## ASPIRATION

We will lead the nation in building the capacity of individuals, families, and communities to secure and sustain healthy, safe, and productive lives.

## THEMES

<table>
<thead>
<tr>
<th>Combat substance use in families</th>
<th>Redesign child welfare system</th>
<th>Move families to economic sustainability</th>
<th>Transform Medicaid</th>
<th>Revitalize organizational infrastructure</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>INITIATIVES</strong> (Leads Follow Initiatives)</td>
<td><strong>INITIATIVES</strong> (Leads Follow Initiatives)</td>
<td><strong>INITIATIVES</strong> (Leads Follow Initiatives)</td>
<td><strong>INITIATIVES</strong> (Leads Follow Initiatives)</td>
<td><strong>INITIATIVES</strong> (Leads Follow Initiatives)</td>
</tr>
<tr>
<td>Add Alternative Therapy for Chronic Pain Management</td>
<td>New vision for child welfare</td>
<td>Increase child support collections from $690M to $700M annually</td>
<td>Medicaid transformation roadmap</td>
<td>ENGAGE - Revamp professional development dialogues</td>
</tr>
<tr>
<td>Beth Stokes</td>
<td>Julie Lester</td>
<td>Jennifer Toussaint</td>
<td>Ashley Wilson</td>
<td>Beverly Struemph</td>
</tr>
<tr>
<td>Increase Medical Assisted Therapy (MAT) access and Substance/Opioid Use Disorder (SUD/OUD) coverage</td>
<td>Answer all hotline calls</td>
<td>Double Able-Bodied Adults without Dependents meeting SNAP work or training requirements</td>
<td>Launch execution of transformation plan</td>
<td>Build strong, cross depart/divisional teams</td>
</tr>
<tr>
<td>Beth Stokes</td>
<td>Sara Smith</td>
<td>Jennifer Heimericks</td>
<td>Shawn Brice</td>
<td>Stephan Tomlinson</td>
</tr>
<tr>
<td>Add Managed Care plan requirement to support ECHO (Extension for Community Healthcare Outcomes)</td>
<td>Eliminate overdue investigations</td>
<td>Increase employment numbers of adults with dependent children on SNAP</td>
<td>Implement EHR (Electronic Health Record) for foster children by 2018 Calendar Year</td>
<td>Revamp workforce development strategy; training, trauma informed, compensation</td>
</tr>
<tr>
<td>Rebecca Logan</td>
<td>Cari Pointer</td>
<td>Jennifer Heimericks</td>
<td>Shawn Von Der Bruegge</td>
<td>Bryan Hug</td>
</tr>
<tr>
<td>Develop and deploy a SUD intervention model for child welfare families</td>
<td>Streamline &amp; strengthen investigation process</td>
<td>Work with Center for Medicaid &amp; Medicare Services (CMS) on employment requirements for parents on Medicaid</td>
<td>Build a medical clinical team to support foster children</td>
<td>Identify and prioritize technology needs and financing</td>
</tr>
<tr>
<td>Ivy Doxley</td>
<td>Kara Wilcox-Bauer</td>
<td>Kim Evans</td>
<td>Lori Bushner</td>
<td>Christina Wood</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Ensure only eligible recipients &amp; eligible providers are properly &amp; timely enrolled</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Mark Winchester</td>
</tr>
</tbody>
</table>
DSS Placemat Initiative, 2018 Year End Report

Theme: Combat Substance Use in Families

Initiative: Add Alternative Therapy for Chronic Pain Management

Description: Creating the capability to offer complementary and alternative therapy for participants with chronic pain diagnoses

Lead: Beth Stokes, RN, Clinical Services - EBDSU, Beth.A.Stokes@dss.mo.gov

### Goal of Initiative

Provide complementary and alternative therapy to MO HealthNet participants with chronic pain diagnosis within approved MO HealthNet diagnosis list. Goal is to provide therapy as an alternative to opioid medication therapy for chronic pain.

### Primary Milestones Implemented/Achieved in 2018

<table>
<thead>
<tr>
<th>Milestones</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. 12/3/2018 – 13 CSR 70-3.300 Complementary Medicine and Alternative Therapies for Chronic Pain Management regulation approved and signed by Governor’s office. Regulation sent to Secretary of States Office and Joint Committee on Administrative Rules.</td>
<td></td>
</tr>
<tr>
<td>2. 12/6/2018 – State Plan Amendment formal questions received from the Center for Medicare and Medicaid Services (CMS).</td>
<td></td>
</tr>
<tr>
<td>3. 10/18/2018 – Provider open enrollment via paper application with Wipro available so that providers may enroll as a complementary and alternative therapy provider.</td>
<td></td>
</tr>
<tr>
<td>5. 2/14/2018 – Tentative effective date of complementary and alternative therapy services set to be available to participants with approved chronic pain diagnosis.</td>
<td></td>
</tr>
</tbody>
</table>

### Next Steps (3-5 Primary Next Steps)

<table>
<thead>
<tr>
<th>Next Steps</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. State Plan Amendment formal questions received by CMS, meeting scheduled to finalize comments 12/12/2018.</td>
</tr>
<tr>
<td>2. Completion of system work with Wipro and Conduent. The system work allows providers to enroll as a therapy provider and create a prior authorization.</td>
</tr>
<tr>
<td>3. Posting of policy manual to MHD website.</td>
</tr>
<tr>
<td>5. Provider and participant education regarding the program.</td>
</tr>
<tr>
<td>6. MMAC for auditing of provider enrollment and participant usage.</td>
</tr>
<tr>
<td>7. Monitor Opioid Legislative Support for Family bill signed and passed H.R. 6, title I</td>
</tr>
</tbody>
</table>

### Measure(s)

- % of defined MHD Members who consume in excess of CDC standards (>90 MME)
- % of MHD Members with a Diagnosis of Opioid Dependence
- Number of ED Visits (Past 12 Months) with a primary diagnosis of opioid use disorder/dependency.
### DSS Placemat Initiative, 2018 Year End Report

**Theme:** Combat Substance Use in Families  
**Initiative:** Increase Medication Assisted Therapy (MAT) access and Substance/Opioid Use Disorder (SUD/OUD) coverage

**Description:** Increase MAT access and SUD/OUD Coverage and address barriers providers encounter when applying for the MAT waiver.

**Lead:** Beth Stokes, RN Clinical Services, EBDSU, Beth.A.Stokes@dss.mo.gov

<table>
<thead>
<tr>
<th>Goal of Initiative</th>
<th>Primary Milestones Implemented/Achieved in 2018</th>
<th>Next Steps (3-5 Primary Next Steps)</th>
<th>Comments</th>
</tr>
</thead>
</table>
| Goal is to increase the number of Medication Assisted Therapy (MAT) providers within MO HealthNet as well as increase access and use of MAT services by MO HealthNet participants with SUD/OUD diagnosis. | 1. Collaboration with DMH regarding SAMSHA grant and outreach to providers. Outcome  
2. MO HealthNet email blast to sent to enrolled MO HealthNet providers June 2018 and via email to Health Home providers regarding MAT waiver services and waiver training grant available through Substance Abuse and Mental Health Services Administration.  
3. SUD waiver is being created with collaboration between MHD and CMS. SUD waiver to provider services for 12 months postpartum to pregnant women receiving substance abuse treatment within 60 days of giving birth. | 1. Quarterly meetings with team to discuss progress, goals, and accomplishments outside of MHN  
2. Continued collaboration with DMH and DHSS  
3. Continue collaboration with data analytics team around CMS waivered providers to look at areas of need and increase.  
4. Continued work on SUD waiver.  
5. Monitor Opioid Legislative Support for Family bill signed and passed H.R. 6, title I |                                                                                                                                                                                                 |                                                                                                                                                                                                                               |

**Measure(s)**  
- % of MHD Members with a Diagnosis of Opioid Dependence  
- % of Enrolled MO HealthNet Physicians Prescribing MAT (Medication Assisted Therapy) For Opioid Addiction  
- % of MHD Members with a Diagnosis of Opioid Use Disorder Who are Receiving MAT  
- Number of ED Visits (Past 12 Months) with a primary diagnosis of opioid use disorder/dependence
DSS Placemat Initiative, 2018 Year End Report

**Theme:** Combat Substance Use in Families

**Description:** Show-Me ECHO (Extension for Community Healthcare Outcomes) uses videoconferencing technology to connect a team of interdisciplinary experts with primary care providers.

**Lead:** Rebecca Logan, Managed Care Policy, Contracts & Compliance Manager, Rebecca.L.Logan@dss.mo.gov

<table>
<thead>
<tr>
<th>Goal of Initiative</th>
<th>Primary Milestones Implemented/Achieved in 2018</th>
<th>Next Steps (3-5 Primary Next Steps)</th>
<th>Comments</th>
</tr>
</thead>
</table>
| The ECHO model uses video conferencing to create communities of learning where specialists share expertise with primary care providers. In the High Risk OB ECHO, the relationships built and knowledge shared will impact the health outcomes of pregnant women and children. | 1. Leveraged MC contracts by amending to require the MC health plans to participate in ECHO; to assist in development of program; agree to exchange data. Amendments final in Feb and June, 2018.  
2. Funding agreements to provide funds to Missouri Telehealth final on 10.15.18.  
3. Program Implementation on-going since 6.7.18. Planning sessions:  
   11.7.18 NAS Baby  
   11.12.18 High Risk OB/Rural  
   11.28.18 High Risk OB/Urban | 1. Actual ECHO sessions:  
   12.18.18 High Risk OB/Rural  
   1.19.19 High Risk OB/Urban  
2. Increase the number of in-network providers participating in ECHO. Data pulls have identified current participating providers. Health Plans are asked to reach out and promote further use.  
3. Quality impact and cost reduction strategies | The initiative should result in an Increase of the number of MCO paneled providers participating in ECHO. |

| Measures | # infants born with NAS  
# moms testing positive for substance use through newborn screening (alcohol and drugs)  
# preterm births  
# NICU admissions  
# inpatient days for mom and babe  
# prenatal visits | Both measures in development for 2019 |
## DSS Placemat Initiative, 2018 Year End Report

**Theme:** Combat Substance Use in Families

**Initiative:** Develop and deploy a substance use disorder (SUD) intervention model for child welfare families

**Description:** Coordinated Specialty Care (CSC) SUD Treatment Model (Pregnant and Post-Partum mothers)

**Lead:** Ivy Doxley, State Foster Care Program Manager, ivy.c.doxley@dss.mo.gov

<table>
<thead>
<tr>
<th>Goal of Initiative</th>
<th>Primary Milestones Implemented or Achieved in 2018</th>
<th>Next Steps (3-5 Primary Next Steps)</th>
<th>Comments</th>
</tr>
</thead>
</table>
| Provide community-based SUD intervention to serve pregnant and post-partum mothers, children at risk of child abuse and neglect, and/or victims of Neonatal Abstinence Syndrome. Primary focus for mothers of children, ages 0 – 3. | 1. DMH-DBH partnership with shared goal to develop an SUD intervention that would focus on community based services to pregnant and post partum mothers with SUD and a co-occurring diagnosis or risk of Mental Illness (MI). Identified the “Assertive Community Treatment Team” Model and an active ACT team in Greene County administered by Burrell Behavioral Health that could provide a foundation, robust energy, and resources for this project.  
2. Approved proposal for a Coordinated Specialty Care Team (CSC) to begin serving clients in January 2019. Differences between this CSC team and ACT team model will be observed in treatment and service delivery for SUD and primary focus on specific services for pregnant women and mothers of children age 0 - 3  
3. CSC team budget finalized and core CSC team hiring initiated; hired by end of December 2018. Funding stream: Community Block Grant and Comprehensive Psychiatric Rehabilitation through DMH-DBH. Goal to serve 40-50 clients in the program.  
4. Plan of Safe Care meeting scheduled for 12/21/18 with Burrell and CD - Cari Pointer, Tasha Toebben, and local Greene co. CD to incorporate CARA requirements and partner with the CSC team to develop plans of safe care for each family. | 1. Finalize referral protocol between Burrell and local CD to refer families with Newborn crisis referrals or mothers with open Family Centered Services (FCS) or Alternative Care (AC) cases.  
2. Provide education to CD staff, Greene county court staff about the services available through the CSC team  
3. Finalize data collection, monitoring, and reporting mechanisms. Evaluate data and engage in support activities program and improvement activities.  
4. CD will participate in fidelity consultation calls with DMH and Burrell to discuss quality and quantity of services and the reporting tools. | At this point in time DSS/CD has not be asked to provide funding, just referrals and ongoing planning and support for the program, however there has been discussion about providing childcare as needed at some point. Formal discussion and planning will occur at the next meeting. |

| Measure(s) | Number: Enrolled, Mothers served, Mothers referred by CD, Children served, Children with no new substantiated CAN report 6 months after enrollment and 6 months after ending services. | To be determined |
DSS Placemat Initiative, 2018 Year End Report

**Theme:** Redesign Child Welfare System

**Initiative:** Define new vision for child welfare

**Description:** Engage local, state, and national stakeholders in developing a new and opportunistic vision for the child welfare system

**Lead:** Tim Decker, Former CD Director & Julie Lester, Interim CD Director

**Status:**

**2019 Placemat Initiative:** Y / Family First

**Date Last Updated:** 12/31/2018

<table>
<thead>
<tr>
<th>Goal of Initiative</th>
<th>Primary Milestones Implemented/Achieved in 2018</th>
<th>Next Steps</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Engage local, state, and national stakeholders in developing a new and opportunistic vision for the child welfare system to achieve profound and sustainable improvements in child safety, permanency, and wellbeing.</td>
<td>Refer to associated initiatives within this theme for corresponding achievements and milestones.</td>
<td>Coordinate and align transformation efforts in accordance with Family First legislation.</td>
<td>Change Theme name from Redesign Child Welfare System to Transform Child Welfare System. Approved: 12/15/2018 for 2019 DSS Placemat</td>
</tr>
</tbody>
</table>

**Measure(s)**

Refer to associated measures within this theme.
**Goal of Initiative**

Answering all calls to the Missouri Child Abuse and Neglect Hotline (CANHU) on the Reporter’s first attempt.

<table>
<thead>
<tr>
<th>Primary Milestones Implemented/Achieved in 2018</th>
<th>Next Steps (3-5 Primary Next Steps)</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. No Defects (busy signals) were provided in July 2018. First time occurrence since at least 2004 (as far back as our system data goes).</td>
<td>1. Continue to identify and educate mandated reporting agencies of the online reporting system to increase hotline capacity.</td>
<td>This placement process was intense, but created a much needed focus on infrastructure and customer service. The support from the Division and the Department during this process was appreciated.</td>
</tr>
<tr>
<td>2. New technology at CANHU to provide a better triage structure and customer services. New phone system implemented January 17, 2018 resulted in increased queue capacity (from 12 to 50), ‘hold my place’ call-back feature for non-emergent mandated reporter calls, and more accurate messaging to redirect non-emergent mandated reporters to the online reporting system.</td>
<td>2. Continue research to safety reduce the number of reports/referrals to field staff.</td>
<td>This initiative will continue to be monitored monthly by the Division and will not appear on the 2019 DSS Placemat.</td>
</tr>
<tr>
<td>3. CANHU provided Signs of Safety training to the Unit in November 2018. This will align the Unit with the Division’s Practice Model and provide a better ‘kit’ of information for field staff to begin working with families.</td>
<td>3. Identify how we can increase capacity to answer all calls made to CANHU—staffing patterns. Utilize the Workforce Management System and set accurate performance measures.</td>
<td></td>
</tr>
</tbody>
</table>

**Measure(s)**

- Total Calls to CA/N Hotline
- % of Hotline Calls Answered
- % of Answered Calls Assigned for Investigations / Assessment/Referral
### DSS Placemat Initiative, 2018 Year End Report

**Theme:** Redesign Child Welfare System  
**Initiative:** Eliminate overdue investigations  
**Description:** Reduce the number of overdue investigations throughout the state while modifying work practice  
**Lead:** Cari Pointer, Program Development Specialist, Cari.A.Pointer@dss.mo.gov

#### Goal of Initiative

Through the Department’s first Continuous Improvement effort using the Theory of Constraints, eliminate all overdue child abuse and neglect (CAN) investigations statewide.

#### Primary Milestones Implemented/Achieved in 2018

1. December 2017 the Children’s Division instituted a temporary pause on non-necessary duties through March 2018 to concentrate efforts on reducing the number of overdue investigations and assessments.
2. Triage enhancements to prevent overdues in the future. Regions have been continually modifying work practice. Example: Jackson County implemented that reports were due by the 40 day mark to allow time for supervisor review and worker corrections if needed.
3. Increase the timeliness and quality of reports through: Work in Progress (TAB as referred to by CD Staff) Boards and develop one and done procedure. A majority of staff now have a TAB board that meets their individual needs. Eric Younger, Circuit Manager in the 28th Circuit, has seen great success with this and has been traveling to other circuits in the state to speak to staff about his successes and steps to make the process successful for them. Work continually to assess a report and if it can be immediately closed due to no concerns or false allegations.
4. Complete all overdue investigations. This is an on-going initiative. Reports never stop coming in. We have seen an increase in reports in the last three months while also adjusting work duties within offices due to staff shortages. Staff is committed to completing reports timely and giving closure to families.

#### Next Steps (3-5 Primary Next Steps)

1. Develop sustainability plans within the regions, especially when there are staff shortages and increased work volumes.
2. Continue to monitor trends while modifying work practice to support sustainability.
3. Continue monthly CAN Calvary calls to monitor accountability and provide support to the regions.
4. Continue to utilize Field Support Teams to provide support and assistance to regions.
5. Continue to work with CANHU on streamlining of calls, i.e. CAN Pathways.

#### Comments

In July 2017, the State of Missouri had 7,853 overdue CAN reports. This included assessments and investigations. By September 2018, that number was reduced to 160 and on September 5, 2018, zero overdues were recorded. Since that time, we have seen an increase to approximately 900-1000 with approximately 250-290 of those being overdue investigations. Numbers fluctuate daily. Regions have seen an increase in report volume and also an increase in staff vacancies. Regions responded by continuing to institute critical response teams.

#### Measure(s)

- % of Answered Calls Assigned for Investigations / Assessment/Referral
- % of Child Abuse/Neglect investigations completed timely
- NEW for 2019 % of overdue investigations (Total number of investigations vs true overdue investigations)

In 2019, update measures to support data related to updated milestones.
DSS Placemat Initiative, 2018 Year End Report

Theme: Redesign Child Welfare System

Initiative: Reduce delays to adoption for children in pre-adoptive homes with incomplete Termination of Parental Rights (TRPs)

Description: Address legal impediments to permanency for youth who fit the following criteria:

*In foster care for at least 15 months and court has ordered a goal change to adoption and youth is residing in their pre-adoptive placement.*

Lead: Allison Green, Special Assistant Professional, Allison.Green@dss.mo.gov

<table>
<thead>
<tr>
<th>Goal of Initiative</th>
<th>Primary Milestones Implemented/Achieved in 2018</th>
<th>Next Steps (3-5 Primary Next Steps)</th>
<th>Comments</th>
</tr>
</thead>
</table>
| Expedite permanency for youth with goals of adoption, with focus on streamlining historic process constraints. This initiative required multi-disciplinary collaboration and teaming between DSS Children’s Division (CD) programming and Division of Legal Services (DLS). | 1. Developed shared definition and data pull between CD and DLS (previously no shared consensus throughout Department about which cases appropriately categorized in “TPR backlog).  
   2. Developed uniform TPR referral form for use by workers statewide; completed by multi-disciplinary subcommittee including frontline workers and legal staff.  
   3. In-depth circuit level review of TPR constraints which revealed important data integrity issues and potential next steps. | 1. Development of Brief Bank (ITSD has provided access; Initiative Owner (Green) will handle curating bank; DLS staff will provide redacted samples);  
   2. Recommend replacing this TPR Placemat initiative with one more expansively focus on adoption recruitment (ex. Targeted recruitment in certain communities, concurrent planning);  
   3. Circuit-Level data should be re-analyzed in next quarter | There is significant room to improve data integrity across the Division. This Placemat Initiative (among others) is only as effective as its data accuracy, and currently FACES is not routinely updated on certain measures. I recommend a revised look at data integrity in the coming year, with a focus on (1) worker education about the use of data to deploy resources; (2) supervisor monitoring of data compliance through ENGAGE; and (3) increased use of protected time (similar to “The Pause” to address hotline concerns). |

Measure(s)
- Number of Children EXITING Criteria/Moved to Adoption during Month
- Number of Children ENTERING Expedited Adoption Criteria during Month
- Net Increase/ Decrease of children meeting expedited adoption criteria
- Number of successful adoptions
DSS Placemat Initiative, 2018 Year End Report

**Status:**

**Theme:** Redesign Child Welfare System
**Initiative:** Reduce congregate care length of stay

**Description:** Ensuring DSS is serving the most appropriate youth, with the most appropriate interventions, for the shortest amount of time necessary to achieve key therapeutic and permanency planning goals.

**Lead:** Heather Ford, Field Support Manager, [Heather.D.Ford@dss.mo.gov](mailto:Heather.D.Ford@dss.mo.gov)

<table>
<thead>
<tr>
<th>Goal of Initiative</th>
<th>Primary Milestones Implemented/Achieved in 2018</th>
<th>Next Steps (3-5 Primary Next Steps)</th>
<th>Comments</th>
</tr>
</thead>
</table>
| 1. Safely reduce the number of youth and/or length of stay in residential status.  
2. For youth whose clinical needs cannot be met in any other way than residential treatment their length of stay will be no longer than clinically indicated. Progress on length of stay will come incrementally but the ultimate goal is no longer than 3 months. | 1. Defined the population this initiative is designed to serve. Used that information to create a report for circuits that will show them monthly at-a-glance which of their children entered residential; who exited residential; and who remains in a facility month to month.  
2. Full utilization of the MO Alliance Specialized contract to serve youth experiencing placement instability in foster care.  
3. “TLC” Project – The Loneliest Child – the child who needs the most TLC. Every circuit is identifying a child in residential or at risk of entering residential and will wrap all resources around that child.  
4. Monthly strategy & support calls with circuits identified as having high levels of residential. One circuit per region plus contractors. | 1. Distribute data reports to managers with instructions for use.  
2. Expand the MO Alliance contract to new circuits and keep a robust wait list so the contract remains full at all times.  
3. All circuits will identify their TLC child by 12/31/2018. As they achieve success with one child, they will choose another and repeat the process.  
4. Monthly support & strategy calls will begin January 2019 and continue throughout the year. | |

**Measure(s)**

- % of Missouri foster care children in Residential Treatment
- Average Residential Length of Stay
- TLC statistics; number of children identified/moved to permanency, length of time TLC process takes.

**Date Last Updated:** 12/09/2018
DSS Placemat Initiative, 2018 Year End Report

**Theme:** Redesign Child Welfare System

**Initiative:** Child Welfare Administrative Reform

**Description:** This initiative outlines areas to improve services offered to Children and Youth in Children’s Division custody. The themes for improvement are the results of meetings held with staff and youth and are representative of voices and experiences.

**Lead:** Angie Swarnes, Southwest Region Director, Angie.D.Swarnes@dss.mo.gov

<table>
<thead>
<tr>
<th>Goal of Initiative</th>
<th>Primary Milestones Implemented/Achieved in 2018</th>
<th>Next Steps (3-5 Primary Next Steps)</th>
<th>Comments</th>
</tr>
</thead>
</table>
| The goal of this initiative is to ensure that the children, in the care and custody of Children’s Division, receive the best services possible by strengthening collaboration with other agencies and not letting system barriers create stalls or setbacks in their lives. Children and families will be strengthened when agencies collaborate. | 1. The Children’s Division was approved to be a pilot site for new Resource Parent Training. Sites have been identified to begin this training. This will begin in the Jackson County and Northwest areas of the state.  
2. Missouri entered into NEICE, this allows for more timely requests to be processed in making placement outside of the State with States that have also started using NEICE.  
3. Improvements to new employee training have been made and continue to be re-evaluated to ensure that staff entering into the agency have relevant training that prepare them to work within the practice model and provide the best services to families. | 1. Coordinate research and policy reviews to improve services for Older Youth, focusing on services to support youth as they leave care.  
2. Review current policy and practice around pregnancy in Foster Care. Ensure that youth are being provided with education and support around this area.  
3. Continue to partner with MoHealth Net and FSD around the implementation of an Electronic Health Care record. | 1. The next meeting is scheduled for December 4, 2018. This meeting will be exploring mentors for youth with an interest in a military career as well as assessing current information around pregnancy in Missouri foster care.  
2. The EHR is waiting on contract issues to be worked out before the pilot work can begin. |

| Measures | NA |
# DSS Placemat Initiative, 2018 Year End Report

**Theme:** Move Families to Economic Sustainability  
**Initiative:** Increase child support collections from $690M to $700M annually  
**Description:** This initiative will improve communication with intergovernmental agencies, enhance our IT system and expand our child support awareness campaign.  
**Lead:** Jen Toussaint, Strategic Planning Initiatives Coordinator, [Jennifer.A.Toussaint@dss.mo.gov](mailto:Jennifer.A.Toussaint@dss.mo.gov)

## Goal of Initiative

Increase child support collections to $700M annually.

## Primary Milestones Implemented/Achieved in 2018

1. Transferred all cases with low or no potential for collection to a centralized office by May 1, 2018 (approximately 10% of ENFO case load).
2. Developed a one-page child support application for distribution to NIVD clients via the Call Center and Circuit Clerk Offices.
3. Train every CS office between 6/1/18-9/6/18 on initiatives support office restructure.
4. Transfer category 3 cases with Initiating Intergovernmental child support services to the vendor office with Young Williams weekend of 12/1/18. (approximately 10% of ENFO case load).

## Next Steps (3-5 Primary Next Steps)

1. Complete coding and testing for automation of UCP with STO.
2. Reorganize CS cases by the NCP instead of the CP.
3. Update online CS application making it more efficient and user friendly.
4. Support Beacon

## Comments

1. As of 10/31/18, more than 3,000 cases have been closed in the Alternative Collections Office.  
2. Reorganizing cases by the NCP will allow ENFO offices to enforce & update more efficiently and ensure NCP’s cases are equally enforced.  
3. Support Beacon is a measuring tool that enables supervisors & specialists to filter caseloads for more effective enforcement. Allows management to monitor performance at all levels.

## Measure(s)

- Child Support - % of paying cases
- Total child support collections

## Recommendation

Revise initiative name to: Increase percent of paying child support cases statewide

Approved and Done for 2019 Placemat
## DSS Placemat Initiative, 2018 Year End Report

**Theme:** Move Families to Economic Sustainability  
**Initiative 2:** Double Able-Bodied Adults without Dependents meeting SNAP work or training requirements  
**Description:** Engage individuals on SNAP to enroll in SkillUP, to receive soft skills, access to training and education and connections to local employers using local labor market data; effectively reducing or removing the need for public assistance benefits.  
**Lead:** Jennifer Heimericks, Work Initiatives Manager, Jennifer.K.Heimericks@dss.mo.gov

### Goal of Initiative

<table>
<thead>
<tr>
<th>Measure(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Many SNAP recipients are underemployed and lack connections to training and self sustaining employment. The nations economy is in need of skilled workers and there are millions of high wage trade jobs vacant.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Primary Milestones Implemented/Achieved in 2018</th>
</tr>
</thead>
</table>
| 1. Increased locations from 40 to 270  
2. Held partner convening (September)  
3. Development of the Workforce Unit under Department of Social Services. |

<table>
<thead>
<tr>
<th>Next Steps (3-5 Primary Next Steps)</th>
</tr>
</thead>
</table>
| 1. Next partner convening January 2019  
2. Site visits to providers and FSD resource centers to increase SkillUP awareness  
3. Focus Federal Funds Workgroup |

<table>
<thead>
<tr>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jennifer, these will need revised for 2019. Jeriane probably has thoughts.</td>
</tr>
</tbody>
</table>
### DSS Placemat Initiative, Year End Report

**Theme:** Move Families to Economic Sustainability  
**Initiative 3:** Increase employment numbers of adults with dependent children on SNAP  
**Description:** Engage individuals on SNAP to enroll in SkillUP, to receive soft skills, access to training and education and connections to local employers using local labor market data; effectively reducing or removing the need for public assistance benefits.  
**Lead:** Jennifer Heimericks, Work Initiatives Manager, Jennifer.K.Heimericks@dss.mo.gov

<table>
<thead>
<tr>
<th>Goal of Initiative</th>
<th>Primary Milestones Implemented/Achieved in 2018</th>
<th>Next Steps (3-5 Primary Next Steps)</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1. Increased locations from 40 to 270</td>
<td>1. Next partner convening January 2019</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2. Held partner convening (September)</td>
<td>2. Site visits to providers and FSD resource centers to increase SkillUP awareness</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3. Development of the Workforce Unit under Department of Social Services.</td>
<td>3. Focus Federal Funds Workgroup</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Measure(s)</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>• # Abled Bodied Adults w/o children engaging in 80+ hours work</td>
<td></td>
<td></td>
<td>Jennifer, these will need revised for 2019. Jeriane probably has thoughts.</td>
</tr>
<tr>
<td>• # Abled Bodied Adults w/o children NOT engaging in 80+ hours work</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• # Abled Bodied Adults with and without children engaging in 80+ hours work</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• # Abled Bodied Adults With and Without children NOT engaging in 80+ hours work</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• # Non-Abled Bodied Adult (disabled, young child, adult caretaker, etc) engaging in 80+ hours work</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• # of Non-Abled Bodied Adult NOT engaging in 80+ hours work</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• % of DYS Law-Abiding</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**DSS Placemat Initiative, 2018 Year End Report**

**Theme:** Move Families to Economic Sustainability

**Initiative:** Work with Center for Medicaid & Medicare Services on employment requirements for parents on Medicaid

**Description:** Parents receiving MO HealthNet for Families (MHF) receive little to no income to support their families. This initiative will encourage parents to seek sustainable employment and provide for healthy productive families.

**Lead:** Kim Evans, Family Support Division (FSD) Deputy Director, Kim.R.Evans@dss.mo.gov

### Goal of Initiative

To draft and submit an 1115 waiver to the Center of Medicaid & Medicare Services (CMS) that would implement work requirements for parents who are receiving MO HealthNet for Families. This would require legislative approval to file the 1115 waiver.

### Primary Milestones Implemented/Achieved in 2018

<table>
<thead>
<tr>
<th>Milestone</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>On 04/09/2018, phone conference was held with CMS to discuss the 1115 waiver for Medicaid work requirements.</td>
</tr>
<tr>
<td>2.</td>
<td>On 04/16/2018, attended Community Engagement Conference in Kentucky to meet with other states on lessons learned from Kentucky’s waiver submission and share ideas between states.</td>
</tr>
<tr>
<td>3.</td>
<td>08/31/2018: Reports were pulled to identify how many families would be affected by the work requirements.</td>
</tr>
<tr>
<td>4.</td>
<td>Contracts have been amended to allow community partners to do outreach to families who were identified as potentially meeting the work requirement. Parents are not mandatory but may be offered the services through SNAP or TA.</td>
</tr>
</tbody>
</table>

### Next Steps (3-5 Primary Next Steps)

<table>
<thead>
<tr>
<th>Step</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>As of 12/01/2018, bills have been filed that would require FSD to implement work requirements. This allows the agency to move forward with filing the 1115 waiver. Until this is passed, outreach will be provided.</td>
</tr>
</tbody>
</table>

### Comments

Report dated 8-31-18 shows that 1,173 families (2,877 parents) would be affected by the work requirements. These families are not receiving SNAP or TA which currently has work requirements. Initiative will not appear on 2019 DSS Placemat, but outcomes will be monitored throughout 2019.

<table>
<thead>
<tr>
<th>Measure(s)</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of individuals (parents) obtaining employment</td>
<td>To be developed</td>
</tr>
</tbody>
</table>
DSS Placemat Initiative, 2018 Year End Report

**Theme:** Transform Medicaid

**Initiative 1:** Define Medicaid transformation roadmap

**Initiative 2:** Launch execution of transformation plan

**Description:** MHD contracted with McKinsey to complete a Rapid Response review; an in-depth assessment of Medicaid programs and operations to identify opportunities and strategies to transform the Medicaid program. To provide appropriate levels of service at a good price to the tax payers while providing quality health outcomes.

**Lead (1):** Ashley Wilson, Budget Manager, [Ashley.L.Wilson@dss.mo.gov](mailto:Ashley.L.Wilson@dss.mo.gov)

**Lead (2):** Shawn Brice, Missouri Money Follows People Project Director, [Shawn.Brice@dss.mo.gov](mailto:Shawn.Brice@dss.mo.gov)

<table>
<thead>
<tr>
<th>Goal of Initiative</th>
<th>Primary Milestones Implemented/Achieved in 2018</th>
<th>Next Steps (3-5 Primary Next Steps)</th>
<th>Comments</th>
</tr>
</thead>
</table>
| Provide appropriate levels of service at a good price to the tax payers while providing quality health outcomes. (McKinsey will identify recommendations to reduce costs and improve the quality of care of the Medicaid program.) | 1) Contract awarded to McKinsey: 06/08/2018  
2) Protest of the bid award: 06/13/2018 (no finding, protest complete: 09/27/2018)  
4) Rapid Response Assessment:  
   • 50 days (11/29/2018) – Progress report due  
   • 100 days (1/18/2019) – Draft Medicaid Rapid Response Review due  
   • 120 days (2/7/2019) – Final Medicaid Rapid Response Review due  
5) Once MHD has the final Assessment; staff can begin reviewing opportunities to transform the Medicaid program. | 1. MHD is waiting for the final report from McKinsey for recommendations.  
2. Once McKinsey provides recommendations, MHD will prioritize and work with Administration on the recommendations.  
3. MHD will begin implementing necessary requirements to achieve the recommendations. (System work, policy changes, public notice, regulations/SPA submissions etc.). | In 2019, these initiatives will be combined: Develop, facilitate, and execute Medicaid Rapid Transformation roadmap. |

**Measure(s)**

To be determined once the final report is in.
**DSS Placemat Initiative, 2018 Year End Report**

**Status:**
- **Theme:** Transform Medicaid
- **Initiative:** Implement Electronic Health Record (EHR) for foster children by 2018 Calendar Year End
- **Description:** The EHR for foster kids is a longitudinal record of medical and demographic information for foster kids.
- **Lead:** Shawn Von Der Bruegge, Social Services Manager, [Shawn.F.VonDerBruegge@dss.mo.gov](mailto:Shawn.F.VonDerBruegge@dss.mo.gov)

<table>
<thead>
<tr>
<th>Goal of Initiative</th>
<th>Primary Milestones Implemented/Achieved in 2018</th>
<th>Next Steps (3-5 Primary Next Steps)</th>
<th>Comments</th>
</tr>
</thead>
</table>
| Increase the quality of care provided to foster children by building a longitudinal medical record that can be accessed and understood by foster parents, providers and DSS workers. Providers and parents will be able to see the medical history for the child which will reduce duplication of services and identify gaps in the care received. DSS will utilize the tool for aggregate population management. | 1. Solution was identified in January 2018.  
2. The contract vehicle was determined by Jennifer Tidball, Department of Social Services Deputy Director in February 2018.  
3. Stakeholders and Subject Matter Experts were identified by Shawn Von Der Bruegge also in February 2018.  
4. Cerner project leadership demonstrated the Health Intent tool to stakeholders on 2/23/18.  
5. Initiative goals and objectives were identified on 4/9/18 by Tim Decker, Children’s Division Director & Jennifer Tidball, Department of Social Services Deputy Director.  
6. Initiated involvement of the Lewis And Clark Information Exchange (LACIE) to obtain medical record data from providers in the pilot area on 4/11/18.  
7. Success criteria was established by Christy Collins, Interim Deputy Director (CD); Leanne Leason, FACES Manager (CD) on 5/3/18. | 1. Finalize the contract with the University of Missouri and Cerner. Meeting is scheduled for 1/16/19 to discuss finalization.  
2. Develop and communicate a realistic high level timeline.  
3. Finalize Cerner’s Statement of Work to finishing setting scope and schedule of project.  
4. Kick-off project with stakeholders and subject matter experts.  
5. Current targeted implementation in pilot area is 6/30/19. | The status of this initiative is red due to the delays encountered in the finalization of the contract. Once this is complete, the schedule will be re-baselined and work can truly begin on the project. |

**Measure(s)**
- 1. Identify & close gaps in immunizations, HCY exams, children on specific medications, Foster Children receiving duplicate services.
- 2. Volume of providers in pilot area using the EHR and submitting clinical information to the tool through the existing vehicles.
- 3. Ability for state staff to see claims data for Foster Children in pilot area.
- 4. 90% of Foster Children in pilot area are represented in EHR.
- 5. Receive or generate reports at identified intervals that flag gaps in care areas mentioned above.
- 6. 85% of Children’s Division staff have access and are using tool to manage FC in pilot area.

To be determined
DSS Placemat Initiative, 2018 Year End Report

Theme: Transform Medicaid
Initiative: Build a Medical Clinical Team to Support Foster Children

Description: Build a medical clinical team to support foster children in Missouri. The team will research and evaluate the most beneficial means to provide clinical support for foster care children of Missouri.

Lead: Lori Bushner, Clinical Operations Registered Nurse, EBDSU, Lori.A.Bushner@dss.mo.gov

<table>
<thead>
<tr>
<th>Goal of Initiative</th>
<th>Primary Milestones Implemented/Achieved in 2018</th>
<th>Next Steps (3-5 Primary Next Steps)</th>
<th>Comments</th>
</tr>
</thead>
</table>
| Determine if current process and programs in place meet the needs for a clinical team approach to Foster Care Children. | 1. Centers for Excellence Contract signed and positions are in the process of hiring for the behavioral health staff and will add medical staff in the future.  
2. MHD performing focused review of Managed Care Organizations Care Management of Foster Care children. The review will be finalized by the end of December.  
3. Work with Children’s Division and internal data analyst to gather information on Legal Status 1 foster children for data analysis as needed. Determined approximately 90% of legal status 1 foster care children are in a Managed Care Plan. | 1. Work with MHD administration and Children’s Division staff to determine the goals and path for initiative in 2019.  
2. Coordinate and collaborate with the Centers for Excellence for continued development of the Center to support Children’s Division.  
3. Continue working with the group looking at the Behavioral Health Services as carve-in services vs single health plan. | - During the course of the last few months there has been a hold placed on the new Health Home State Plan Amendment language around foster care children current and past being a qualifying condition.  
- Centers for Excellence with have both a behavioral and medical component with the medical staff, and will assist with being clinical support for CD. |

Measure(s) | To be developed |
DSS Placemat Initiative, 2018 Year End Report

Theme: Revitalize Organizational Infrastructure

Initiative: ENGAGE – Revamp professional dialogues

Description: ENGAGE was implemented in January 2018. This initiative is to continue to integrate and embed the ENGAGE performance development approach into DSS.

Lead: Beverly Struemph, Human Resource Manager, Beverly.J.Struemph@dss.mo.gov

<table>
<thead>
<tr>
<th>Goal of Initiative</th>
<th>Primary Milestones Implemented/Achieved in 2018</th>
<th>Next Steps (3-5 Primary Next Steps)</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>The ultimate goal is for ENGAGE to be an integral part of developing staff and assisting them to meet their professional goals and to better serve the citizens of Missouri.</td>
<td>1. Statewide employee town hall meetings 2. Contact completed with employees requesting feedback/response through various communication avenues (e.g., OA, DSS ENGAGE inbox, survey response) 3. Monthly ENGAGE meetings are being held consistent with performance measures; follow-up on those not held is done monthly 4. Employees trained consistently with performance measures; follow-up on those not completing is done monthly 5. Additional classroom training is being held statewide for those that would like to attend a refresher</td>
<td>1. Additional communication with staff regarding REFLECT 2. Assist Children’s Division in implementing review and monitoring of REFLECT meetings and documentation that will meet Council on Accreditation standards 3. Continue to monitor for continued commitment to meeting established performance measures</td>
<td>ENGAGE and its components will require continued development, education and monitoring. Successful implementation is defined by measures outlined below and demonstrated by staff at all levels meeting established core performance objectives, actively engaging in meetings, pursuing and taking part in professional development opportunities and effectively addressing individual situations where staff need more intensive coaching, performance counseling and redirection.</td>
</tr>
</tbody>
</table>

Measure(s) | • % of ENGAGE Meetings Held  • % of DSS Employees completing the OA ENGAGE website review on the Employee Learning Center |
## DSS Placemat Initiative, 2018 Year End Report

### Theme:
Revitalize Organizational Infrastructure

### Initiative:
Build strong, cross department/divisional teams

### Description:
Help build a culture of cross-divisional work throughout DSS by creating space for relationships to thrive

### Lead:
Stephan Tomlinson, FSD Deputy Director, Stephan.R.Tomlinson@dss.mo.gov

### Status:
2019 Placemat Initiative: Y
Date Last Updated: 12/09/2018

### Goal of Initiative
To address and track the department’s progress toward breaking down divisional silos and creating a culture of one department, rather than separate divisions with little overlap.

### Primary Milestones Implemented/Achieved in 2018

<table>
<thead>
<tr>
<th>Milestone</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Formed central steering team around Cross Divisional work in DSS with representatives from each division</td>
</tr>
<tr>
<td>2. Conducted Needs Assessment on issue</td>
</tr>
<tr>
<td>3. Created template and governing documents around Cross-Divisional initiative</td>
</tr>
<tr>
<td>4. Held 1st pilot meeting for Northeast Region managers across department (DSS)</td>
</tr>
<tr>
<td>5. Planned 2nd pilot for St. Louis region to take place in December 2018</td>
</tr>
</tbody>
</table>

### Next Steps (3-5 Primary Next Steps)

<table>
<thead>
<tr>
<th>Next Step</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Hold December St. Louis Pilot on 12/12/18</td>
</tr>
<tr>
<td>2. Debrief and conduct survey of second pilot/implement lessons learned for model</td>
</tr>
<tr>
<td>3. Meet with Scott Montgomery to develop measures around organizational health survey and communicate findings</td>
</tr>
<tr>
<td>4. Implement Cross-Divisional Team meeting model statewide</td>
</tr>
<tr>
<td>5. Continue to monitor and record additional efforts around culture change</td>
</tr>
</tbody>
</table>

### Comments
We’ve done a lot of development and piloting on ideas this year, next year the challenge will be to expand and implement statewide while building some bench around the effort to ensure that it takes root.

### Measure(s)

- % of staff involved in department initiatives
- # of people participating in Cross Divisional team meetings
- In Development:
  - Measures around organizational health survey results and project/efforts; goal to help DSS employees see where they fit in
  - Heart of Coaching statistics (Coaching and Coachee)
### DSS Placemat Initiative, 2018 Year End Report

**Theme:** Revitalize Organizational Infrastructure  
**Initiative:** Revamp workforce development strategy; training, trauma informed, compensation  
**Description:** Identify areas of need in current workforce development and provide the strategies and structure to strengthen and support  
**Lead:** Bryan Hug, Personnel Officer, Bryan.Hug@dss.mo.gov

#### Goal of Initiative
Guide department in development of a skilled workforce including but not limited to: Department Recruitment Coordinator, Educating workforce on trauma awareness, and addressing compensation possibilities for staff (rewards and recognition).

<table>
<thead>
<tr>
<th>Primary Milestones Implemented/Achieved in 2018</th>
<th>Next Steps (3-5 Primary Next Steps)</th>
<th>Comments</th>
</tr>
</thead>
</table>
| 1. DSS Recruitment Coordinator (Job announcement posted; hiring process continues)  
2. DSS Mentoring Program (proposal submitted HRC 11/09/18)  
3. Employee Referral Program (proposal submitted to Exec staff 11/01/18)  
4. Pay Plan/Impact Award (proposal submitted to Exec staff 11/01/18) | 1. Address DSS-wide onboarding needs  
2. Work w/ divisions and DSS Recruiter to address specific needs in recruitment, onboarding and retention  
3. Improve departmental professional and leadership opportunities (i.e. Project management certifications)  
4. Guide/monitor implementation of any approved 2018 proposals | For 2019 placemat, split initiative for better focus on recruitment and retention, workforce development, and trauma awareness. |

**Measure(s)**
- Staff Turnover  
- Retention  

**Date Last Updated:** 12/09/2018  
**Status:** Green  
**2019 Placemat Initiative:** Y
### DSS Placemat Initiative, 2018 Year End Report

**Theme:** Revitalize Organizational Infrastructure  
**Initiative:** Identify and prioritize technology needs and financing  
**Description:** Complete a comprehensive assessment of DSS technology needs, by priority, and financing options  
**Lead:** Christina Wood, Division of Youth, Fiscal Liaison, christina.wood@dss.mo.gov

**Date Last Updated:** 12/09/2018

<table>
<thead>
<tr>
<th>Goal of Initiative</th>
<th>Primary Milestones Implemented/Achieved in 2018</th>
<th>Next Steps (3-5 Primary Next Steps)</th>
<th>Comments</th>
</tr>
</thead>
</table>
| Identify and prioritize technology needs/projects for the Department. During 2018, this initiative was rapidly elevated resulting in development of the DSS IT Governance Committee (ITGC). ITGC is meeting the demands of the Cabinet IT Governance Committee by completing a strategic IT roadmap for DSS, governance structures, placemats, and a multitude documents for each individual project. | 1. Identified all current IT projects for the Department.  
2. Determined what projects were active, what projects should be set aside for the “parking lot” and which projects should be completely removed from the list.  
3. Prioritized all IT projects.  
4. Currently assessing all IT applications throughout the Department.  
5. Continue to satisfy the needs and requirements of the Cabinet Level IT Governance Committee.  
6. Working to produce a DSS IT Strategic Roadmap by December 31, 2018. | 1. Continue assessing IT projects and needs for all DSS Divisions.  
2. Continue to present current DSS IT projects to the CITGC (over $500,000).  
3. Weekly meetings to look at current IT priorities and assess if changes need to be made.  
4. Determine a good process for new projects that need to be included on the list and when projects are removed from the list. | This committee is working hard to meet the demands of the CITGC and working towards completing a unified IT roadmap for the Department. There have been a lot of changes in the process and required documentation, but the committee has done a great job adapting to the changes. I’m excited to continue the lead on this committee! |

| Measure(s) | To be determined | To be determined |
## Goal of Initiative

There have been several large statutory changes over the last several years that have significantly impacted the investigation process and, while highly beneficial to protecting children in Missouri, they have put increasing work demands on staff. The primary goals of this initiative in 2018 were: (1) to reduce existing bottlenecks to help eliminate unnecessary procedures; (2) target our resources to those families who would most benefit from Children’s Division intervention.

## Primary Milestones Implemented/Achieved in 2018

1. **FACES changes:** Phase 1 implemented on 05/07/18—Added the ability to combine calls when staff receive multiple hotlines on a family prior to closing the first report, but the hotlines cannot be duplicated because of new allegations. This significantly reduces data entry. Phase 2 implemented on 09/20/18—improved how staff enter contacts and allowed the ability for staff to downgrade CA/N reports to referrals.
2. **CANHU protocol revisions:** All CA/N conditions (the screening definitions to accept a child abuse/neglect report) have been revised. To date, seven of them have been piloted. Implemented new criteria for Preventive Service referrals to reduce the number of calls we were making ‘fit’ into a child abuse/neglect report because the agency needed to respond, but in reality, the concerns do not rise to the level of child abuse/neglect.
3. **Decreasing CA/N supervisor staffing ratios:** The goal is to reduce CA/N supervisory staffing ratios from 1:8 to 1:5 where feasible. Regions were given a few new supervisor allocations to assist with this. Several circuits restructured their units to allow for this.

## Next Steps (3-5 Primary Next Steps)

1. **Implement Signs of Safety at CANHU.**
2. **Implement further FACES changes:**
   - Eliminate more bottlenecks.
   - Streamline CANHU entry to support Signs of Safety.
   - Implement the remaining CANHU protocol revisions.
   - Implement revisions to the response priority decision tree.
3. **Pilot the Red Team Model.** This is a group decision making process to screen child abuse/neglect reports at the county office level.
4. **Identify measures for this initiative for 2019.**
5. **Re-convene the CANHU Revision workgroup.**

## Implementation of Signs of Safety at CANHU

Implementation of Signs of Safety at CANHU began in November 2018. All 2019 FACES changes are in the contract development or bid phase. Reduction in CA/N supervisor staffing ratios:

- Jackson has 7 of 12 of their supervisors at a 1:5 ratio, with the other 5 at a 1:6 ratio.
- The SW is pretty close to this ratio in all but 2 circuits.
- In the SE region, most supervisors supervise five or fewer investigative staff.
- The North has 7 circuits at this ratio, with several others that are close.

## Measure(s)

There were no measures identified for this initiative in 2018. Measures to be developed in 2019.
### DSS Placemat Initiative, 2018 Year End Report

**Theme:** Revitalize Organizational Infrastructure  
**Initiative:** Ensuring Only Eligible Individuals Receive Public Assistance Benefits and Eligible Providers are Enrolled Timely  
**Date Last Updated:** 12/17/2018

**Description:** Ensure only eligible individuals receive benefits by identifying areas of concern regarding fraud/waste/abuse and developing systems and/or process to aggressively impact these areas.

**Lead:** Mark Winchester, Investigations Manager DLS, [Mark.Winchester@dss.mo.gov](mailto:Mark.Winchester@dss.mo.gov)

<table>
<thead>
<tr>
<th>Goal of Initiative</th>
<th>Primary Milestones Implemented/Achieved in 2018</th>
<th>Next Steps (3-5 Primary Next Steps)</th>
<th>Comments</th>
</tr>
</thead>
</table>
| Ensure only eligible individuals receive benefits by identifying areas of concern regarding fraud/waste/abuse and developing systems and/or process to aggressively impact these areas. | 1. Refining data mining/data analytic/referral techniques in order to recognize trends in fraudulent benefit activity.  
   a. Developed process in regards to out of state benefit use, identifying misuse and resolution through administrative hearings  
   b. Began reviewing local jail data to identity ineligible individuals due to incarceration or criminal history  
   c. Development and implementation of FSD “Hand Off” tool to expedite fraud reporting  
2. Better identify areas of client eligibility to focus efforts in comparison available manpower  
   a. Using the SAO report as a guide, efforts were focused on areas involving incarcerated individuals, detained youth, and deceased individuals  
   b. Estimates of data to be received were made in order to balance influx of case work with available manpower  
3. Processing of data received in areas of concern to identify, remove and account for potential cost savings/avoidance.  
   a. DOC Project was officially initiated 11/1/18  
   b. Conf. was held w/ FSD officials to develop method to process eligibility info.  
   c. 11/2018 cost savings totaled $570,510.00 | 1. Continue Department of Corrections joint initiative to regularly identify ineligible individuals due to transient nature of DOC population.  
2. Initiate Youth Services joint initiative to identify detained youth still being declared in EUs for purposes of benefits.  
3. Develop FSD Training Module to assist new/existing FSD staff on fraud detection, identifying/reducing agency error, and ABAWD case processing  
4. Work closely w/ MMAC on Provider Revalidation to ensure timely enrollment of eligible providers | |

**Measure(s)**  
- WIU Return On Investment  
- % of Periodic Eligibility Reviews Completed for FS Mid-Cert Reviews and ADM (Adult Medicaid)  
- Percentage of providers timely enrolled/screened for continued eligibility (MMAC)  

- [DOC and DYS measures in development](mailto:Mark.Winchester@dss.mo.gov)