

FOSTER GROUP CARE LICENSING

APPENDIX

FOSTER GROUP CARE LICENSING

CONTENTS

	<u>Page</u>
Application for License or Certificate of Approval, Form 470-0723.....	1
Certificate of Inspection Fire Safety Rules, Regulations and Standards, Form H-9757.....	2
Annual Evaluation and Recommendation for Foster Group Care License, Form 470-0725 (SS-3208-3).....	3
Evaluation and Recommendation for Approval to Operate a Control Room, Form 470-0700 (SS-2209-3)	4
Evaluation and Recommendation for Approval to Operate a Locked Cottage, Form 470-0701 (SS-2210-3)	5
Evaluation and Recommendation for Approval to Use Mechanical Restraints, Form 470-0703 (SS-2212-3)	7
Department of Public Safety Check, Form SS-2203.....	10
Request for Child and Dependent Adult Abuse Information, Form 470-0643 (SS-1606-0)	11
Recommendation for Denial or Revocation of a Foster Group Care Facility License, Form 470-0711 (SS-2308-3).....	13
Appeal Process Regarding Denial, Revocation or Suspension of a Foster Group Care Application or License.....	15
Adverse Action Chart	17
Approved Potable Water Testing Laboratories in Iowa	18
Certificate of License, Form SS-2305-3	22
Notice of Action, Form 470-0728.....	23

FOSTER GROUP CARE LICENSING

APPLICATION FOR LICENSE OR CERTIFICATE OF APPROVAL, FORM SS-3105-0

This form is to be used in making application for a license to operate a foster group care facility.

When Prepared

If the applicant has never had a license, the application should be made out as soon as a definite decision is reached to operate a foster group care facility. If an applicant wishes to renew a license, the application should be submitted between 30 and 90 days prior to expiration of present certificate.

By Whom Prepared

Person or persons applying for a license.

Number of Copies

Three.

Specific Instructions

The application form is sent to the facility upon request. The application is to be signed by the chairman of the Board of Directors or designated person, or by the owner or co-owners of the facility.

Disposition

The white and yellow copies of the completed application are sent to the Bureau of Adult, Children and Family Services. The white copy will be forwarded to the licensing manager by the Bureau of Adult, Children and Family Services. The applicant retains the pink copy for the facility's records.

FOSTER GROUP CARE LICENSING

CERTIFICATE OF INSPECTION FIRE SAFETY RULES, REGULATIONS AND STANDARDS,
H-9757

This form is used by the Fire Marshal when the application or reapplication for a license to operate a foster group care facility has been made.

When Prepared

At the time of application and annually thereafter.

By Whom Prepared

The State Fire Marshal or designee.

Number of Copies

Three

Specific Instructions

The inspection is to be signed by the State Fire Marshal or designated person, noting any difficulties on an attached sheet of paper.

Disposition

The inspection is sent to the Bureau of Children's Services, Department of Social Services. The applicant retains a copy for the facility's records, as may the State Fire Marshal or his designee.

FOSTER GROUP CARE LICENSINGANNUAL EVALUATION AND RECOMMENDATION FOR FOSTER GROUP CARE LICENSE,
FORM SS-3208-3

Form SS-3208-3 is used in making the initial and annual evaluation for the recommendation of a license to operate a community residential facility, a comprehensive residential facility, a community residential facility for mentally retarded children, or a comprehensive residential facility for mentally retarded children.

When Prepared

When all information has been submitted to the Bureau of Adult, Children and Family Services for an original license or a renewal.

By Whom Prepared

Licensing manager.

Number of Copies

One.

Specific Instructions

The recommendation shall be signed by the licensing manager of the Iowa Department of Inspections and Appeals and reviewed and approved or disapproved by the chief of the DHS Bureau of Adult, Children and Family Services or the chief's designee.

Disposition

The completed form is sent to the Bureau of Adult, Children and Family Services, which makes photocopies. The original is returned to the agency. A copy is sent to the licensing manager and the district office for the district in which the facility is located. The Bureau of Adult, Children and Family Services retains a copy for the records.

FOSTER GROUP CARE LICENSINGEVALUATION AND RECOMMENDATION TO OPERATE A CONTROL ROOM, FORM SS-2209-3

Form SS-2209-3 is used to evaluate a foster group care facility's request to operate a control room.

When Prepared

When an applicant for a comprehensive residential facility, comprehensive residential facility for mentally retarded children or detention home wishes to operate a control room, and at each subsequent licensing renewal.

By Whom Prepared

The licensing worker and the executive director of the facility.

Number of Copies

One.

Specific Instructions

The licensing worker completes the checklist by placing an "X" in the appropriate column. The executive director of the facility completes the commitment section including signature and date. The licensing worker signs and dates the form.

Disposition

The completed form is sent with form SS-3208, Annual Evaluation and Recommendation for Foster Group Care License, to the Bureau of Adult, Children and Family Services, which makes photocopies. One copy is returned to the agency. A copy is sent to the licensing manager and the district office for the district in which the facility is located. The Bureau of Adult, Children and Family Services retains the original copy for the records.

FOSTER GROUP CARE LICENSING

EVALUATION AND RECOMMENDATION TO OPERATE A LOCKED COTTAGE, FORM SS-2210-3

Form SS-2210-3 is used to evaluate a foster group care facility's request to operate a locked cottage.

When Prepared

When an applicant for a comprehensive residential facility, comprehensive residential facility for mentally retarded children or detention home wishes to operate a locked cottage; and at each subsequent licensing renewal.

By Whom Prepared

The licensing worker and the executive director of the facility.

Number of Copies

One.

Specific Instructions

The licensing worker completes the checklist by placing an "X" in the appropriate column. The executive director of the facility completes the commitment section including signature and date. The licensing worker signs and dates the form.

Disposition

The completed form is sent with SS-3208, Annual Evaluation and Recommendation for Foster Group Care License, to the Bureau of Adult, Children and Family Services which makes photocopies. One copy is returned to the agency. Copies are also sent to the licensing manager and the district office for the district in which the facility is located. The Bureau of Adult, Children and Family Services retains the original for the records.

FOSTER GROUP CARE LICENSING

Page 6 is reserved for future use.

FOSTER GROUP CARE LICENSING

EVALUATION AND RECOMMENDATION TO UTILIZE MECHANICAL RESTRAINTS, FORM SS-2212-3

Form SS-2212-3 is used to evaluate a foster group care facility's request to use mechanical restraints.

When Prepared

When an applicant for a comprehensive residential facility, comprehensive residential facility for mentally retarded children or detention home wishes to use mechanical restraints; and at each subsequent licensing renewal.

By Whom Prepared

The licensing worker and the executive director of the facility.

Number of Copies

One.

Specific Instructions

The licensing worker completes the checklist by placing an "X" in the appropriate column. The executive director of the facility completes the commitment section including signature and date. The licensing worker signs and dates the form.

Disposition

The completed form is sent with form SS-3208, Annual Evaluation and Recommendation for Foster Group Care License, to the Bureau of Adult, Children and Family Services which makes photocopies. One copy is returned to the agency. Copies are also sent to the licensing manager and the district office for the district in which the facility is located. The Bureau of Adult, Children and Family Services retains the original for the records.

FOSTER GROUP CARE LICENSING

Form SS-2202, *Foster Care Private Water Supply Survey*,
has been moved to [12-B-Appendix](#).

Form SS-2202 has been renumbered to 470-0693.

FOSTER GROUP CARE LICENSING

Form SS-2208, *Unsafe Water Sample Approval*,
has been moved to [12-B-Appendix](#).

Form SS-2208 has been renumbered to 470-0699 and
renamed to *Provisions for Alternate Water Supply*.

FOSTER GROUP CARE LICENSINGDEPARTMENT OF PUBLIC SAFETY CHECK, FORM SS-2203

This form and a statement acknowledging that a Public Safety Check will be conducted which is signed by the applicant are sent to the Bureau of Children's Services on all new applications for employment at a foster group care facility. (Refer to XII-C-98 for a discussion of this type of check.) Current employees may be checked if there is reason to believe that the employee has been convicted of a crime involving the mistreatment or exploitation of a child. A signed statement of acknowledgement must also accompany requests for checks on current employees.

When Prepared

At the time of initial application for employment or, in special cases, during employment.

By Whom Prepared

Facility staff

Number of Copies

Two

Specific Instructions

The form is self-explanatory. Since this is confidential information, only D.S.S. licensing staff and the foster group care facility staff have access to this information. The facility submits the request to the Bureau of Children's Services who verifies that it is appropriate and forwards it to the Department of Public Safety. Public Safety returns the completed form to Children's Services who in turn sends it to the group care facility.

Disposition

The original of Form SS-2203 and the signed statement of acknowledgement are sent to the Bureau of Children's Services and a copy of SS-2203 is maintained by the facility until the original is returned by the Bureau of Children's Services. The signed original is placed in the applicant's record and the copy is destroyed.

FOSTER GROUP CARE LICENSINGREQUEST FOR CHILD ABUSE INFORMATION, FORM SS-1606-0

This form is provided for authorized persons to request information from the Central Abuse Registry.

When Prepared

When a licensed foster group care facility is checking with the Central Child Abuse Registry for all new temporary or probationary staff prior to permanent hiring. Refer to XII-C-99 for guidelines.

By Whom Prepared

Staff of the licensed foster group care facility; staff of local or district offices; staff of the Central Abuse Registry.

Number of Copies

Three.

Specific Instructions

A separate form must be completed for each family about which information is requested.

Part A of the form is completed by the foster group care staff person filing the request. When Part A is completed, the form is sent to the local or district office of the Department.

Part B of the form is completed by the local or district office, indicating the method used to verify the requestor's identify, e.g., positive voice identification (when emergency Registry approval has been given by phone), positive visual identification, positive signature identification. When Part B is completed by the local or district office, it is sent to Central Abuse Registry, Hoover State Office Building, Fifth Floor, Des Moines, IA 50319.

Part C of the form is completed by Registry personnel and returned to the local or district office from which it originated.

Disposition

Upon approval or denial of the request, the Registry returns the form to the local or district office, keeping a copy when necessary to record the dissemination of information. The local or district office retains one copy for its records and sends one copy to the requestor. These copies are subject to expungement requirements.

FOSTER GROUP CARE LICENSING

Form SS-2207, *Recommendation for Provisional License*,
has been moved to [12-B-Appendix](#).

Form SS-2207 has been renumbered to 470-0698.

FOSTER GROUP CARE LICENSINGRECOMMENDATION FOR DENIAL OR REVOCATION OF A FOSTER GROUP CARE FACILITY
LICENSE, FORM SS-2308-3

This form is submitted to the Director of the Division of Community Programs whenever a licensing worker is recommending denial of an application or reapplication or revocation of a license. (Refer to XII-C-17-21 for a discussion of denial of a license and XII-C-21-26 for revocation of a license).

When Prepared

Whenever a denial or revocation of a license is being recommended.

By Whom Prepared

Licensing worker completes all but the "Licensing Decision". The Division Director completes this section.

Number of Copies

Two

Specific Instructions

The licensing worker should indicate all reasons for the denial of an application or reapplication or revocation of the license. Supporting data should be attached to this form when it is submitted.

Disposition

The original and a copy are submitted to the Bureau of Children's Services and a copy retained by the licensing worker until the original is returned with a licensing decision.

FOSTER GROUP CARE LICENSING

Form SS-2307-3, *Recommendation for Suspension of a License*,
has been moved to [12-B-Appendix](#).

Form SS-2307-3 has been renumbered to 470-0710.

FOSTER GROUP CARE LICENSINGAPPEAL PROCESS REGARDING THE DENIAL, REVOCATION OR SUSPENSION OF A FOSTER GROUP CARE APPLICATION OR LICENSE (Numbered sections correspond to areas on "Adverse Action Chart")

1. Whenever a foster group care license is denied, revoked or suspended, the applicant or licensee has the right to appeal the decision if they believe the licensing decision was based on incorrect information or that the licensing rules were incorrectly applied to them.

Effective Period of the License

2. If an appeal is filed within thirty days of the date of notice of decision, the license remains in effect until the appeal process is completed for a denial of a reapplication or a revocation of a license. For the denial of a new application, the license was never in effect. For a suspension, the license is not in effect during the suspension.
3. If no appeal is filed within thirty days of the date of notice of decision, the license is considered denied or revoked effective thirty days after the notice of decision. For the denial of a new application, the license was never in effect. For suspensions, the license is not in effect during the suspension.

Decision to Hear Appeal

4. If an appeal is filed within thirty days of the date of the notice of decision, a hearing officer from the Department of Social Services Appeals and Fair Hearings Office decides whether or not the appeal is appropriate and should be heard. If the appeal is based on the appellant's belief that the information on which the licensing decision was based was incorrect or that the licensing rules were incorrectly applied to the appellant, the appeal is appropriate and shall be heard.
5. If the appeal is filed more than thirty days but less than ninety days after the date of the notice of decision, the Commissioner of the Department of Social Services has discretion in deciding whether or not to hear the appeal.
6. If an appeal is not filed within ninety days of the date of the notice of decision, the appeal is not heard.

Hearing of the Appeal

7. If the hearing officer decides the appeal is appropriate or the Commissioner decides the appeal should be heard, a hearing officer shall hear the appeal and formulate a proposed decision.

FOSTER GROUP CARE LICENSINGAPPEAL PROCESS REGARDING THE DENIAL, REVOCATION OR SUSPENSION OF A FOSTER GROUP CARE APPLICATION OR LICENSE (Cont'd)Hearing of the Appeal (Cont'd)

The hearing officer's proposed decision may:

- Uphold the Department's decision
- Modify the Department's decision
- Reverse the Department's decision

Dissatisfaction with the Proposed Decision

8. If the appellant is dissatisfied with the proposed decision, the appellant may request a review of the proposed decision within ten days of the proposed decision to the Commissioner. Such appeals shall be reviewed by the Commissioner.
9. If the Department's Appeals Advisory Committee is dissatisfied with the proposed decision, this Committee may request a review within ten days of the date of the proposed decision to the Commissioner. The Commissioner has the option of choosing whether or not to review the proposed decision.
10. If a request for review is not made within ten days of the date of the proposed decision or if the Commissioner chooses not to review the proposed decision as requested by the Appeals Advisory Committee, the proposed decision becomes final and is effective ten days after the date of the proposed decision.

Commissioner's Review

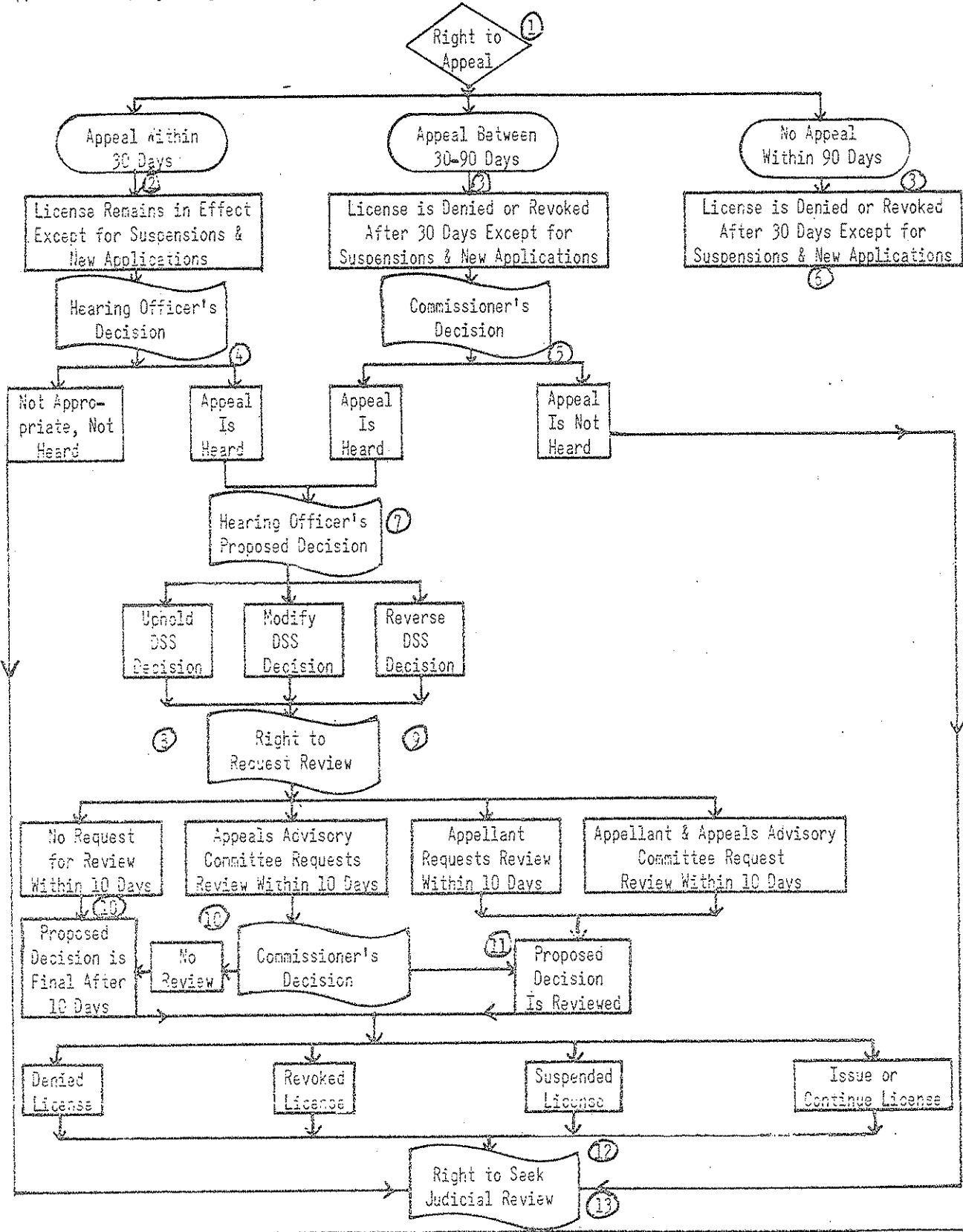
11. If the appellant appeals the proposed decision or the Commissioner chooses to review at the request of the Appeals Advisory Committee, the Commissioner may deny, revoke, suspend, issue or continue the license. The effective date of such action is the date of the Commissioner's decision.

Additional Appeal Option - Judicial Review

12. When the appellant has exhausted the appeals options of the Department of Social Services, the appellant may request judicial review of the licensing decision.
13. If the client seeks judicial review, the licensing worker shall immediately notify the Appeals and Fair Hearings Office, the Attorney General's Office and the Bureau of Children's Service so that they may prepare for the judicial review.

ADVERSE ACTION CHART

Appeal Process Regarding the Denial, Revocation or Suspension of a Foster Family Home Application or License



FOSTER GROUP CARE LICENSINGApproved Potable Water Testing Laboratories in Iowa
(Revised - September 30, 1980)

<u>LABORATORY</u>	<u>PERSONNEL APPROVED</u>	<u>APPROVED ANALYTICAL PARAMETERS</u>	<u>DATE OF LAST SURVEY</u>
Municipal Water Plant 500 N. 3rd St., Box 786 Burlington 52601 Mgr. Greg Johnson 319/752-7611	Carl Stonoff Robin Bacher	MTF	5/79
Serco Laboratories Corning Division Box 625, 1922 Main St. Cedar Falls 50613 Pres. Robert George 319/277-2401	Cheryl Wilson Audrey Elsamiller Marge Kloster Robert George	inorganics MF MTF	10/78
Sanitation Labs No. 1 Twixt-Town Rd., NE Cedar Rapids 52401 Mgr. Nadin Drennan 319/377-8285	Beth Collins Roger Westercamp Carl Tipton Michael Blin	MTF NO ₃	6/80
Linn County Health Dept. 751 Center Pt. Rd., NE Cedar Rapids 52402 Dir. Al Ahern 319/364-0532	Sam Dronebarger Dennie Hester Jeffrey Lake Charlene Wharton	MTF MF NO ₃	6/80
Municipal Water Plant Box 309, 2000 N 25th St. Council Bluffs Supt. Jim Peters 712/328-5919	John Smith	MF	6/79
Municipal WWTP 2606 S Concord St. Davenport Supt. Jim Resnick 319/326-7932	Bill Kenney Julie Sievers Tammi Bednaric	MF, Barium Cadmium, Chromium NO ₃ , Lead, Mercury	6/80
Iowa Dept. of Agriculture Lab. Des Moines 50319 Supv. Marie Barclay 515/281-5861	James Nadig Sixto J. Paron Marie Barclay Pat Stezel Mary Wilson	MF NO ₃	12/78

FOSTER GROUP CARE LICENSING

<u>LABORATORY</u>	<u>PERSONNEL APPROVED</u>	<u>APPROVED ANALYTICAL PARAMETERS</u>	<u>DATE OF LAST SURVEY</u>
Municipal Water Plant Box 386 Ft. Madison 52626 Supt. Dave Hotop 319/372-1062	Roger Higgins Doug Drummey Don Russell Scott & Allen Slee	MTF	10/79
University Hygienic Lab. University of Iowa Iowa City 52242 Dir. Dr. W.J. Haulser, Jr.	Gary Robertson John Kempf	MTF, MF, inorganic, organic, radiologicals	4/79
Municipal Water Plant 415 Blondeau St. Keokuk 52632 Mgr. Leon Lamer 319/524-5285	Joe Samuels Chester Star Greg Akers John Boyle	MTF	5/79
Manchester Sanitation Unit Milk Lab. Box 69, 310 E. Main St. Manchester 52057 Mgr. Dale Cooper 319/927-3212	John Schechtman Dorothy Lucas Marilyn Feldman Bea Beasley	MF	8/79
Manchester Labs., Inc. 105½ North Franklin Manchester 52057 Lawrence Stookey, Suprv. 319/927-5115	Lawrence Stookey	Arsenic, Barium, Cadmium, Chromium, Silver Fluoride	11/79
North Central Professional Laboratories 520 S. Pierce, Box 1554 Mason City 50401 Dir. Fred Koelewyn 515/423-3826	Fred Koelewyn	MF, Cadmium, Chromium, Silver, Fluoride, Arsenic, Barium, Lead, Mercury, Nitrate	4/80
Minnesota Valley Testing Nevada 50201 Mgr. Neil Schreyer 515/382-5486	Neil Schreyer Marianne Michael Donna Baker Mary Weiland Esther Stowe Sharon Stowe	Barium, MF, Cadmium, NO ₃ Chromium, Lead	9/79

FOSTER GROUP CARE LICENSING

<u>LABORATORY</u>	<u>PERSONNEL APPROVED</u>	<u>APPROVED ANALYTICAL PARAMETERS</u>	<u>DATE OF LAST SURVEY</u>
Municipal Water Plant 310 S. Wapello St. Ottumwa 52501 Mgr. Ernie Myers 515/684-4606	Clell Kirk LaVern Long	MTF	10/79
Municipal Health Dept. 411 - 7th St. Sioux City 51101 Dir. Tom Carrothers 712/279-6123	Den Weakly	MTF MF	5/79
CSL Labs. 1711 N. Lake Ave. Storm Lake 50588 712/732-6718	Brent Mangold Julie Mathews	MF	5/80
Waterloo Water Works Lab. Box 27 Waterloo 50705 Supt. Chuck Middleton 319/291-4394	Ralph Sander John Halbach Ann Hamman Roseann Cory	MTF	9/78

NON-RESIDENT LABORATORIES - RECIPROCALLY APPROVED

Davy Water Quality Lab 419 S. 3rd St. LaCrosse, WI 54601 Dir. Paul Harris 608/782-2012	Paul Harris Dan Armstrong	MF MTF	7/80
Woodsen-Tenent Environmental Testing Lab 345 Adams Memphis, TN 38101 Dir. Dr. WC Hung 901/525-6333	Dr. George WC Hung Nicole S. Mochow David P. Cooper Thomas A. Kinard Richard Utley	inorganic, organics	4/79
Beling Labs. 16th St. & 10th Ave. Moline, IL 61265 309/762-5554	Paul A. Lang Rob Schab	MF	9/78

FOSTER GROUP CARE LICENSING

<u>LABORATORY</u>	<u>PERSONNEL APPROVED</u>	<u>APPROVED ANALYTICAL PARAMETERS</u>	<u>DATE OF LAST SURVEY</u>
Utility Consultants 1621 Grant St., Box 206 Unionville, MO 63565 Carol Irelan, Lab Suprv. 816/947-3316	Ed Moss Carol Irelan Diana Durbin	MF	11/77
Minnesota Valley Testing Labs. New Ulm, MN 56073 Dir. Thomas R. Berg, Lab Director 507/354-8517	Thomas R. Berg Dennis Gulden	Arsenic, Barium, Cadmium, Chromium, Lead, Mercury, Silver Selenium	10/79

Parameter Key

- A. Bacteria
 - 1. MF = Membrane Filter
 - 2. MFT = Multiple Tube Fermentation
- B. SPC = Standard Plate Count
- C. F = Fluoride
- D. NO₃ = Nitrate

FOSTER GROUP CARE LICENSINGCERTIFICATE OF LICENSE, FORM SS-2305-3

This license to operate a foster group care facility is awarded upon completion of the licensing requirements.

When Prepared

The license is completed only after the application has been approved by the chief of the Bureau of Adult, Children and Family Services.

By Whom Prepared

Bureau of Adult, Children and Family Services staff.

Number of Copies

One.

Specific Instructions

For community residential facilities, community residential facilities for mentally retarded children and private juvenile shelter care homes, enter "N/A" for each special provision. These facilities are not allowed to use these forms of restraint.

For comprehensive residential facilities, comprehensive residential facilities for mentally retarded children and juvenile detention homes, enter a "Yes" or "No" depending on whether the special form of restraint has been approved.

The license shall be signed by the chief of the Bureau of Adult, Children and Family Services. A gold seal is affixed indicating (1) the date of expiration and (2) provisional status, if any.

Disposition

The license is sent to the facility along with civil rights statement if this is a new license. The license shall be displayed in a conspicuous place on the premises of the facility.

Renewal

Only a gold seal is mailed out after the first year if there have been no changes in the license provisions.

FOSTER GROUP CARE LICENSINGNOTICE OF ACTION, FORM SS-3307

Form SS-3307 informs the facility and Purchase of Service staff of the action the Department has taken on the facility's application.

When Prepared

The notification is completed after the certificate of license is signed.

By Whom Prepared

Bureau of Adult, Children and Family Services staff.

Number of Copies

Four (minimum).

Specific Instructions

Special provisions may include approval to operate a control room, to operate a locked cottage or to use mechanical or chemical restraints. Only comprehensive residential facilities, comprehensive residential facilities for mentally retarded children and private juvenile detention homes may be approved for these special provisions.

The form shall be signed by the chief of the Bureau of Adult, Children and Family Services.

Disposition

The original is sent to the facility (or the parent agency if there is more than one facility).

Copies shall be sent to the following:

1. The licensing and certification manager who prepared the evaluation and recommendation for the license.
2. The purchase of service manager for the districts involved.
3. The facility record retained in the Bureau of Adult, Children and Family Services.