**MISSOURI DEPARTMENT OF SOCIAL SERVICES**  
**CHILDREN’S DIVISION - RESIDENTIAL PROGRAM UNIT**  
**LICENSE RENEWAL CHECKLIST**

**THE FOLLOWING DOCUMENTS MUST ACCOMPANY YOUR APPLICATION FOR RENEWAL OF LICENSURE FOLLOWING INITIAL SIX MONTH PROBATIONARY PERIOD.**

1. Complete form RPU-10, Personnel Report, for all staff, interns, volunteers, and contractors;
2. A copy of the board roster including the mailing address and place of employment of each member and a list of board officers;
3. A copy of a current organizational chart to include name and position of all administrative and professional staff;
4. A record of monthly drills for fire and emergency evacuations which are held at different times of the day and night;
5. A summary of any significant changes to program and copies of any resulting policies or policy changes;
6. A copy of the resume for all administrative and professional staff.
7. Name, phone number, and email address for current Reasonable and Prudent Parenting Liaison

**THE FOLLOWING DOCUMENTS OR WRITTEN POLICIES WERE PREVIOUSLY SUBMITTED TO THE LICENSING UNIT ON OR BEFORE THE LAST COMPLIANCE VISIT. IF THEY HAVE BEEN UPDATED, PLEASE SUBMIT THE UPDATED POLICIES:**

1. Written statement of personnel practices
2. Articles of incorporation;
3. Bylaws;
4. Written intake policy;
5. Written child abuse and neglect reporting policy;
6. Written discipline policy;
7. Written visitation policy;
8. Written health care policy;
9. Written restraint policy which shall include a description of all methods to be used;
10. Written description of the recreational program, and the manner in which staff are qualified and prepared to create, organize and supervise them;
11. Job descriptions;
12. Written volunteer policies;
13. Written confidentiality policy;
14. Written policy for the use of locked isolation;
15. Written instructions for fire and other emergency evacuations;
16. Written description of the agency’s religious requirements and practices; and
17. Written policies governing the use of psychotropic medication.
18. Proof that medical records are maintained for each child

**SPECIFIC TO MATERNITY CARE:**

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