5.5% <sup>1</sup>	3.1%-4.3% <sup>1</sup>	3.6%-4.8% <sup>1</sup>	3.7%-5.0% <sup>1</sup>		
		Data used		18A-19B	18B-20A	19A-20B	19B-21A	20A-21B	20B-22A		
<b>Placement stability (moves/1,000 days in care)</b>	RSP					5.93	5.55	5.15	5.24	5.34	5.39
	4.48▼	RSP interval				5.79-6.07 <sup>3</sup>	5.42-5.69 <sup>3</sup>	5.02-5.28 <sup>3</sup>	5.1-5.39 <sup>3</sup>	5.2-5.48 <sup>3</sup>	5.26-5.53 <sup>3</sup>
		Data used				19A-19B	19B-20A	20A-20B	20B-21A	21A-21B	21B-22A
<b>Maltreatment in care (victimizations/100,000 days in care)</b>	RSP		18AB,FY18	19AB,FY19	20AB,FY20	FY18-19	FY19-20	FY20-21			
	9.07▼	RSP interval	7.16	7.50	7.47	6.33-8.11 <sup>1</sup>	6.64-8.47 <sup>1</sup>	6.62-8.43 <sup>1</sup>			
		Data used	18A-18B, FY18-19	19A-19B, FY19-20	20A-20B, FY20-21						
<b>Recurrence of maltreatment</b>	RSP					5.1%	3.9%	4.2%			
	9.7%▼	RSP interval				4.5%-5.8% <sup>1</sup>	3.4%-4.6% <sup>1</sup>	3.6%-5.0% <sup>1</sup>			
		Data used				FY18-19	FY19-20	FY20-21			

**Performance Key**

- State's performance (using RSP interval) is statistically better than national performance.
- State's performance (using RSP interval) is statistically no different than national performance.
- State's performance (using RSP interval) is statistically worse than national performance.
- DQ Performance was not calculated due to exceeding the data quality limit on one or more data quality (DQ) checks done for the indicator. See footnotes for more information.

▲ For this indicator, a higher RSP value is desirable. ▼ For this indicator, a lower RSP value is desirable.



## Missouri

Child and Family Services Review (CFSR 4) Data Profile  
AFCARS and NCANDS submissions as of 6-28-22

August 2022

### Footnotes

**National Performance (NP)** is the observed performance for the nation for an earlier point in time. See the Data Dictionary for more information, including the time periods used to calculate the national performance for each indicator.

**Risk-Standardized Performance (RSP)** is derived from a multi-level statistical model and reflects the state's performance relative to states with similar children and takes into account the number of children the state served, the age distribution of these children, and, for one indicator, the state's entry rate. It uses risk adjustment to minimize differences in outcomes due to factors over which the state has little control and provides a more fair comparison of state performance against the national performance.

**Risk-Standardized Performance (RSP) interval** is the state's 95% confidence interval estimate for the state's RSP. The values shown are the lower RSP and upper RSP of the interval estimate. The interval accounts for the amount of uncertainty associated with the RSP. For example, the Children's Bureau is 95% confident that the true value of the RSP is between the lower and upper limit of the interval. If the interval overlaps the national performance, the state's performance is statistically no different than the national performance. Otherwise, the state's performance is statistically higher or lower than the national performance. Whether higher or lower is desirable depends on the desired direction of performance for the indicator.

**Data used** refers to the initial 12-month period (see description for the denominator in the Data Dictionary) and the period(s) of data needed to follow the children to observe their outcome (see description for the numerator in the Data Dictionary). The FY (e.g., FY19), or federal fiscal year, refers to NCANDS data, which spans the 12-month period October 1 – September 30. All other periods refer to AFCARS data: 'A' refers to the 6-month period October 1 – March 31. 'B' refers to the 6-month period April 1 – September 30. The two-digit year refers to the calendar year in which the period ends (e.g., 19A refers to the 6-month period October 1, 2018 – March 31, 2019).

**DQ** identifies when performance was not calculated due to the state exceeding the data quality limit on one or more data quality (DQ) checks done for the indicator, or missing AFCARS and/or NCANDS submission(s). Exceeding a limit on a DQ check will result in performance not being calculated on the associated indicator(s) that require that data period. Exceeding the limit of a single DQ check can affect multiple indicators and reporting periods. See the data quality table for details.



**Observed Performance**

Observed performance is the percent or rate of children experiencing the outcome of interest, without risk adjustment. See the Data Dictionary for a complete description of the numerator and denominator for each statewide data indicator.

		17B18A	18A18B	18B19A	19A19B	19B20A	20A20B	20B21A	21A21B	21B22A
<b>Permanency in 12 months (entries)</b>	Denominator	6,606	6,693	6,433	6,609	6,960	6,174			
	Numerator	2,099	2,043	1,944	1,968	1,902	1,622			
	Observed performance	31.8%	30.5%	30.2%	29.8%	27.3%	26.3%			
<b>Permanency in 12 months (12-23 mos)</b>	Denominator				3,370	3,519	3,605	3,486	3,709	3,975
	Numerator				1,664	1,820	1,738	1,656	1,752	1,848
	Observed performance				49.4%	51.7%	48.2%	47.5%	47.2%	46.5%
<b>Permanency in 12 months (24+ mos)</b>	Denominator				3,196	3,168	3,152	3,167	3,286	3,268
	Numerator				1,276	1,266	1,271	1,208	1,246	1,247
	Observed performance				39.9%	40.0%	40.3%	38.1%	37.9%	38.2%
<b>Reentry to foster care</b>	Denominator		4,270	4,196	4,340	4,360	4,143	4,061		
	Numerator		189	215	192	144	156	157		
	Observed performance		4.4%	5.1%	4.4%	3.3%	3.8%	3.9%		
<b>Placement stability (moves/1,000 days in care)</b>	Denominator				1,079,268	1,193,262	1,117,313	958,556	1,070,481	1,134,976
	Numerator				6,520	6,772	5,865	5,098	5,831	6,226
	Observed performance				6.04	5.68	5.25	5.32	5.45	5.49
<b>Maltreatment in care (victimizations/100,000 days in care)</b>	Denominator	18AB,FY18	19AB,FY19	20AB,FY20	FY18-19	FY19-20	FY20-21			
	Numerator	4,531,645	4,551,801	4,625,324						
	Observed performance	245	258	261						
<b>Recurrence of maltreatment</b>	Denominator				5,242	4,906	4,237			
	Numerator				200	142	131			
	Observed performance				3.8%	2.9%	3.1%			

**DQ** = Performance was not calculated due to the state exceeding the data quality limit on one or more data quality (DQ) checks done for the indicator, or missing AFCARS and/or NCANDS submission(s). Exceeding a limit on a DQ check for an AFCARS and/or NCANDS submission(s) will result in performance not being calculated on the associated indicator(s) that require the affected submission(s) to calculate performance. A DQ flag will likely affect multiple measurement periods. See the data quality table for details.

**Denominator:** For Placement stability and Maltreatment in care = number of days in care. For all other indicators = number of children.

**Numerator:** For Placement stability = number of moves. For Maltreatment in care = number of victimizations. For all other indicators = number of children.

**Percentage or rate:** For Placement stability = moves per 1,000 days in care. For Maltreatment in care = victimizations per 100,000 days in care. For all other indicators = percentage of children experiencing the outcome.





**Data Quality**

Calculating performance on statewide data indicators relies upon states submitting high-quality data. Data quality checks are performed prior to calculating state performance. The values below represent performance on the data quality checks. If a value for a data period needed to calculate performance on an indicator is orange or "DQ", then state performance on that indicator is not calculated. See the Data Dictionary for a complete description of each check and what the values represent.

AFCARS Data Quality Checks

	Limit	MFC	Perm	PS	17B	18A	18B	19A	19B	20A	20B	21A	21B	22A
AFCARS IDs don't match from one period to next	> 40%	●	●	●	21.1%	21.1%	20.6%	20.7%	21.5%	20.2%	19.8%	19.4%	20.0%	
Date of birth after date of entry	> 5%	●	●	●	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Date of birth after date of exit	> 5%	●	●	●	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Dropped records	> 10%	●	●	●	0.5%	0.5%	0.6%	0.6%	0.6%	0.3%	0.4%	0.6%	1.3%	
Enters and exits care the same day	> 5%	●	●	●	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Exit date is prior to removal date	> 5%	●	●	●	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Missing date of birth	> 5%	●	●	●	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Missing date of latest removal	> 5%	●	●	●	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Missing discharge reason (exit date exists)	> 10%		●		0.3%	0.1%	0.4%	0.2%	0.2%	0.2%	0.2%	0.2%	0.4%	0.1%
Missing number of placement settings	> 5%			●	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Percentage of children on 1st removal	> 95%	●	●	●	83.8%	83.6%	83.4%	83.4%	83.0%	83.1%	83.1%	83.5%	83.5%	83.4%

NCANDS Data Quality Checks

	Limit	MFC	RM	18-19	19-20	20-21	2018	2019	2020	2021
Child IDs for victims match across years	< 1%		●	2.9%	2.5%	2.1%				
Child IDs for victims match across years, but dates of birth/ age and sex do not	> 5%		●	0.0%	0.0%	0.0%				
Missing age for victims	> 5%	●	●				0.0%	0.0%	0.0%	0.0%
Some victims should have AFCARS IDs in child file	< 1%	●					100.0%	100.0%	100.0%	100.0%
Some victims with AFCARS IDs should match IDs in AFCARS files	> 0		●				Y	Y	Y	Y

MFC = Maltreatment in foster care, PS = Placement stability, RM = Recurrence of maltreatment, Perm = Permanency indicators (Permanency in 12 months for children entering care, in care 12-23 months, in care 24 months or more, and Reentry to care in 12 months)

**Performance Key**

- A blank cell indicates there were no data quality checks assessed for that data period because it relies on a subsequent period of data that is not yet available.
- Indicates that data quality check results exceeded the data quality limit.
- DQ Indicates the data quality check was not performed due to data quality issues, or missing AFCARS and/or NCANDS submission(s). For example, there were underlying data quality issues with the AFCARS or NCANDS data set such as AFCARS IDs not being included or a DQ limit exceeded on a related data quality check. "DQ" is displayed on the RSP and Observed Performance pages when performance could not be calculated due to data quality issues.

**Appendix B: Missouri CFSR State Data Profile (August 2022)**

### Missouri Round 4 CFSR Statewide Assessment Event Schedule and Matrix

Acronyms: CD – Children’s Division; FCCM – Foster Care Case Management; FACES – statewide information system; CANHU – Child abuse and neglect hotline unit; FCS – Family Centered Services (in-home services); DLS – Division of Legal Services; DMH – Department of Mental Health

<b>Date/ Time</b>	<b>CFSR Item</b>	<b>Program/Policy Expert (CD)</b>	<b>Stakeholders (groups or individuals)</b>	<b>Data &amp; Data Sources Initial Ideas</b>
Feb. 27 1:00 – 4:00 pm	Statewide Information System	Deputy Director FACES Unit Manager Regional Director Representative	CD/FCCM field staff FACES unit staff Vital statistics representative	Review of system accuracy (1% sample) # & % of children w/unable to determine race over time
Feb. 28 9:00am – 12:00pm	Safety Outcome 1 (Timely Initiation of Reports, Recurrence of Maltreatment, Maltreatment in Foster Care)	Deputy Director Safety Unit Manager Safety PDS Regional Director representative	Law Enforcement Medical providers Out-of-Home Investigation Unit CD Investigative field staff CANHU staff Child Advocacy Center Representatives Parents w/lived experience	Item 1 case review data Data profile measures over time/context data Initial Contact (MMR #4) over time Number of reports accepted over time Substantiation rates by county (mapped) Avg. time to initial contact
Feb. 28 1:00- 4:00pm	Safety Outcome 2 (Services to Prevent Removal from the Home, Risk and Safety Assessment and Management)	Deputy Director Safety Unit Manager Prevention Unit Manager Safety PDS Prevention/FCS PDS Regional Director representative	Prevention partners FCS/Investigative field staff IIS contractors Juvenile Office representatives Medical providers Judge/Court representative Parents w/lived experience Child Advocacy Center Representative Temporary Alternative Placement Arrangement (TAPA) providers Probation and Parole	Items 2 and 3 case review data FC entry rates FFPSA service availability data Safety assessment completion and outcomes TAPA data
Mar 1 9:00am – 12:00pm	Permanency Outcome 1 (Permanency Goal)	Deputy Director Permanency Unit Manager	Foster/Relative providers Court/Judges CD/FCCM case managers	Items 5 and 6 case review data

	for the Child, Timely Permanency, Re-Entry into Foster Care) Written Case Plan Termination of Parental Rights	Permanency PDS Regional Director representative	Permanency Attorneys/DLS Juvenile Officer Parent attorneys JCIP GAL/CASA Parents w/lived experience Foster Care Youth	Data profile measures/context data Permanency goals-numbers and percentage % of children exiting by reason SSP/CS-1 data TPR filing data from OSCA Survey data
Mar 1 1:00pm – 4:00pm	Periodic Review Permanency Hearing Termination of Parental Rights Notice of Hearings and Reviews to Caregivers	Deputy Director Permanency Unit Manager Permanency Attorney Unit Manager Regional Director representative	JCIP Juvenile Office representatives Judge/Court representative Permanency Attorneys/DLS Parents' attorneys GAL/CASA	Item 5 case review data Timely court hearing OSCA data AFCARS hearing data TPR filing data from OSCA Survey data
Mar 2 9:00am – 12:00pm	Permanency Outcome 1 (Placement Stability, Needs and Services to Foster Parents (Item 12C)	Deputy Director Permanency Unit Manager Permanency PDS Relative/Kinship PDS Regional Director representative	Foster/Relative providers Judge/Court representative CD/FCCM case managers Permanency Attorneys/DLS Juvenile Office representative DMH representative Family Resource Center representative JCIP GAL/CASA Youth with lived experience	Item 4 case review data Data profile measure/context data % of children in relative placements over time Avg. number of placements over time AFCARS placement data/number of moves Kinship navigator data
Mar 2 1:00pm – 4:00pm	Permanency Outcome 2 (Sibling Placement, Parent/Child/Sibling Visitation, Maintaining	Deputy Director Permanency Unit Manager Permanency PDS Regional Director representative	Youth with lived experience Parents w/lived experience Relative Providers Juvenile Office Representative CD/FCCM case managers Foster parents	Items 7-11 case review data # and % relative placements Survey data

	Connections, Relative Placement, Parent/Child Relationship)		Judge/Court Representative JCIP GAL/CASA Parent attorney	
Mar 3 9:00am – 12:00pm	Wellbeing Outcome 1 (Needs Assessment & Services for Child & Parent, Involvement in Case Planning, Worker/Child Visitation, Worker/Parent Visitation)	Deputy Directors Prevention Unit Manager Permanency Unit Manager Older Youth Unit Manager Prevention/FCS PDS	CD/FCCM case mgmt. staff Foster care youth Parents w/lived experience Service providers Chafee providers Judge/Court Representative Parent attorney Juvenile Office Representative	Items 12-15 case review data Federal worker/ child visit data FC and in-home visit data (child and parent) Survey data FST/court attendance
Mar 6 1:00pm – 4:00pm	Foster and Adoptive Parent Training Notice of Hearings and Reviews to Caregivers Standards Applied Equally Requirements for Criminal Background Checks Diligent Recruitment of Foster and Adoptive Homes	Deputy Director Licensing Unit Manager Licensing/Recruitment PDS Regional Director Representative	Foster/Relative Providers Licensing staff (CD and contract) Family Resource Center representative Residential Licensing staff	FP training completion/pre-service and in-service Survey response data (FP, JO, judge) FP Licensing exceptions data Background check audit data from Highway Patrol Comparison of FC population demographics to licensed FP demographics
Mar 7 9:00am – 12:00pm	Wellbeing Outcome 2 & 3 (Educational Needs and Services, Physical Health and Behavior/ Mental Health Needs and Services)	Deputy Director Older Youth Unit Manager Wellbeing Unit Manager Medicaid Liaison HIS staff representation	CD/FCCM case mgmt. staff Department of Elementary & Secondary Education Office of Childhood representative Foster Care Youth Foster/Relative providers Medical professionals	Items 16-18 case review data Survey data % FC w/current HCY/dental data

			DMH MO HealthNet representative Service Providers Parent w/Lived Experience	
Mar 7 1:00pm – 4:00pm	State Engagement and Consultation with Stakeholders Pursuant to CFSP and APSR Coordination of CFSP Services with Other Federal Programs	Deputy Directors Regional Director representative	CFSR advisory committee members Dept of Mental Health Dept of Elementary and Secondary Education Office of Childhood representative MO HealthNet Family Support Division Dept of Health & Senior Services (WIC/Maternal health)	Survey data
Mar 8 9:00am – 12:00pm	Quality Assurance System	Deputy Director QA Unit Manager FCCM Oversight Unit Manager Regional Director representative	CD leadership QAS staff FCCM QA designees FCCM leadership CD Supervisors FCCM Oversight Staff	Examples of dashboards/data reports Survey data
Mar 8 1:00pm – 4:00pm	Initial Staff Training Ongoing Staff Training	Deputy Director Staff Training Unit Manager Regional Director representative	Training Unit staff CD/FCCM field staff Supervisory staff CD leadership Permanency Attorney/DLS Foster/Relative Provider Legal Aspects Trainer	% of staff completing pre- service timely Training survey data Supervisory staff feedback data % staff completion (210, LDR, legal aspects, trauma) FCCM training data if not in Employee Learning Center Survey data
Mar 9 9:00am – 12:00pm	Array of Services Individualization of Services	Deputy Directors Regional Director representative Prevention Unit Manager	Service Providers Foster care youth Parents w/lived experience DMH MO HealthNet representative	Item 12, 16-18 case review data – service gaps Survey data

		Licensing Unit Manager Older Youth Unit manager	Court/Judge Juvenile Office representative Parents' attorneys GAL/CASA CD/FCCM case mgmt. staff Foster/Relative Providers	
Mar 9 1:00 – 4:00pm	State Use of Cross- Jurisdictional Resources for Permanent Placements	Deputy Director Licensing Unit Manager ICPC staff Regional Director representative	Licensing staff (CD) Juvenile Office Representative Judge/Court Representative CD/FCCM case management staff	Avg. time to ICPC completion % of ICPC completed w/in timeframes