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, MO HealthNet Division, and the Division of Youth Services. The divisions of Finance and Administrative 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 program 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.

Missouri’s State Technical Assistant Team (STAT) provides comprehensive integrated services to the entire child protection community. From data collection and interpretation, to 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 for the department’s 8,000+ employees. The center 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 responsible for union negotiations and resolution administration as well as administering the employee grievance system.

Administration divisions

The Division of Finance and Administrative Services provides budgeting, financial and support services to all divisions within the department. Responsibilities include: accounts payable, payroll, purchasing, receipts, audits, grants management, budget, mail processing, telecommunications, inventory and warehouse management, homeland security and safety.

The Division of Legal Services (DLS) provides comprehensive legal support to all programs and support divisions in DSS. The division represents the department, its divisions, and the state. Responsibilities include: representing DSS before administrative tribunals, circuit court and appellate courts on child abuse and neglect, licensure and revocation of foster homes, guardianships and permanency planning; establishing, enforcing and modifying child support orders; hearings for public assistance applicants/recipients related to denial or termination of benefits and investigating fraud and abuse by public assistance recipients along with establishing claims and tracking collections.

Children’s Division

615 Howerton Ct., PO Box 88, Jefferson City 65103
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www.dss.mo.gov/CD
Email: AskCD@dss.mo.gov

Child welfare services are provided under federal and state laws to help children and families 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.

Organization

The Children’s Division (CD) is administered by a director appointed by the director of the Department of Social Services. The division maintains an office in each county and the City of St. Louis and supports each of 45 judicial circuits in the state.

Child Abuse and Neglect Investigations and Assessments

The division is responsible for receiving reports of alleged child abuse or neglect. Once a report is received, 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 and 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 guardians 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.

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).

Family-Centered Services

The overriding goal of family-centered services is to prevent child abuse or neglect and the 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.

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 when 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 direct services and contracted services.

Direct Services

CD staff provides direct services with families in treatment and families whose children are in alternative care settings. The CD staff works 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 overarching 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 instance, 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.

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/childcare 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 administer 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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www.dss.mo.gov/fsd

The Family Support Division (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 the City of 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 based on 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.

**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.

**Family Health Care (MO HealthNet)**
MO HealthNet 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. MO HealthNet is funded by Medicaid and the Children’s Health Insurance Program (CHIP).

The Uninsured Women’s Health Services Program provides women’s health services to uninsured women from age 18 through 54 with a family income that does not exceed 185% of the federal poverty level.

**Supplemental Aid to the Blind and Blind Pension**
The division administers two separate programs for the blind: the Supplemental Aid to the Blind Special Aid Program (SAB) and the Blind Pension Program. Under the SAB program, the amount of the monthly grant is $609 minus any Supplemental Security Income (SSI) payment received. Under the Blind Pension Program, a flat monthly payment of $609 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.

**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 or 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.

**Medical Assistance (MO HealthNet)**
The Medical Assistance (MoHealthNet) 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 85 percent 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 85% 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, residence in a licensed residential care institution, or receipt of short-term refugee assistance.

**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 (USDA).

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**
Low Income Home Energy Assistance Program (LIHEAP) provides assistance to low-income individuals to help pay for heating and cooling. 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’s LIHEAP programs with the LIHEAP grant: Energy Assistance/Regular Heating (EA) and Energy Crisis Intervention Program (ECIP).

**Community Services Block Grant Program**
The Community Services Block Grant Program (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. 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’s services and the Blind Enterprise Program (BEP).

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. Vocational rehabilitation services 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 diagnosis 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 medications that are not available through other sources. These services are conditional upon the financial need of the individual. Free vision screening clinics are conducted in conjunction with schools of optometry in Missouri. Free glaucoma screening clinics are conducted throughout the state.

Independent living rehabilitation services, including services for adults, children and the OBS program, are supported by both federal and state funds. Services are for the purposes of enabling that person to function independently in the home and community and to succeed in appropriate educational settings. Services, some of which are conditional upon financial need, include diagnosis and evaluation, and training to blindness services, alternative techniques in the areas of daily living activities, counseling and families supportive services, physical restoration, homemaking, communication and orientation to and travel within the home and community.

The federal/state Randolph-Sheppard Blind Enterprise Programs 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. Vending facilities range from full food service cafeterias to banks of vending machines.

**Child Support Program**
Missouri’s Child Support Enforcement Program operates pursuant to Title IV-D of the federal Social Security Act and Chapter 434 of the Revised Statutes of Missouri (RSMo).

Child Support Program responsibilities include location of parents, paternity establishment, establishment of child and medical support orders, enforcing support orders, receiving support orders for modification and distributing child support collections.

Family Support Division (FSD) collects child support on behalf of families receiving public assistance. In addition, individuals not receiving public assistance benefits may apply for child support services.

Currently, the federal government funds the program at the rate of 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 temporary assistance.

The program partners with county prosecuting attorneys through cooperative agreements to assist with child support activities. Additionally, the program partners with the state through cooperative agreements to support child support enforcement and modification activities.

Pursuant to Section 454.530, RSMo, the 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. FSPC collected $631.7 million in state fiscal year 2008.
The MO HealthNet (Missouri Medicaid) program provides medical services to eligible participants within defined program benefits in somewhat the same way insurance companies provide coverage for their policyholders.

**Organization**

The MO HealthNet Division (MHD) is administered by a director appointed by the director of the Department of Social Services. The division maintains administrative offices in Jefferson City, Missouri and contracts with healthcare providers and managed care organizations for the provision of health care.

**MO HealthNet Program**

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, RSMo.

The MO HealthNet Division administers a mandatory Medicaid managed care program for eligible participants in the eastern, central, and western areas of the state, and other areas of the state with high numbers of participants. The program monitors the care delivered by providers to ensure access to health care and control costs at the same time.

The MO HealthNet Pharmacy Program oversees outpatient prescription drug reimbursement. The program reimburses reimbursement for all drug products of manufacturers who have entered into a rebate agreement with the Federal Department of Health and Human Services (HHS) and that are dispensed by qualified providers, with few therapeutic category exclusions. In addition, the MO HealthNet Division is responsible for program development, benefit design and clinical policy decision-making with activities oriented towards wellness and continuum of care.

The MO HealthNet Division includes specialized services for specific populations within the state by receiving waiver authority from the federal government. Home and community-based waivers only, certain developmentally disabled participants, as well as patients with AIDS, were obtained and allow the MO HealthNet program to pay for otherwise non-covered home care as an alternative to more expensive institutional care. These services are restricted to those participants who would otherwise require, and whose home care is no more expensive than, institutional care.

The MO HealthNet program is jointly funded by state and federal funds.

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.

**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**

Each division facility creates structured environments which is designed to contribute to positive changes in the student’s behavior and attitudes through the provision of group and individual 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. The division operates as a fully accredited school district, providing high school credits and General Educational Development (GED) coursework.

**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. This approach to risk assessment helps the case manager determine the most appropriate services for each youth. The assessment taken into account all pertinent factors involving the youth’s delinquent history while identifying the general treatment needs.

**Community-Based Services**

Focusing on more individualized services and delivering programs at the community level, the Division has expanded its program design to include more community-based options. Non-residential services are provided to low-risk youth as a diversion to residential care and as a supplement to after-care.

**Intensive Case Monitoring**

This service is provided by employees who monitor a youth’s behavior and activities. Community mentors 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 mentor.

**Day Treatment**

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

**Family Therapy**

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

**Group Home Programs**

Group homes provide the least restrictive residential environment. Staff provide 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 including educational programmes as well as treatment services within the facility (group, individual and family counseling).

**Moderate Care 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 rigorous school program is provided on-site by full time teachers offering basic educational programming and various remedial/special education activities.

**Secure Care Residential Facilities**

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 offending 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.

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 including referral, supervision, and counseling. The primary goal of aftercare is to support youth in becoming law-abiding and productive citizens.

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 rehabilitation of juvenile offenders.

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