



Department of Social Services

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www.dss.mo.gov

The Missouri Department of Social Services (DSS) was constitutionally established in 1974 because "the health and general welfare of the people are matters of primary public concern." The department is charged with administering programs to promote, safeguard and protect the general welfare of children; to maintain and strengthen family life; and to aid people in need as they strive to achieve their highest level of independence.

The department is organized into four program divisions: Children's Division, Family Support Division, Division of Medical Services, and the Division of Youth Services. The Divisions of Budget and Finance, General Services and Legal Services provide department-wide administrative and support services.

The department cooperates and partners with many private organizations, businesses and individuals to extend the outreach of human services to Missouri citizens.

Office of the Director

The director of the Department of Social Services is responsible for the overall administration of programs within the department except as otherwise provided by law. The director determines priorities for program implementation and has final approval for uses of state and federal funds appropriated to the department.

There are currently three administrative support divisions within the department: Budget and Finance, General Services and Legal Services.

There are four program divisions within the department responsible for policy formulation, organizing programs and facilitating service delivery. The directors of these divisions report to the department director. These divisions are: Children's Division, Family Support, Medical Services and Youth Services.

Missouri's State Technical Assistance Team (STAT) has evolved from implementing Missouri's Child Fatality Review Program (CFRP) in 1992 to providing comprehensive integrated services to the entire child protection community. From data collection and interpretation, to prevention facilitation, training and complex criminal investigations, STAT provides support and expertise to professionals responsible for the protection of children at risk.

The Human Resource Center (HRC) guides the overall human resources management system for the more than 8,500 employees within the department. The section is responsible for ensuring compliance with merit system rules and coordinating activities in the areas of labor relations, recruitment, selection, classification, compensation and training. HRC is also responsible for union negotiations and resolution administration as well as administering the employee grievance system.

Administration divisions

The **Division of Budget and Finance** provides budgeting and financial support services to all divisions within the department. The responsibilities of the Division of Budget and Finance can be divided into the following major support areas: accounts payable, payroll, purchasing, receipts, audits, grants management, budget and planning.

The **Division of Legal Services** provides comprehensive legal support to all programs and support divisions in DSS. The division represents the department, its divisions and the state, not individuals. The Division of Legal Services (DLS) is organized into three major sections: Litigation, Administrative Hearings and Investigations.

The **Division of General Services** provides a variety of support services to all agencies within the department. Offices are located in Jefferson City, Kansas City and St. Louis. Services include mail processing, telecommunications, inventory and warehouse management, fleet management, homeland security and safety and capital improvement oversight.

The Litigation Section represents the divisions of DSS before administrative tribunals and in the circuit and appellate courts. These cases relate to judicial review of administrative child support orders on behalf of the Family Support Division (FSD), Children's Division (CD), proceedings involving child abuse and neglect, licensure and revocation of foster homes, minor guardianships, permanency planning for children including, as appropriate, termination of parental rights; legal services to the Division of Youth Services (DYS) in restoring young people to leading lives as productive citizens; and, for all divisions, advice on contracts, personnel matters and the reviewing and implementation of administrative regulations.



DEBORAH E. SCOTT
Director



BRIAN KINKADE
Interim Deputy Director



VICKY WEIMHOLT
Assistant to the Director



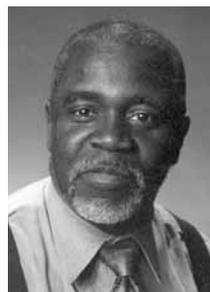
JANDRA CARTER
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Executive Assistant



JAMES W. UFFMANN
Associate Director



HARRY WILLIAMS
Director
Division of Legal Services



JENNIFER TIDBALL
Director
Division of Budget and Finance

The Administrative Hearings Section is comprised of hearing officers who conduct hearings related to child support enforcement and public benefits under Chapter 208, 454, 536 and 660, RSMo. (Administrative hearings include enforcing, establishing and modifying child support orders, to ensure the obligation to provide child support is current and reflects the parents' ability to provide financial and medical support to their children in accordance with Supreme Court Rule 88.01.) The Administrative Hearings Section also provides hearings to thousands of public assistance applicants and recipients as mandated by federal law. These due process hearings provide the forum for determining whether the denial or termination of public benefits was justified.

The Investigation Section is divided into four units: Welfare Investigations Unit, Medicaid Investigations Unit, Claims and Restitution Unit and General Assignment Unit. The Welfare Investigations Unit investigates fraud and abuse committed by public assistance recipients. The Medicaid Investigations Unit investigates fraud and abuse committed by recipients against Medicaid providers. Also, the Medicaid Unit is responsible for Medicaid provider compliance investigations including overpayments, denial of enrollments and program sanctions. The Claims and Restitution Unit operates and manages the

Claims Accounting Restitution System (CARS). The CARS system tracks the establishment and collection efforts in all claims in the public assistance programs administered by DSS. This unit processes in excess of 40,000 recoupments and 100,000 hot line and mail requests annually. The General Assignment Unit conducts criminal, personnel and internal investigations; investigates allegations of discrimination and civil rights violations; locates persons owing monies to DSS, as well as other state agencies, identifies their resources, initiates collection actions, monitors payments and takes appropriate action on delinquent accounts; conducts background investigations and associated research in support of DSS investigations, as well as background checks on prospective DSS employees.

Children's Division

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Child welfare services are provided under federal and state laws to help each eligible child and family function at their maximum potential, both personally and socially.

The division has a legal mandate to provide services in three primary areas – child abuse and neglect investigations and family assessments; treatment and placement services to children and families; and provision of child care.

Child Abuse and Neglect Investigations and Assessments

The division is responsible for receiving reports of alleged child abuse or neglect. Upon receiving a report, the division responds to protect the child. The goals of child abuse or neglect investigations and assessments are to assess the level of risk to the child; protect the child from harm; determine if abuse or neglect occurred as reported; and provide services to the family.

Under the provisions of the Child Abuse and Neglect Law (Sections 210.110, 210.167, RSMo) a “child” is any person under 18 years of age; “abuse” includes both actual and threatened physical injury, sexual or emotional abuse inflicted on a child other than by accidental means by those responsible for his or her care, custody and control, except that discipline, including spanking, administered in a reasonable manner, shall not be construed to be abuse; “neglect” is failure to provide, by those responsible for the care, custody and control of the child, the proper or necessary support, education, as required by law, or medical, surgical or any other care necessary for the child’s well-being; and “persons responsible for the care, custody and control of the child” include, but are not limited to, the parents or guardian of the child, other members of the child’s household, or those people exercising supervision over a child for any part of a 24-hour day.

Two categories of reporters of child abuse or neglect are established in the law: mandated and permissive. Mandated reporters include physicians, medical examiners, coroners, dentists, chiropractors, optometrists, podiatrists, residents, interns, nurses, hospital and clinic personnel and other health practitioners, psychologists, mental health professionals, social workers, day care center workers or other child care workers, juvenile officers, probation or parole officers, teachers, principals or other school officials, Christian Science practitioners, peace officers or law enforcement officials or other persons with responsibility for the care of children. Permissive reporters are others who may report when they have reasonable cause to suspect that a child has been, or may be, subjected to abuse or neglect or who observes a child being subjected to circumstances which would reasonably result in abuse or neglect.

All reporting is done to the central office of the division, which is required to provide toll-free statewide telephone service for reporting purposes (1-800-392-3738). The division is



PAULA NEEZE
Director
Children's Division

responsible for responding with investigations or family assessments for all reports and for offering protective services on a multi-disciplinary basis in cooperation with the juvenile court and other public and private agencies.

Family-Centered Services

The overriding goal of family-centered services is to prevent child abuse or neglect and the possible removal of the child from the home, by stabilizing the family and improving family functioning.

Treatment services, referred to as family-centered services, are provided in preventive and protective capacities. These case management services are provided protectively to families when a finding of child abuse and neglect (CA/N) was determined by a preponderance of evidence in an investigation. Preventive family-centered services are offered when an investigation of abuse or neglect is unsubstantiated or when a family assessment detects family problems that might be mitigated by services and abuse or neglect prevented. Preventive services are contingent on the family's willingness to accept services. Families may also self-refer for services. Services may be provided by CD staff and/or purchased on behalf of the family.

Intensive in-home services, also known as family preservation services, is a short-term, crisis-intervention service aimed at stabilizing a crisis that puts the child at imminent risk of being removed from the home. Intensive in-home service specialists serve small caseloads and are available to families 24 hours a day for up to six weeks. The goal of these services is to prevent children from being removed from their homes, while ensuring the safety of the child in the home.

Federal law mandates that the division provide services to children and families of children in alternative care. These services are geared toward permanency for the child, either by

reunification with his or her biological parent(s) or permanency through adoption or guardianship. The goals of these services are to: prevent further child abuse or neglect; mitigate family factors that could lead to further child abuse or neglect; reunite children with their families whenever safely possible; and obtain permanent homes for children who cannot safely return home through adoption or guardianship.

To achieve these goals, the division employs staff to provide services to eligible children and families. These services are provided through two major components: direct services and contracted services.

Direct Services

The major components of the direct service program are detection, treatment and prevention of child abuse and neglect.

CD staff provides direct services when using the family-centered services case management model with families in treatment and families whose children are in alternative care settings. The CD staff work with families in assessing service needs and case planning. Actual services may be provided by CD staff, through contractors, or both.

Alternative care services (family-centered out-of-home services) are provided to children who are determined by the juvenile court to need care in a setting other than their biological family homes. These children are cared for in substitute family care or non-familial group care. Any one of three types of licensed settings provides alternative care: foster family homes, group facilities, and residential treatment facilities. Transitional Living Services and Independent Living may also be utilized for older youths who may not return home and for whom adoption or guardianship is not deemed appropriate.

Child safety and permanency for children is the overriding goal of all services and integrates the principles of permanency planning – reuniting the child with the biological family when possible and, when necessary, finding other permanent family relationships for children.

Families who wish to adopt children unable to reunite with their families may, in some instances, receive an adoption subsidy payment. This is a statewide program developed to provide financial benefits, in the form of a subsidy, to encourage potential adoptive parents to adopt and to finance the cost of adopting “special needs” children. Adoption subsidy may be used for any child in adoptive placement who is determined to be a “special needs” child because of a handicapping condition, racial or ethnic minority status, age, social maladjustment or membership in a sibling group.

Contracted Services

Contracted services are available to individuals and families who are receiving family-centered services, or in efforts to recruit and maintain resources for permanency. These services are usually provided as a result of a child abuse/neglect report with a “preponderance of evidence” finding, but may also be authorized for children in alternative care, children in adoptive placements and family members receiving preventive treatment services or foster and adoptive services. Services are provided through contracts with both public and private community agencies and play a major role in extending services throughout the state.

Licensing Program

The division inspects and licenses foster care facilities, residential care facilities and child-placing agencies. In addition, the licensing staff monitors licensed facilities to assure that the facilities maintain requisite standards, conducts public education programs, and consults with facility personnel in the development and implementation of services to the children being served, as well as residential program development.

Early Childhood and Prevention Services

The Early Childhood and Prevention Services section administers early childhood/child care and child abuse prevention programs and services. These programs provide child care subsidies to low-income families and quality improvement and professional development activities for child care programs and their staff. Staff also administers a portion of the state Early Childhood Development Education and Care Fund, which provides grants to community-based organizations and individuals for early childhood and child abuse/neglect prevention services like Early Head Start, grants to start or expand quality child care programs for infants and toddlers, accreditation services for child care providers, and early childhood development and educational supports for parents of infants and toddlers.

Family Support Division

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The **Family Support Division (FSD)** was established in 2003 under Executive Order 03-02. Through this reorganization, the Income Maintenance Programs from the former Division of Fam-

ily Services (DFS) and the Child Support Program from the former Division of Child Support Enforcement (DCSE) were merged into one agency. FSD is responsible for the administration of these programs and services: Temporary Assistance (TA); Food Stamps; Community Services Block Grant; Low-Income Home Energy Assistance; Rehabilitation Services to the Blind and the Visually Impaired; Medical Assistance; Supplemental Nursing Care; and Child Support Services.

Organization

The Family Support Division (FSD) is administered by a director appointed by the director of the Department of Social Services. The division maintains an office in each county and in St. Louis for the administration of the Income Maintenance Programs. The division maintains 24 offices across the state for the administration of the Child Support Program. Administration of the Rehabilitation Services for the Blind is managed by seven offices throughout Missouri.

Income Maintenance Programs

The determination of an individual's financial need is basic to the granting of temporary assistance (TA), Food Stamps, Child Care, Blind Pension, Supplemental Aid to the Blind, Medical Assistance, and Nursing Care benefits. The division has a legal requirement to consider all facts and circumstances in determining eligibility for public assistance, including the applicant's earning capacity, income and resources from whatever source received. The amount of benefits, when added to all other income, resources, support and maintenance, shall provide such person with reasonable subsistence. If the applicant is not found to be in need, assistance is denied.

The federal Social Security Amendments of 1972 provided that the adult assistance programs of Old Age Assistance, Permanent and Total Disability and Aid to the Blind be taken over by the Social Security Administration on January 1, 1974. The primary intent was to make a nationwide, uniform minimum payment to eligible adults and the handicapped. The law further provided that any state may, or in some instances, must supplement federal payments. The division administers this state supplementation program in Missouri.

Temporary Assistance

Temporary Assistance (TA) makes cash grants on behalf of needy children who have been deprived of parental support and who are living in homes maintained by parents or close relatives. This program provides temporary financial assistance for a period of time, up to five years, while the adult transitions to self-sufficiency.



JANEL LUCK
Director
Family Support Division

During Fiscal Year 2006, a total of \$129.6 million was paid to TA families. There was a monthly average of 45,865 families who received TA payments. The average payment was \$235 per family per month.

MC+ Family Health Care

The MC+ program provides healthcare coverage to children under age 19, parents and pregnant women. Family income is compared to the applicable percentage of the federal poverty guidelines. The applicable income limit is dependent on age of the children and the individual's insurance status. MC+ is funded by Medicaid and the Children's Health Insurance Program (CHIP). In Fiscal Year 2006, the program provided coverage to 500,967 children, 20,203 pregnant women and 138,442 parents.

Supplemental Aid to the Blind and Blind Pension

The division administers two separate programs for the blind: the Supplemental Aid to the Blind and the Blind Pension Program. Under the SAB program, the amount of the monthly grant is \$541 minus any Supplemental Security Income (SSI) payment received. Under the Blind Pension Program, a flat monthly payment of \$541 per person is made. The programs differ slightly in eligibility requirements. Funds are provided from a Missouri constitutionally established Blind Pension fund with no matching federal funds.

During fiscal year 2006, a total of \$21.4 million was paid from the Blind Pension Fund to SAB and BP recipients. There was a monthly average of 794 SAB and 2,842 BP recipients.

Supplemental Nursing Care

The Supplemental Nursing Care Program in Missouri provides cash assistance and medical

services coverage to eligible aged, blind or disabled individuals who reside in non-Medicaid, licensed skilled nursing, intermediate care, assisted living residential care facilities. Individuals who reside in licensed, skilled nursing facilities or intermediate care facilities may receive monthly cash benefits of up to a maximum of \$390. If they live in a licensed assisted living facility, they may be eligible for monthly cash benefits of up to \$292, or if in a licensed residential care facility, they may receive monthly cash benefits of up to \$156.

During fiscal year 2006, a total of \$23.3 million was paid to SNC recipients. There was a monthly average of 7,994 recipients.

Medical Assistance

The Medical Assistance Program provides medical services for aged, blind or disabled individuals whose income and resources fail to meet medical needs. An individual must have limited resources. Income is compared to 100% of the federal poverty level. Persons whose income is below this maximum would receive the medical services covered by Missouri. Persons with income above the maximum may gain eligibility for medical services by incurring medical expenses equal to the amount of income which exceeds 100 percent of the federal poverty level.

Additional persons receive Medical Assistance based on being a Qualified Medicare Beneficiary, treatment of breast or cervical cancer, being a child in the custody of the Division of Youth Services or a juvenile court, or receipt of short-term Refugee Assistance.

In Fiscal Year 2006, an average of 219,320 persons per month were eligible to receive medical services under this program.

Food Stamp and Food Distribution Programs

The Food Stamp Program is designed to help low-income families increase their purchasing power for buying food for their families. Depending upon the adjusted income and the number of persons in the household, a family receives a monthly benefit amount. The division is responsible for determining the eligibility of Food Stamp applicants according to guidelines established by the U.S. Department of Agriculture.

During federal Fiscal Year 2006, \$737.5 million in food stamp benefits were issued to 300,498 households.

The division also administers a number of food distribution programs providing USDA-donated commodities to charitable and residential child care institutions, summer food service

programs for children, emergency food providers and disaster relief agencies.

Low Income Home Energy Assistance Program

The Low Income Home Energy Assistance Program (LIHEAP) is a federally funded program established in April 1980 with enactment of the Crude Oil Windfall Profits Tax Act. Eligibility for assistance is based on household income and the number of persons residing in the household. Benefit amounts vary based on income, family size and type of fuel utilized. Missouri provides two programs with the LIHEAP grant: Energy Assistance/Regular Heating (EA) and Energy Crisis Intervention Program (ECIP). EA begins in October and runs through the month of March (as long as funding is available). ECIP (crisis) has two seasons: winter (October through May as long as funds are available) and summer (June through September as long as funds are available).

Community Services Block Grant Program

The Community Services Block Grant (CSBG) Program is a federally funded program implemented in October 1981 pursuant to enactment of the Community Services Block Grant Act. The CSBG makes funds available to impact causes of six poverty conditions: unemployment, inadequate housing, inadequate education, malnutrition, poor use of income and unmet emergency needs. The program provides for a flexible local partnership of elected public officials, business and civic interests and low-income citizens. The partnership identifies and implements programs within the general areas of community coordination/resource development and family development. CSBG programs are usually operated locally by community action agencies and serve individuals whose family income falls within the federal poverty guidelines.

Blind and Visually Impaired Services Program

The Rehabilitation Services for the Blind administers six service programs to blind and visually impaired persons: vocational rehabilitation, prevention of blindness, independent living rehabilitation to adults, Older Blind Services (OBS), children services and the Blind Enterprise Program (BEP). OBS assist blind and visually impaired seniors over age 55 to function independently and remain in their homes and communities.

Vocational rehabilitation services are supported by both federal and state funds. Services include diagnosis and evaluation, counseling

and guidance, physical and mental restoration, college and other types of vocational training, job placement and services after employment when needed. All vocational rehabilitation services, some of which are conditional upon financial need of the individual, are to enable a person with visual disabilities to obtain or retain suitable employment.

Prevention of Blindness services are funded with state funds. Services are for the purpose of early detection of eye disease that may lead to blindness and, when indicated, providing treatment to eligible persons. Services include diagnostic examinations, surgery, hospitalization, glasses, prostheses and certain medications that are not available through other sources. Outreach vision screening clinics are conducted in conjunction with schools of ophthalmology in Missouri. The Prevention of Blindness Program conducts glaucoma screening clinics throughout the state. All services, except those available at outreach vision screening and glaucoma screening clinics, are conditional upon the financial need of the individual.

Independent living rehabilitation services for adults are supported by both federal and state funds. Services are for the purpose of enabling that person to function independently in the home and community. Services, some of which are conditional upon financial need, include diagnosis and evaluation, adjustment to blindness services, alternative techniques in the areas of daily living activities, physical restoration, home-making, communication and orientation to and travel within the home and community.

Independent living rehabilitation services for blind and visually impaired children are supported by both federal and state funds. Services include counseling to the parents of the child, Parents Families Supportive Services, consultation in development and readiness skills that the child will need in order to enter and succeed in an appropriate educational setting and referral to community resources.

The federal/state Randolph-Sheppard Blind Enterprise Program provides employment opportunities for legally blind persons who have participated in special training and are licensed by the division to manage a vending facility. Located in federal, state and private industry and in rest areas along the interstate highway system, vending facilities range from full food service cafeterias to banks of vending machines.

Child Support Program

Missouri's Child Support Enforcement Program began in 1977 and operates pursuant to Title IV-D of the federal Social Security Act and

Chapter 454 of the *Revised Statutes of Missouri* (RSMo).

The Child Support Program responsibilities include location of parents, paternity establishment, establishing child and medical support orders, monitoring and enforcing compliance with support orders, reviewing support orders for modification and distributing child support collections.

Family Support Division (FSD) collects child support on behalf of families receiving public assistance, not only to eliminate their dependence on assistance programs, but also to reimburse the state for the benefits provided to these families.

In addition, individuals not receiving public assistance benefits may apply for child support services.

Federal funds available under the Social Security Act assist state and local jurisdictions in financing the costs of program operations. Currently, the federal matching rate is 66 percent. In addition to federal funds, the state is entitled to retain approximately 34 percent of the collections it receives for families who receive public assistance.

The program partners with county prosecuting attorneys through cooperative agreements to assist with child support activities. All counties that have entered into a cooperative agreement with FSD receive reimbursement for their activities as provided by state and federal law.

The program partners with the state Attorney General through cooperative agreement to assist with child support enforcement and modification activities.

Pursuant to Section 454.530, RSMo, FSD, together with the Missouri Department of Revenue, operates the state disbursement unit known as the Family Support Payment Center (FSPC) which receives and disburses support on behalf of families. The FSPC forwards to the state collections received for families receiving public assistance. When a family is not receiving public assistance, the FSPC sends payments directly to the family.

FSD collected \$558.4 million in state fiscal year 2006.

Division of Medical Services

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The Missouri Medicaid program provides medical services to eligible beneficiaries within defined program benefits in somewhat the same

way insurance companies provide coverage for their policyholders.

The services provided include those required by the federal government such as hospital and physician services. Also included are optional services such as pharmaceutical and personal care services authorized by the Missouri General Assembly and identified in Section 208.152 of the *Revised Statutes of Missouri*.

The Division of Medical Services administers a mandatory Medicaid managed care program called MC+ managed care for eligible recipients in the eastern, central and western areas of the state. Children, pregnant women, TANF families and children in state custody receive their medical care through managed care organizations, allowing the state to ensure access to health care and control costs at the same time.

The division also oversees an expanded MC+ program which provides health insurance coverage for eligible uninsured low-income children. Authority for this program is through a waiver of Section 1115 of the Social Security Act and Senate Bill 632, signed into law June 1998 and reauthorized in 2002. This waiver initiative builds on the original MC+ program by focusing on uninsured children.

Medicaid has included specialized services for specific populations within the state by receiving waiver authority from the federal government. Home and community-based waivers for the elderly, certain mentally retarded, developmentally disabled beneficiaries as well as patients with AIDS were obtained and allow the state Medicaid program to pay for otherwise non-covered home care as an alternative to more expensive institutional care. These services are restricted to those beneficiaries who would otherwise require, and whose home care is no more expensive than, institutionalization.

The Medicaid program is jointly funded by state and federal funds. The division's fiscal year 2007 appropriation of \$5 billion includes \$2.2 billion in state and other funds and \$2.8 billion in federal monies.

Division of Youth Services

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The Omnibus Reorganization Act of 1974 created the Division of Youth Services (DYS) and placed it within the Department of Social Services.



STEVEN E. RENNE
Interim Director
Division of Medical Services



TIM DECKER
Director
Division of Youth Services

General Responsibilities

Youth judged to be delinquent and in need of rehabilitation and education are committed to the division by the state's juvenile (circuit) courts until approved for return to the community under supervision or discharged.

The division provides an array of services, including residential care, community-based services, nonresidential services and aftercare supervision. Chapter 219, RSMo outlines the division's responsibility to include prevention of delinquency, incentive subsidy to juvenile courts, consultative and information services to non-DYS agencies upon request and technical assistance to local communities.

Organization

The division is administered by the director who is appointed by the director of the Department of Social Services. The division operates institutions throughout the state, as well as community facilities consisting of group homes, park camps, specialized residential programs and nonresidential community-based programs as well as a case management system. Five regional administrators are responsible for the programs in their geographical areas. Central office personnel, together with the regional administrators, aid the director in planning for the agency as well as setting goals and objectives.

Goals and Objectives

The mission of the Division of Youth Services (DYS) is to protect communities from juvenile offenders and to provide appropriate services to youth in the division's custody and their families. This balanced approach relies on community partnerships for the development and enhancement of services for the prevention of delinquency.

Methods of Treatment

DYS forms a unique treatment environment. The youth centers provide highest structure for students in need, while group homes and park camps provide residential settings for youth who can adequately function with supervision in a community environment. Nonresidential services are provided to low-risk youth as a diversion to residential care and as a supplement to after-care.

Case Management

A case management system has been developed to provide assessment, treatment planning, coordination of services, monitoring and evaluation of the services for youths and their families. A needs and risk assessment helps the case manager determine the most appropriate services for each youth. The assessment takes into account all pertinent factors involving the youth's delinquent history while identifying the general treatment needs.

Each division facility creates an environment which is designed to contribute to positive changes in the student's behavior and attitudes through the provision of group and individualized treatment services, recreation, academic and vocational training. The ultimate goal is to return each youth to his or her home community as a productive, responsible member of society.

Community-Based Services

Focusing on more individualized services and delivering programs at the community level, the division has expanded its program design to be more community-based. The program components are:

Intensive Case Monitoring

This service is provided by employees who track a youth's behavior and activities. Trackers also provide support and counseling to the youth when needed. Great effort is made to ensure the matching of similar personalities and interests of youth and the tracker.

Day Treatment

This service provides a structured alternative educational program which includes traditional academic courses, GED classes, career planning, job placement and community service supported by individual, group and family therapy.

Proctor Care

This specialized alternative living program places a youth in residence with a young adult proctor who serves as a role model.

Family Therapy

DYS family therapists provide counseling to adjudicated and non-adjudicated youth and their families. In addition, the family therapy unit accepts referrals from juvenile courts, child welfare agencies, mental health agencies, schools and other sources. DYS family therapists also provide training to other state agency staff and court personnel.

Short-Term Programs

Several short-term programs have been established statewide to prepare youth for re-entry into the community. These facilities provide residential-based programs to help youth move from traditional residential services into productive community living. Intensive family involvement is required and youth are expected to accomplish specific community goals before release.

Group Home Programs

Group homes provide the least restrictive residential environment. Staff provides 24-hour supervision in a home-like setting with a capacity for ten youths. Youth follow a daily schedule with time allowed for interaction with the community (school, jobs and community projects) as well as treatment services within the facility (group, individual and family counseling). Youth in this program can participate in public schools and vocational programs or attend on-site educational programs.

Residential Facilities

Residential facilities provide a structured environment for DYS youth. The residential programs target youth who cannot function well in the community and require a more structured setting. Many of these youth have participated in repeat property offenses and require continuous structure to mature.

The program divides youth into groups of ten with 24-hour staff supervision. A traditional school program is provided on-site by full time teachers offering basic education, GED programming and various remedial/special education activities.

Secure Care

For those youth who have a history of offenses and require a more structured setting, the

division offers programs in secured facilities. Seven highly structured, secure care programs provide on-site educational classes, vocational training and recreational activities. These programs target youth with longer offense records that may include crimes against people. The offenders tend to be older and may include youth who have been unsuccessful in community-based programs. Scheduled outings into the community serve the purpose of involving the youth in community support projects. Secure care programs use a group-treatment approach with individual and family centered services. The educational program contains the broadly classified areas of basic, remedial, special and vocational education. Emphasis is placed on the acquisition of knowledge and skills that will meet the practical needs of each student.

An individual education plan, including both youth goals and staff strategies, is developed for each youth. Parents are encouraged to attend these planning meetings.

Dual Jurisdiction

The division also operates a secure care program in Montgomery City which serves youth sentenced under the dual jurisdiction provisions in Chapter 211.073, RSMo. This alternative sentencing provision allows certified youth to receive an adult and juvenile sentence with a suspended execution of the adult sentence. Treatment and educational services are provided to youth whose length of stay is significantly longer than that of other DYS students.

Aftercare

When youth are ready to return to their communities, the division provides services to help them make the smooth transition. Virtually all youth under the DYS care enter the aftercare program upon their return to the community. An assigned case manager ensures support services are provided to help each youth enter and readjust to community living. Support may be of a referral, supervisory or counseling nature. The primary goal of aftercare is to provide supervision and resources to youth to assist them in making a satisfactory community adjustment. This is defined as a youth being able to function in the community without becoming involved in delinquent behavior that could lead the youth into court.

Division of Youth Services Advisory Board

Established in 1974, the DYS Advisory Board is charged with the responsibility to advise the director, the legislature and the general public on all matters pertaining to the operation of the division. The 15 member board consists of citizens from across the state who are dedicated to the prevention of delinquency and the containment and rehabilitation of juvenile offenders.

Kehm, Judge Dennis J., chair, Festus;
Neff, Thelma, vice chair; Springfield;
Eggebrecht, Barbara, St. Louis;
Gant, Judge Jack E., Independence;
Gray, Judge Jon R., Kansas City;
Higgins, Judge Andrew Jackson, Jefferson City;
Lowenstein, Judge Harold L., Kansas City;
Lundstrom, Debby, Poplar Bluff;
Noelker, Timothy, St. Louis;
Parrish, Sue, Sedalia;
Patterson, Peggy, Lee's Summit;
Rust, Rex K., Cape Girardeau;
Smith, William B., Monticello;
Stein, Cindy, Springfield.