



A PLAN TO REBUILD & REFORM CHILDREN'S DIVISION







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OVERVIEW: WHY DO WE NEED REFORM?

Everyone wants Missouri to have a functional child welfare system. The concern for children and families is universal. Yes, Missouri's system struggles to perform its essential functions, resulting in too many children going into foster care and remaining there too long. This comes at great personal cost to children and families, and enormous financial expense to the state. There are two main reasons Missouri's child welfare system faces these challenges:

1. We are unable to recruit and retain front line workers
2. We lack essential personnel needed to operate a proactive and holistic child welfare system

This offers an overview of the plan to reform our system to prevent foster care when possible, and to efficiently move families through the system when child removal is necessary. Missouri's child welfare system needs to change from a reactive model that places a lot of children in foster care to a proactive and preventative model that works to keep children safe without upending their lives, which is better for both our kids and the budget.

To accomplish this reform, the following steps must be taken:

- Recruit and retain workers by increasing the salary of front-line staff, and providing additional pay for years of service
- Add employees to decrease workload and establish teams of prevention workers to preserve family integrity and keep children out of foster care whenever possible
- Provide needed staff to support our front-line workers and increase efficiencies through specialized units and circuit-based specialists
- Provide legal representation to allow for cases to be resolved in a timely manner

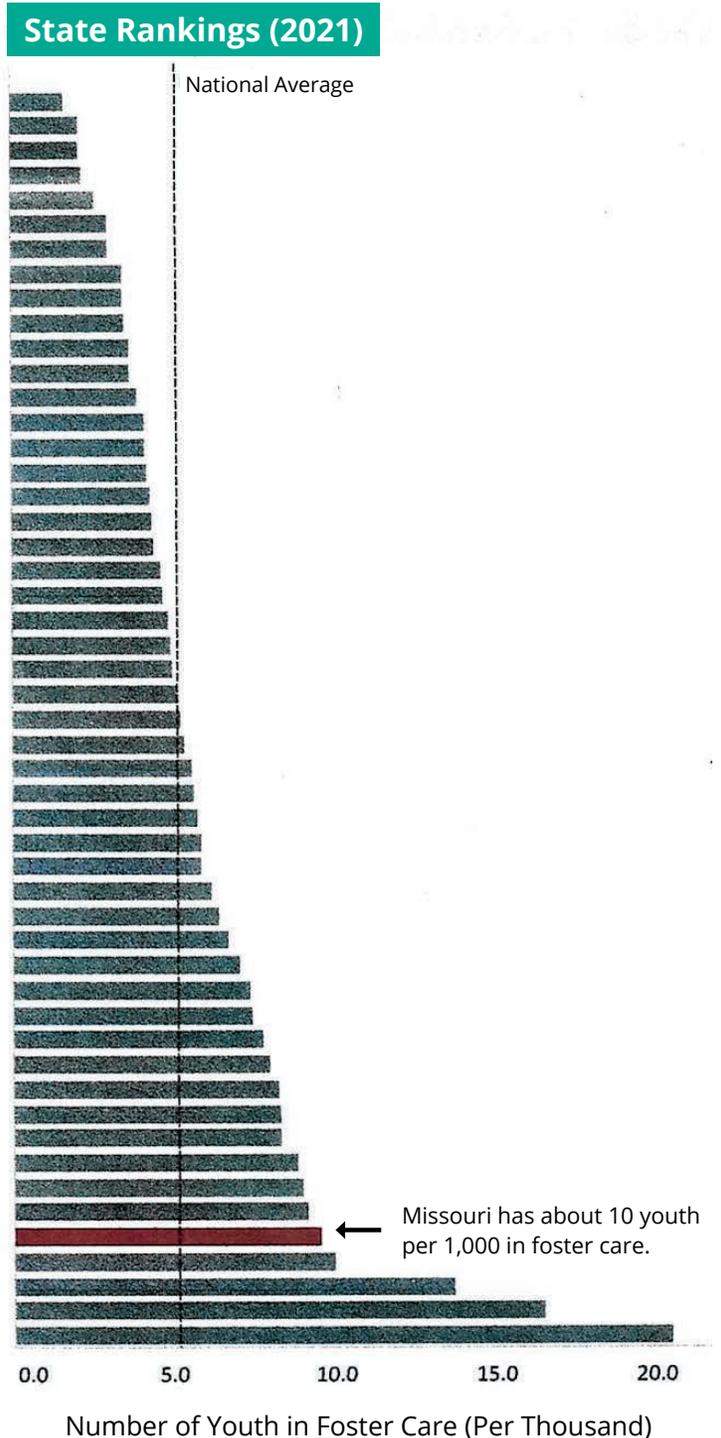
When these steps are taken, we can transform Children's Division into the excellent child welfare agency that the people of Missouri deserve.

Highly functional child welfare systems keep children safe without removing many of them from their homes. Meanwhile, Missouri has among the highest number of foster children per capita, which demonstrates an overuse of the intervention of foster care. The 2021 graphic below from Casey Family Programs showcases Missouri's need to reduce the number of children in foster care.

At the end of 2021, Missouri had over 14,000 foster children. We have been able to marginally reduce that number, and as of January 1, 2023, we had 13,328 children in care. Even with that reduction, we sit near the bottom of this chart with the worst performers in the nation. We have roughly twice as many foster children as the national average per capita.

Missouri can do better. The most effective and least invasive child welfare systems are near the top of the chart. For example, Maryland is nearly identical in size to Missouri and has under 4,000 foster children. If Missouri improved enough to be in the middle of the pack, we would cut the number of foster children in half.

We should aim to reach at least that level of functionality.



FINANCIAL REASONS: WE CANNOT AFFORD NOT TO

One may ask whether we can afford these reforms, but when attempting to reduce an intervention as expensive as foster care, this is the wrong question. The question is not whether we can afford to reduce the number of children in foster care. The question is whether we can afford to keep them there.

The answer is we cannot.

For every 1,000 children kept out of foster care, the state saves \$25,000,000 per year.

How much does it cost?

It costs \$25,000 per year to keep one child in foster care (see attachment A). For 14,000 children, the bill comes to \$350,000,000. This does not include reasonably anticipated future expenses, such as the subsidies for those children who never go home but exit the system through adoption and guardianship. It also does not include the extra cost of those children who go deep into the system and wind up in residential placement.

Long-Term Cost

Because foster children are more likely to experience addiction, mental illness, criminal activity and incarceration, the long-term cost of the foster care system is almost unfathomable. For every 1,000 children kept out of foster care, the state saves \$25,000,000 per year. If we cut the number in half, we would save \$175,000,000 per year, in addition to any future subsidies and long-term costs. Given the extreme expense of this system, it makes financial sense to invest in the services needed to reduce the use of foster care.

IT'S BETTER FOR THE KIDS

Perhaps it would be worthwhile for Missouri to expend double the national average for foster care if that intervention worked to the benefit of children, but often it does not. At best, it is a necessary intervention with serious side effects. Anyone who has worked directly with children will tell you the difficulty those kids face when they are taken from their parents. Regardless of what happened to them, most foster children simply wish to return home. Our workers can attest that children are often traumatized and emotionally scarred when they are placed in foster care. The severing of their connections causes them great grief, and many of them do not fare very well.

Studies confirm these observations. In a comprehensive article addressing this subject, Professor Shanta Trivedi of the University of Baltimore sets forth a review of many studies which demonstrate that child removal is extremely traumatic and harmful to children (Shanta Trivedi, *The Harm of Child Removal*, 43 *New York University Review of Law and Social Change* 523 (2019)). These studies show that children who enter foster care suffer significant trauma. One study indicates that foster children suffer post-traumatic stress disorder at nearly double the rate of war veterans. Professor Trivedi cites the work of MIT economist Joseph Doyle who has found that children who remained in their homes fared far better than similarly situated children who were placed in foster care. In these studies, foster children were more likely to commit crimes, become addicts, receive welfare, and become homeless than similarly situated children who did not suffer the trauma of removal from their homes.

The studies tell us what we already know: foster care is hard on kids. The reasons are self-evident. Children are taken away from all of the people they know and love without their consent. They lose their parents, their house, room, toys, pets, and often their siblings. Because we cannot recruit enough foster homes to keep up with the number of children we put in foster care, we often have to place children far from their homes. Those unfortunate children lose their schools, neighborhoods, extracurricular activities, and all of their friends. They lose everything. Both our experience and the studies instruct us that we should avoid placing children in foster care unless it is absolutely necessary.

PLAN OUTLINE

1

INCREASE PAY

- The average starting salary for case-carrying CD team members is **\$39k per year**. Comparatively, surrounding states start at **\$44k** and private sector offers **\$56k**.
- Low pay impacts recruitment efforts and causes us to lose experienced team members.
- An increase to market wage and an established pay ladder will allow us to be more competitive and better recruit and retain CD team members.

2

INCREASE WORKFORCE

- CD strives to meet accreditation standards, which is **15 cases** per worker.
- Due to ongoing vacancies, CD team members handle an average of **25+ cases** each, with workers in our metro areas handling much more.
- We need more team members across the state to help reduce burnout and turnover.

3

PRESERVE FAMILIES

- The goal of the child welfare system is to protect children and provide services to help them stay at home; however, due to staffing shortages, Missouri has been forced to be more reactive and less proactive and preventative.
- Keeping children safe in a way that does not uproot their lives, when possible, is beneficial for everyone. It prevents long-lasting trauma for the child and family, and it is also a much less costly option overall.
- Reducing the number of children in foster care would allow CD team members to focus on preventative services, which would ultimately help children remain safely at home.

4

EXPEDITE THE CONCLUSION OF CASES

- When parents do their part to assure safety, we strive to reunify as quickly as possible.
- Reunification relies on court action, and CD needs more legal representation to allow cases to be resolved timely.
- When reunification is not possible, lawyers are needed to promptly litigate hearings to move cases toward guardianship or adoption.

THIS PLAN PAYS FOR ITSELF by saving \$25,000,000 for every reduction of 1,000 foster children.



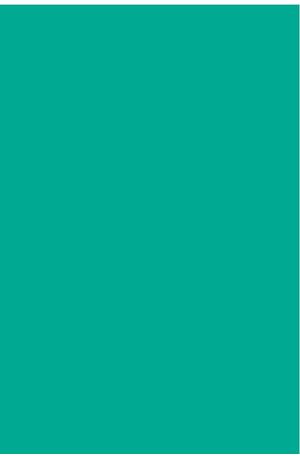
1. INCREASE PAY



Children's Division has been unable to recruit and retain staff because we do not pay what the market demands for college educated child welfare workers. **After last year's 5.5% increase, our starting pay was \$35,640, which calculates out to \$17.13 per hour.** This is less than the salary being offered to work in retail and fast food.

Our low pay is well known, and internet searches reinforce that reputation. One website lists our workers' pay as the lowest in the Union (see Careerexplorer.com). At our previous pay rate, we continued to lose front-line workers. With money DSS had not expended due to vacancies, we increased the pay for caseworkers by 10%, bringing them to \$39,000 a year, but this created wage compression with supervisory staff.

Even with the increases, we are still woefully under market. The average starting compensation for surrounding states which require a college degree is approximately \$44,000. Private agencies have directly recruited our staff to work for them at a starting salary of \$56,000. We also have no pay ladder to recognize years of service. This means a person doing investigations for 20 years could be paid the same as a brand new trainee. The result has been an inability to attract new team members and a turnover rate of 42% across the state (55% for front-line staff). Turnover is reported being over 100% in Kansas City. In order to address this concern, we should increase the base pay and provide for a pay ladder to reward years of service.



Missouri ranks the **lowest** in the Union for social workers salaries.

careerexplorer.com

2. INCREASE WORKFORCE

Even if Children's Division filled every position it currently has, there would not be enough people to perform all of the required tasks. One can go into almost every Children's Division Office in the state and find people unable to keep up with the work at hand. Virtually no one other than a trainee can be found to have the required number of 15 children per worker. The number is almost always over 25, and frequently over 30 children per worker. In Kansas City and St. Louis, workers have reported being responsible for up to 50 or 60 children. **We desperately need more workers all over the state.**

One of the reasons for these difficulties is the minimalist way in which we calculate the number of workers we need. Up to now, we have provided no buffer for training, sickness, leave, vacations, or other contingencies. Our staff are regularly on call, leaving them weary and without life balance.

Traditionally, we have calculated the number of workers a circuit needs based upon the number of foster children. This is completely wrong, since one of the tasks of the Division is to prevent the need for children to enter foster care in the first place. It would be like calculating the number of police officers a community needs by counting the prisoners in the jail, or assessing the number of doctors any community can have based on how many people are in the hospital.





If the NFL calculated the number of football players a team needs in this way, the Kansas City Chiefs would only need 11 employees. After all, there are only 11 people on the field at any one time. But this would leave the team with a defense and no offense. If you minimally added an offense, then there would be 22 players, but that would still not be enough because you would have no backup players to address injury and sickness. You would still not have players on special teams, like punters and place kickers.

The Chiefs are not limited to 11 players, and they have many more than 22. The Chiefs have 46 players dressed out for every single game, with a total roster of 53. Children's Division is currently like a football team with an 11-player defense and no offense or special teams. We respond to emergency after emergency, while we manage an excessive number of cases. We are never able to move the ball. We need a lot more people.



STAFF TO ADEQUATELY COVER WORKLOAD

The requested increase in full-time employees is a modest beginning toward right-sizing our workforce. Over the past year, workload analysis has been done by Change and Innovation Agency, revealing that Children's Division is severely understaffed when considering the hours required to perform essential functions. Calculating our needs based on this approach, Children's Division should have 3,418 front-line staff (see Attachment B). Our front-line allocations are around 1,400, while there are approximately 1,800 team members in the entire agency. According to Change and Innovation, our workload justifies having a child welfare agency double our size unless we streamline our processes.

In the past year, CD has followed the advice of Change and Innovation to increase efficiencies, such as establishing a Central Consult Unit and making plans for a "set up unit," but these measures have not been able to substantially fix the problem. In addition to the efforts already taken, CD needs an influx of workers to do the work required to reduce the number of cases, which will then reduce caseload.

Our accreditation mandates that we have only 15 children per worker. That is not true in any circuit, and in most areas, we are not even close. Most workers report having between 25 and 35 children, but in extreme cases, they have reported carrying up to 60 cases. We need specialists to provide support to front-line staff throughout the state. We need to invest in the Central Consult Unit, the set-up unit, and a group of workers to handle "off hour" work. These team members are in addition to the prevention staff discussed in the next section. Though the requested additions would not provide all of the staff necessary to cover the hourly duties identified by Change and Innovation, it will be a good start.



The numbers make it obvious that our people need help, but they only tell part of the story. To really understand the needs of our front-line staff, one must talk with them about the struggles they face every day. The job would be hard enough with the correct number of workers, but with a staffing shortage, the burden becomes almost unbearable. Front-line team members have been expressing their frustration and despair, sometimes with words, and sometimes by resigning.

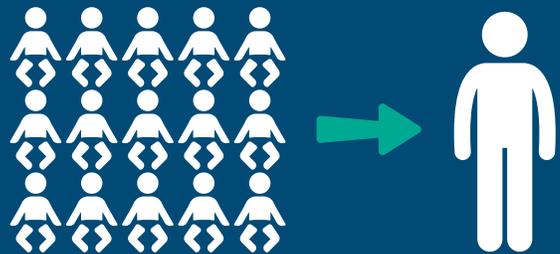
Attachment C provides excerpts of a recent email from a team member, describing an unbearable schedule and colleagues who are looking for other employment.

Our people are extremely dedicated and committed to their work, and we should honor that dedication and commitment by establishing reasonable limits on their workload in order to enable them to fulfill their important mission.

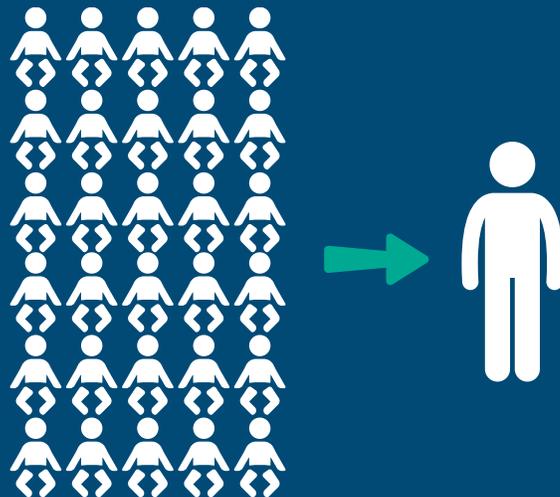


ACCREDITATION MANDATES...

We should only have 15 children per team member.



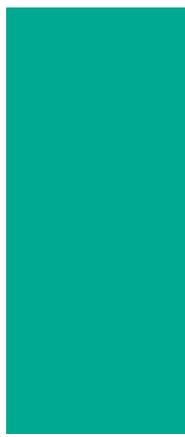
Most team members report having 25-35 children, but some up to 60.



3. PRESERVE FAMILIES

Contrary to the common understanding, CD's mission is not to take children from their families and place them in foster care. The Department website states that, "Children's Division is responsible for the administration of child welfare services," which are geared toward **"ensuring the safety, permanency, and well-being of Missouri Children."** Given the adverse side effects of foster care, that drastic intervention should only occur in emergencies or after services have been provided to stabilize families. Unfortunately, Missouri does not have adequate workers to regularly offer those services, often leaving courts with little choice but to order children removed from their homes. Missouri must build a workforce dedicated to safely keeping families together.

Prevention workers could be utilized in a number of different programs, some of which may not yet exist. Some of these professionals may not carry a specific caseload, but instead may be assigned to a particular area or population to address familial concerns in a proactive way to prevent the necessity for ongoing cases. There are numerous examples of such programs that currently exist or could be promptly implemented.



FAMILY-CENTERED SERVICES

To prevent child removal, Children's Division has a program of Family-Centered Services (FCS) which can occur voluntarily or by court order. Currently, very few workers are available to offer that program, because all available team members are needed to conduct required investigations or manage the enormous number of children in foster care. Recently, an FCS worker in Kansas City reported she was only one of two people in the office doing FCS work, but that there were 22 people performing that function in the 1990s. In order to address the extreme lack of investigators, the St. Louis office discontinued FCS work to focus on the statutorily mandated investigations. We need to add a sufficient number of positions in order to reestablish Family-Centered Services to prevent children from coming into foster care when possible.

The additional full-time employees requested in the Children's Division budget would only be a start. **Once the number of cases begins to decline, rather than eliminate social workers, they would be converted to FCS and other prevention services.** There is virtually no limit to the number of FCS workers that could be put to good use. If FCS services had been offered to every high-risk family which came to the Division's attention last year, based on historic participation levels, we would have needed 153 additional FCS workers to handle that work. That number, however, is based on a reactive approach that only looks at situations provided to us, and makes no provision for proactive work in the community. If we partnered with school districts to have FCS workers present in schools, they could engage children and families to address issues before they result in a hotline. Ultimately, we could have 500 FCS workers if we dedicated one for every geographic area covered by a high school, or up to 2000 if we had one dedicated to the students in each public school building in the state. There is no limit to the number of prevention workers who could be put into action. Children's Division has not requested the hundreds of workers who could ultimately do FCS work, but instead has recommended an initial influx of workers to begin the transition toward that approach.

TEAM DECISION MAKING



In years past, Children’s Division had team members specifically dedicated as Team Decision Making Coordinators (TDMs). Their task was to work with families by calling together a parent’s support system to find solutions for problems that would otherwise land children in foster care. The discontinuation of TDMs is among the least popular actions in recent years among our field staff because they saw the efficacy of those meetings in preventing child removal or preserving placements after removal. When fully implemented, TDMs can be a powerful prevention tool.



PRIVATE COMMUNITY-BASED SERVICES

This proposal is about more than transforming the operation of Children's Division, but changing the default response of the entire child welfare system. In our current culture, we have "mandated reporters" who feel obligated to call our hotline at every sign of trouble. Instead, those concerned professionals could be equipped to support those children and families by getting them to services they need without the intrusiveness of a formal investigation. In order for such a shift to occur, however, services must be made available in the community.

Government cannot provide such services alone. Instead, Missouri should provide support to private organizations which work to protect kids, stabilize families, and help people flourish. These organizations will vary from place to place based on the needs and assets in a community. By partnering with schools, churches, and other organizations, community-based services can be a powerful tool in our efforts to keep children safely in their own homes.

These prevention efforts would come at great benefit to children and families, and enormous savings to the state. Since it costs \$25,000 per year to keep a child in foster care, every reduction of 1,000 children saves the state \$25 million dollars. If Missouri had the average number of children in care, the state would have 7,000 fewer foster children and save up to \$175 million per year.



4. EXPEDITE THE CONCLUSION OF CASES



In addition to preventing cases from unnecessarily coming into the system, we also need to work to get cases out of the system as soon as they are ready to be concluded. When parents have done the work to assure safety, they should see their families reunified more promptly. Cases which are ready to be concluded by guardianship or adoption should move toward those resolutions as soon as possible. Instead, these cases have lingered. We need the resources to move these cases forward.

The conclusion of these cases depends on court action, and attorneys are required to quickly bring cases to a close. Unfortunately, Children's Division lacks the legal representation it needs. Often, Children's Division is the only unrepresented party in a juvenile court proceeding. Under a strict reading of the law, one could argue that Children's Division should be represented by a lawyer at every single hearing (RSMo Section 210.109.3(8)).

Instead, we are currently unable to obtain even the number of attorneys needed at the final stage of our cases. We need lawyers to finish cases, and we simply don't have them. The Division of Legal Services has budgeted positions for permanency attorneys to accomplish this goal, but those lawyers have not been hired because the designated salary is far below the market rate for attorneys in the public sector. Ultimately, we should obtain an adequate number of attorneys to provide Children's Division with counsel at every hearing, but in the short term we must increase the compensation for the positions already approved and get those positions filled. We can then put those attorneys to work closing out cases, which will reduce the number of children in care and allow for our staff to focus on children and families still working through the system.

HOW CAN YOU HELP?

This question was asked throughout the most recent legislative session. This Plan is where we should start. In 2022, the legislature was told not to be surprised if next year they would hear that we need to double the size of the agency. The workload analysis justifies such an increase, but this proposal does not request that. Rather, this plan adds efficiencies and changes the approach to keep children safe in their homes when possible, resulting in less trauma to children and less expense to the State of Missouri.

The Plan has up-front cost, but comes with great promise to improve outcomes for children and families, and ultimately to save much more money than the amount invested. More families will be preserved, there will be less state intervention into the lives of our citizens, and children will lead happier and healthier lives. We must act now. The well-being of our children and families depends on it.



Attachment A

Fiscal Year 2022 Cost Comparison* for State vs Contract

Cost Type	State Cost	Contract Cost	Difference
Case Management	\$6,984	\$6,679	(\$304)
Administrative	\$719	\$1,837	\$1,118
Special Expenses	\$893	\$2,794	\$1,901
Resource Development	\$1,012	\$1,158	\$147
Foster Care Rate	\$5,307	\$7,790	\$2,483
RTS & Specialized Care	\$8,633	\$7,232	(\$1,401)
Total Annual Rates	\$23,548	\$27,492	\$3,944

Contract Amount as a % of State Cost

117%

*It should be noted that cost comparison is a challenge to quantify (ex. flexible spending, administration costs for a statewide agency). This rate does not reflect actual costs by the contractors, rather the rate paid to them by the state. The calculation is based on direct cost allocation of administrative expenditures.



Attachment B

Change & Innovation Report on Workload Capacity

Intake

Current Workload Demand		
153,000 Total Contacts <ul style="list-style-type: none"> • 600 Contacts Per Day 		55,400 Screen-Out <ul style="list-style-type: none"> • 37,000 Documented • 18,300 Others/Prior Checks = 26,600 hours of work needed
97,800 Screen-In <ul style="list-style-type: none"> • 72,400 Reports • 25,400 Referrals = 66,800 hours of work needed 		92,900 total hours needed. 84,000 hours available
New Process Benefits		
Modified intake reports, updated CA/N conditions, & simplified coding <ul style="list-style-type: none"> • 10,800 hours 	Open OSCR to permissive reporters <ul style="list-style-type: none"> • 3,000 hours 	Eliminating call-outs on 24s and 72s <ul style="list-style-type: none"> • 1,500 hours

Child Abuse/Neglect

Current Workload Demand		
74,000 Total Contacts		51,155 Alternative Care <ul style="list-style-type: none"> • x 10.25 hours = 11,839 hours
69,560 Safe <ul style="list-style-type: none"> • x 9.25 hours = 643,430 hours 		Total Hours Needed = 691,410 (Equivalent of 461 FTE's)
3,285 Family Centered Services x 11 hours = 36,141 hours		
Time Savings		
Path One: <ul style="list-style-type: none"> • 44,480 x 1.5 hours = 66,720 hours 	Referrals: <ul style="list-style-type: none"> • 9,750 x 4 hours = 39,000 hours • 5,000 N referrals x 4 hours = 20,000 hours 	Total Savings: <ul style="list-style-type: none"> • 125,720 hours (Equivalent of adding 84 case-carrying FTE's)

Change & Innovation Report on Workload Capacity (continued)

Family-Centered Services

Current Workload Demand

- | | |
|--|--|
| <p>5,500 total referrals per year
(500 per week):</p> <ul style="list-style-type: none"> • 3,575 no court involvement <ul style="list-style-type: none"> ◦ (71 hours) (65%) | <ul style="list-style-type: none"> • 1,925 court involvement <ul style="list-style-type: none"> ◦ (141 hours) (35%) <p>Total:</p> <ul style="list-style-type: none"> • 525,250 work hours per year • 350 FCS workers |
|--|--|

New Process Benefits

- | | | |
|---|--|--|
| <p>New way to document:</p> <ul style="list-style-type: none"> • 11,7333 hours | <p>New set of forms:</p> <ul style="list-style-type: none"> • 5,500 hours | <p>New way to engage:</p> <ul style="list-style-type: none"> • 45,375 hours |
| <p>Total: 62,608 hours (Equivalent of 42 FTE's)</p> | | |

Alternative Care

Current Workload Demand

- | | |
|---|--|
| <p>20,164 Total Children in Care</p> <ul style="list-style-type: none"> • 6,750 Set-Ups <ul style="list-style-type: none"> ◦ x 32 hours = 216,000 hours • 20,164 Children in Maintenance <ul style="list-style-type: none"> ◦ x16 hours x 10 months = 3,226,240 hours • 6,514 Maintenance (12 months) <ul style="list-style-type: none"> ◦ 16 hours x 2 months = 208,448 hours | <p>6,900 Closures</p> <ul style="list-style-type: none"> • 3,105 Reunifications <ul style="list-style-type: none"> ◦ x 32 hours = 99,360 hours • 1,826 TPR to adoption <ul style="list-style-type: none"> ◦ x 59.15 hours = 108,190.5 hours • 1,688 Guardianship <ul style="list-style-type: none"> ◦ x 31 hours = 52,328 hours |
| <p>Total Hours Needed: 3,910,566.5 (Equivalent of 2,607 workers)</p> | |

Time Savings

- | | | |
|--|---|--|
| <p>Dedicated Set-Up Unit</p> <ul style="list-style-type: none"> • 75,800 hours for AC • 40,000 hours total | <p>Avoiding capacity limbo:</p> <ul style="list-style-type: none"> • 460,800 hours <p>Use Technology for Meetings:</p> <ul style="list-style-type: none"> • 483,936 hours | <p>Court charges:</p> <ul style="list-style-type: none"> • 75,000 - 375,000 hours |
| <p>Total savings= 1,059,736 hours each year (Equivalent of 700 AC workers)</p> | | |

Attachment C

Email from CD Team Member:

I wanted to let you know we appreciate you and all of your efforts. I know you are doing everything that can be done to turn things around. I initially started in 1991 and although I have left and came back twice I know there are periods like this and it will eventually get better.

Now the but: I am so tired and discouraged. I bounce from emergency to emergency trying to keep kids alive because the severity of mental health needs. I have never had so many kids that are suicidal and homicidal. It is not uncommon to have 18+ hour days because of kids in the hospital or staying in our office due to lack of placement. I cannot remember the last true day off, for now I consider it a day off if I do not have to leave my house. Thanksgiving, Christmas, the week I was so sick I could not stand up, there were still emergencies that needed to be handled. I do not have a potential day at home until 1/14. Today I have a quadriplegic 18 year old. His placement provider had a stroke on Thanksgiving and died on Christmas. Yesterday his step dad that was fillin gin to provide care was arrested. I have been working on alternative placements since November. The earliest placement date is 1/9. I have to figure out how to get coverage for his care until Monday. The current nurse has been on 24 hours, 8 hours unpaid because Medicaid will only approve 16 hours per day. I have found a relative that will hopefully be able to stay tonight so she can sleep. The alternative is to cause him massive trauma by admitting him to the hospital. Meanwhile I have 8 court reports due because I have 20 individual families. I have notice of 4 more "vital" trainings that I have to complete, a Juvenile Justice series I have to attend for 3 weeks, 3 separate youth that are hovering on hospital admissions, and now notice that we need to complete these surveys for the youth and parents. You don't need a survey to tell you I am failing my families, I am failing my kids, and I am most certainly failing to keep up with documentation and paperwork. I received a transfer case the end of November and had to testify in the TPR on 1/3. Reviewing the record and using it as a comparison, i am not alone in failing. So early tomorrow I leave to pick up a kid that is in California because we did not have a placement for him and he went to his grandmothers for Christmas. We return late on Sunday. He is a voluntary placement due to drugs, violence, and mental health. I still do not have a placement for him and the Independent Assessment did not rate him for residential. Every emergency residential facility has denied placement twice already due to his history. I have an emergency bed Sunday night but if I cannot get him in school Monday morning he will be in our office. My quadriplegic youth is moving at 10 am Monday, followed by court hearings and supervision.

Email from CD Team Member (Continued):

I have a suicidal youth, age 19 that DMH cannot find a placement for so we have weekly meetings to confirm there are little to no services available for the 18 to 21 cohort. Hospitals will not admit due to his autism diagnosis and developmental delay. Every day I dread the call that he succeeded in suicide because his ISL does not come close to meeting his needs. So after my meandering description of a fairly normal week, while the coworkers around me discuss their ongoing job searches, this minor little survey feels very much like that proverbial straw. I very much want to stay but if this continues my health will decline and I will not have options. It is not just the money (although more does not hurt). It is being on call 24/7 and never having time to decompress. It is having the secondary trauma of these very high needs youth. It is the personal guilt that I am failing families. I just do not have any more to give. I cannot work more overtime to do paperwork. My priority is the safety of my youth. I should mention that my supervisor goes above and beyond every day. She has an entire unit with most of us being older youth workers. She can only stretch so far to help cover emergencies although she does everything in her power to do so. Many of my coworkers are new and completely overwhelmed.

I do appreciate you. I completely agree with your goals. Eventually they will be attainable. It would be of great help to achieve the goals if DMH were able to provide kids with the mental health services they need so they are not placed in our care solely for the purpose of accessing mental health services or if DYS were allowed to provide their exceptional services to the youth in our care due to delinquency. Thank you for your time reading this, my yarn doll, Hope, continues to have a place of honor on my desk!



*Empower Missourians to live safe, healthy, and
productive lives.*