



Metro Support Services, Inc.
Phone: 720-872-2730

Qualified Adult Foster Care Professional REQUIREMENTS & CONTRACT CHECKLIST

Instructions: Please complete the application packet and send it with copies of items listed below to MSS. If more than one adult in the household plans to provide care to the Individual, each adult must complete an application packet and provide the information listed below. **THIS CHECKLIST IS YOUR GUIDE FOR THE REQUIREMENTS WE NEED. PLEASE COMPILE THE LISTED ITEMS AND SUBMIT THE CERTIFICATES, NOT THIS FORM. Submitting this Form is not proof of certifications. Please remit certifications themselves.**

The following training certifications are required.

All required items must be completed prior to beginning QAFCP services for the Individual.

- Scan documents as PDF (adobe) no pictures! **No JPG files or screenshots!**
- **Please scan multiple page documents in their entirety and save all pages as one document.**
- Each certification should be attached in the email to MSS as a separate document.

PLEASE SUBMIT THE \$60 ACTIVATION FEE FOR A RELIAS USER ACCOUNT TO METRO SUPPORT

Name: _____

Update Date: _____

PLEASE FILL OUT THE FORM

✓	Contractual Requirements	Location	Frequency	Expires
	MSS Application	Form available on MSS website	One time only	N/A
	(2) Release forms for Professional References	Form available on MSS website	One time only	N/A
	Person Specific Training	Schedule with MSS staff Sign Protocols / Complete PST Form	One time only	N/A
	Social Security Card		One time only	N/A
	Driver's License		At each expiration	
	Auto Insurance		At each expiration	
	Home Owner's / Renter's Insurance		Annually	
	Release for Background Check	Form available on MSS website	Every 18 Months	
	Release for CAPS Check	Form available on MSS website	One time only	
	DBA (Trade Name)	Link for Trade Name on MSS website	At each expiration/ Annually	
	Professional Liability Insurance	Link for Insurance App on MSS website	Annually	
	Vehicle Safety Inspection	Form available on MSS website (completed by licensed mechanic)	Annually	
	HUD Inspection	Schedule with MSS staff for 1 st one State of CO to perform subsequently	Every 18 Months	

Qualified Adult Foster Care Professional REQUIREMENTS & CONTRACT CHECKLIST

Name: _____

Update Date: _____

✓	Training	Location	Frequency	Expires
	Medication Administration (QMAP or Full Med)	(4-part training): -Relias: “Medication Management for IDD- part 1-4” -In person or virtual practicum with agency nurse	One time only	
	Medication Admin Refresher	(3-part training): -Relias: “Medication Management for IDD- part 2-4”	Every 3 years	
	Challenging Behaviors <i>(TCI/CAIT, CPI or MANDT also accepted)</i>	Relias: “Providing Support for Challenging Behavior”	Annually	
	Mistreatment	(2-part training): -Relias: “Abuse & Neglect of Individuals with IDD” -Relias: “Supporting Client Rights for Paraprofessionals in Behavioral Health”	Every 2 years	
	CPR & First Aid	Online from American Heart Association OR National CPR Foundation	Every 2 years	
	Incident Reporting	(2-part training): -Relias: “Incident Reporting in Behavioral Health” -Relias: “Guidelines for Documentation in IDD”	Every 2 years	
	HIPAA	Relias Essentials of HIPAA <i>REL-PAC-0-ESSH</i>	Every 2 years	
	OSHA/ Bloodborne Pathogens	Relias: “Infection Control: Essential Principles”	Every 2 years	
	Personal Needs	Video Class available on MSS website. Test in Relias. This class is AGENCY SPECIFIC to MSS	Every 2 years	
	Epilepsy	Relias: “Healthcare Needs for People with IDD: Seizures”	Every 5 years	
	Fire Safety	Relias: “Fire Safety; The Basics”	Every 2 years	
	Person Centered Planning	Relias: “Person Centered Planning for Individuals with Developmental Disabilities”	Every 5 years	
	Nutrition	Relias: “Supporting Healthy Eating and Exercise”	One time only	
	Have a Relias account with a different agency?	If you have a Relias account with another agency, MSS will provide you a list of codes to find the above as electives that you can assign to yourself.		