

**Missouri Department of Social Services
Children's Division
Residential Program Unit**

THE FOLLOWING DOCUMENTS MUST ACCOMPANY YOUR APPLICATION FOR LICENSURE PURSUANT TO 13 CSR 35-71.020(1)(A-B) AND (2)(A)1-42.

- ☐1. Evidence of compliance with local building and zoning requirements (13 CSR 35-71.020(2)(A)2);
- ☐2. A floor plan of the proposed site in which the specific use of each room is identified (13 CSR 35-71.020(2)(A)3);
- ☐3. A signed copy of the civil rights agreement (See Form RPU-32)
- ☐4. A chart depicting the agency's organizational structure and lines of supervision;
- ☐5. Written policies and procedures established by the board of directors which clearly set forth the authority and the responsibilities delegated to the executive director;
- ☐6. A copy of the articles of incorporation;
- ☐7. A copy of the bylaws;
- ☐8. A copy of the board roster including the addresses of all officers;
- ☐9. A proposed budget for a period of not less than one (1) year;
- ☐10. Verification of not less than three (3) month's operating capital;
- ☐11. A written intake policy;
- ☐12. Written identification of specific program models or designs which shall include the methods of care and treatment to be provided;
- ☐13. Job title, job description and minimum qualifications for all staff;
- ☐14. A projected staffing plan for the anticipated capacity;
- ☐15. Written child abuse and neglect reporting policy;
- ☐16. Written personnel practices, including staff training and orientation;
- ☐17. Annual written plan for staff training;
- ☐18. Written discipline policy;
- ☐19. Written visitation policy;
- ☐20. Written health care policy;
- ☐21. Written restraint policy which shall include identification of all methods to be used and documentation of training utilizing a recognized restraint training program;
- ☐22. A needs assessment conducted and submitted as evidence of need for the type and scope of program proposed. Refer to 13 CSR 35-71.020 (2) (A) 20 A through E;
- ☐23. Evidence of compliance with fire safety requirements of the State Fire Marshall;
- ☐24. Documentation that the agency's water supply and sewage disposal system is currently in compliance with the requirements of the Department of Health if not an approved public source (13 CSR 35-71.080(13)(A);
- ☐25. Verification of a physical examination for all staff working directly with children completed by a licensed physician, certified nurse practitioner, advanced practice nurse in a collaborative agreement with a licensed physician or a registered nurse who is under the supervision of a licensed physician, shall be submitted within thirty (30) days of initial licensure using the form prescribed by the division. (Attached is Form RPU-10, Personnel Report-Residential Treatment Agency to report this information);
- ☐26. Verification of a check of the Family Care Safety Registry (FCSR), and fingerprint background checks for all staff and volunteers. See attached RPU-10 to report this information);
- ☐27. Verification of the education and experience for all administrative and professional staff. Submit a copy of the resume for all administrative and professional staff;
- ☐28. Written description of the recreational program, and the manner in which staff are qualified and prepared to create, organize and supervise them;
- ☐29. A copy of the Personnel Manual for the Agency;
- ☐30. A copy of the Program Manual for the Agency;
- ☐31. For any agency operating a swimming pool on grounds, documentation that the pool is operated and maintained in accordance with all applicable local ordinances and/or state guidelines;
- ☐32. Documentation that each facility's food service is currently in compliance with the requirements of the Department of Health or any local applicable ordinance;
- ☐33. Written volunteer policies;
- ☐34. Written policy for the use of visiting resources;
- ☐35. Written confidentiality policy;
- ☐36. Written policy for the use of locked isolation;
- ☐37. Written instructions for fire and other emergency evacuations;
- ☐38. Written description of the agency's religious requirements and practices;
- ☐39. Written policies governing the use of psychotropic medication;
- ☐40. A copy of any newsletter, brochure, or flyer used by the agency for fundraising or marketing purposes;
- ☐41. Documentation of insurance for the agency for professional and commercial liability, workers' compensation insurance, fire and disaster insurance, and agency vehicle insurance and;
- ☐42. A completed, signed, and dated copy of the agency self-study, RPU-15.
- ☐43. Name, phone number, and email address for Reasonable and Prudent Parenting Liaison

SPECIFIC TO MATERNITY CARE PURSUANT TO 13 CSR 35-71.120(1-5):

- ☐1. Written description of the program;
- ☐2. Written financial policies and expectations;
- ☐3. Written plan for all deliveries.
- ☐4. Written training plan specific to maternity care;
- ☐5. Verification of staff certification in infant CPR

Please contact Residential Program Unit, (573) 751-4954, if you have any questions regarding the above information.

Return the completed form and attached information to:

Residential Program Unit
Children's Division
P. O. Box 88
Jefferson City, Missouri 65103