

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;
- A copy of the board roster including the mailing address and place of employment of each member and a list of board officers;
- A copy of a current organizational chart to include name and position of all administrative and professional staff;
- 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
- \Box 2. Articles of incorporation;
- □ 3. Bylaws;
- ☐ 4. Written intake policy;
- \Box 5. Written child abuse and neglect reporting policy;
- ☐ 6. Written discipline policy;
- \Box 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