

Full/TCM License Checklist

<input type="checkbox"/>	Full or TCM License application
<input type="checkbox"/>	<ul style="list-style-type: none"> • Certification of chief director of services/ bachelor's or higher degree in a field of Human services awarded by an accredited college or university. or • Work Experience in human services of 1,040 hrs of paid work experience substituted for higher education 15 undergraduate credit hrs/ atleast 8 full time semesters of satisfactory education/work experience <p>(TCMs will need the DD Case Managers Online assessment completed as well, if not done already)</p>
<input type="checkbox"/>	<ul style="list-style-type: none"> • At least 1 yr of experience in senior management-level positions w/ a licensed provider or • Atleast 2 yrs of case manager w/ supervisory authority over at least 2 other individuals providing direct services to persons or • At least 5 yrs of experience delivering direct care services to persons
<input type="checkbox"/>	3 letters of reference by individual knowledgeable both of the applicant and of the delivery services to persons
<input type="checkbox"/>	<p>Evidence of background check CDDOs, CSPs, and other affiliates shall complete check on all owners/employers within 2 months of ownership/hire date. Background checks shall at a minimum, include searches for information from the following sources</p> <ol style="list-style-type: none"> SRS – APS Registry SRS – CPS Registry KDOA- KS nurse Aide Registry KBI- Criminal history record check KDADS- ANE Findings
<input type="checkbox"/>	Written Policy and Procedures must include applicable Statues and Regulations to comply with the requirements of state regulations of Article 63
<input type="checkbox"/>	Written Business Plan
<input type="checkbox"/>	Written Financial Plan
<input type="checkbox"/>	Copies of forms agency will use regarding providing services
<input type="checkbox"/>	Comply w/ both State Fire Marshal and local codes http://www.ksfm.ks.gov/forms-regulations/facilities
<input type="checkbox"/>	First aid and CPR certification

*****Note- Applicants who have co-owners/VPs/COO's will need to submit the resume, background check, 3 letters of references individually.**

All applicants will need to submit an application and all required documents together. Failure to provide required documentation may cause a delay in the licensing process. If you have any questions please contact, KDADS 785-296-4740. To submit your application you may mail to:

KDADS
Attn: Sam Phrakonekham
503 S Kansas Avenue
Topeka, KS 66604
Or
Fax to (785) 296-0256

Or email to sam.phrakonekham@kdads.ks.gov.