MISSOURI PRACTICE MODEL

Philosophical Base Of Child Welfare Practice

The mission of the Children’s Division is to protect Missouri children from abuse and neglect; assuring their safety and wellbeing by partnering with families, communities and government in an ethically, culturally and socially responsible manner. The Missouri Children’s Division has the statutory authority and responsibility for accepting and investigating all reports of child abuse and/or neglect of children under age 18. Statute also charges CD with the responsibility for serving the needs of Missouri’s children by providing treatment services, and alternative placement outside their home when such placement is necessary.

Promoting safety, permanency, and wellbeing requires child welfare practitioners and partners to spend most of their time and energy on activities which increase safety and enhance the wellbeing of children and families. Building on what is already working and learning and implementing new and innovative approaches is essential to accomplishing the mission of the Children’s Division.

Building organizational culture and strengthening practice is much like constructing a house. Every good house must be built on a solid foundation with sturdy walls and a sound roof which will stand the test of time. Every good builder uses the best building material and the best blueprints, based on the most up to date information available in the field. Likewise, the Children’s Division’s house is built on a solid philosophical base, nationally recognized best practice approaches, sound strategies, and thoughtful implementation of an effective practice model. This combination is the Missouri Practice Model.
Organizational Culture and Family & Child-Centered Practice

1. Seeing Families Accurately
2. Engaging Families & Communities
3. Making Informed Decisions
4. Strengthening Frontline Practice

System Support
- HP Coaching Culture
- Best Practice Research
- QA/QI Process
- Policy Alignment
- Technical Support
- Data-Informed Planning & Accountability

FCS Partnering for Change

Differential Response

Team Decisionmaking (TDM)

Workforce and Leadership Development
- Recruitment/Retention
- Training/Coaching
- Career Ladder
- Leadership Academies

Signs of Safety

Trauma Informed Practice

Five Domains of Wellbeing
The Children’s Division’s approach is founded on the principle the first and greatest investments, time and resources, should be made in the care and treatment of children in their own homes. Therefore, the Division provides families with the services and support necessary to strengthen the family to keep their own children safe and prevent out-of-home placement. However, if the child cannot safely remain in their own home, immediate steps must be taken to facilitate timely reunification and assure other legally permanent plans occur when reunification is not possible. Overall, Children’s Division’s practice should empower the family and encourage self-sufficiency, while meeting the children’s needs for safety and wellbeing.

Children’s Division recognizes and supports the preservation of family and community connections as essential to the safety, well-being and permanency of a child. When children are in out-of-home care, diligent efforts are made to place the child and/or sibling group with other relatives or the same placement provider, and maintain the child and/or sibling group in their own schools and communities. Families can best be supported by their safety network and community.

Frontline staff and those who support them are in a position to be agents of positive change in the lives of children, youth and families. Children’s Division staff members are child welfare practitioners driven by a sense of mission, purpose, and professionalism. Missouri’s child welfare system is driven by four key priorities focused on increasing safety, permanency, and wellbeing:

1. **Seeing families accurately through the full frame of their lives** allows us to better understand behavior, emphasizes curiosity and critical thinking, minimizes tradeoffs, and moves beyond symptoms and compliance to sustainable change.

2. **Engaging children, youth, families, and communities as partners** improves working relationships, which are fundamental to developing safety and wellbeing networks in families and communities.

3. **Making informed decisions through inclusive processes, data, research, and evaluation** ensures decisions are based on reliable information, includes diverse perspectives, and leads to individualized and realistic goal setting and cross-system accountability.

4. **Strengthening frontline practice and supporting what works** through a clear and evolving practice model based on values, principles, experience, and results.
The Five Domains of Wellbeing, Trauma-Informed Practice, and Signs of Safety are the foundational elements and frameworks of a clear practice model anchored in values and practices.

**Five Domains of Wellbeing:**

Every person needs the **Five Domains of Wellbeing**, which are:

1. **Social Connectedness** to people and communities, in ways that allow us to give as well as to receive,

2. **Safety**, the ability to be ourselves without significant harm,

3. **Stability** that comes from having anchors and things we can count on to be the same from day to day, and knowing that an unexpected problem or emerging challenge will not have a domino-effect and set up a cascading crisis,

4. **Mastery**, feeling that we can influence what happens to us, and having the skills to navigate and negotiate life,

5. **Meaningful Access to Relevant Resources** to meet our basic needs without unnecessary shame or stigma, danger, or great difficulty.
To create change that will last, systems and services must help people minimize tradeoffs between the domains and build assets in the Five Domains of Wellbeing.

**Trauma Informed Practice:**

Recognizing the impact trauma can have on a family, Children’s Division has made the intentional commitment to be a trauma-informed system. Exposure to trauma can make it more difficult for families to distinguish between safe and unsafe situations, and may lead to significant changes in their own protective and risk-taking behavior. Children who have experienced trauma are at significant risk for impact on their brain functioning, developmental trajectory, relationships, coping skills and health outcomes. Because of the high prevalence of traumatic stress within families and children who have experienced abuse and neglect, Children’s Division policies and practices are created through a trauma informed perspective.

**Trauma Informed Pathways to the Five Domains of Wellbeing:**

Missouri’s Children’s Division created a new foundation to shape the work of preventing child abuse and assisting children and families that have experienced child abuse and neglect. The framework of the Five Domains of Wellbeing is being used to promote a universal perspective that identifies the core functions of Social Connectedness, Stability, Safety, Mastery and Meaningful Access to Relevant Resources. These domains are critical for all people and families, not only those served by Children’s Division. How a person meets their needs in each domain may look different depending on family culture, economic status, caregivers’ capacities and family structure to name a few. When moving forward in one domain creates problems in another domain, having wellbeing means that families have enough in place so that they can balance tradeoffs.

Trauma is a common thread for children and families involved with Children’s Division. It interrupts wellbeing and also creates significant barriers to increasing wellbeing. Being trauma informed is also foundational to Children’s Division work. Trauma impacts children and families in a multitude of ways. For example, children who have been exposed to high levels of trauma may have changes in their brain structures and functioning that limit the capacities of their brain in the areas of learning, attachment, or emotional and behavioral regulation because their brain’s energy is focused on survival or safety functions. Not only can current trauma impact an individual’s or family’s approach to relationships and the world, but historical and intergenerational trauma continues to impact this. However, trauma does not have to control a person’s future. For child welfare services to actually help families where there has been trauma, we need to attend to the five core principles of Trauma Informed Care:

- **Safety:** Ensuring physical and emotional safety
- **Trustworthiness:** Maximizing trustworthiness, making tasks clear and maintaining appropriate boundaries
- **Choice:** Prioritizing developmentally appropriate choice and control for children, youth, families and adults
- **Collaboration:** Maximizing collaboration and sharing of power with children, youth, families, and adults
• **Empowerment**: Prioritizing child, youth, family and adult empowerment and skill-building
Child welfare staff need to be able to engage parents and children to understand their history, perceptions and needs, and to be active partners in their plan and future, recognizing that engagement may be influenced by a person’s trauma history.

**Signs of Safety:**

**Signs of Safety** provides a framework for continuous focus on the reasons for Children’s Division involvement and assessment of safety throughout the life of a case. Signs of Safety also emphasizes building families' natural support systems.

There are three core principles that underpin Signs of Safety:

1. **Working relationships** – constructive working relationships between professionals and family members are the heart and soul of effective practice. We should be asking parents their view of the problem and partnering to develop a solution instead of assuming we know what’s best.

2. **Thinking critically, fostering a stance of inquiry** – The single most important factor in minimizing errors (in child protection practice) is to admit that we may be wrong. Child protection staff need to take a questioning approach and remain open minded.

3. **Landing grand aspirations in everyday practice** – Families and front line practitioners are the arbiters of whether practice works. We should support practice that works.

Signs of Safety is built upon solution-focused therapy which stresses the importance of relationships, critical thinking, and workers as change agents through getting the answers to three important questions:

- **What are we worried about?**
- **What is working well?**
- **What needs to happen?**

In addition, a scaling question is used to make judgments about how safe the child is, from the perspective of the worker, the family, their networks, and other professionals, to develop understanding between the parties and to drive change.

No parent deliberately sets out to fail; families are best able to succeed when strengthened and empowered. Families are more likely to change when they are invested in a plan for change, rather than being asked to comply with the mandates of others. The Children’s Division practice
must focus on the family as a system, rather than on any individual, allowing each member an
equal and active voice and full inclusion in all phases of the assessment and service planning.

Using the Children’s Division’s foundational elements and frameworks, every Child Welfare
Practitioner must consider how they would want to be treated if in a similar situation to the
families they serve.

Child welfare practice is not just about the worker, supervisor, or the Children’s Division; it is
about the community.