



Dear Prospective Youth Care Facility Provider:

Thank you for your interest in becoming a licensed youth care provider. This letter is intended to guide you through the licensing process.

The following items must be completed and submitted to initiate the licensing process:

- A completed license application with the appropriate fee. The online licensure application portal can be located at:  
<https://dphhs.mt.gov/qad/Licensure/HealthCareFacilityLicensure/lbfacilityapplications/youthcarefacility>
- A floor plan of the facility documenting the size of all rooms and spaces utilized by the residents. This may be hand drawn as long as dimensions are included. If the bedroom has any built-in obstructions, such as a closet or bookcase, measurements are made from the front surface, not from the back. Door-swing areas are not included in the available square footage of the room.
- Local Building Code approval. If your facility is new construction, please submit the Certificate of Occupancy, issued by the local or State building code authority.
- State Fire Marshal or designee certification. Please refer to the State Fire Marshall's website at <https://dojmt.gov/enforcement/investigations-bureau/fire-prevention> and contact the Fire Marshal for your area to determine who will conduct your fire inspection.
- If the facility uses well water, please submit a copy of a Certified Laboratory Report of the well water for potability dated within the past year. Please contact your local County Health Department for assistance.
- If the facility is not on a city sewer system, please submit a copy of the local County Health Department septic system inspection. As a septic system is approved based on the number of bedrooms in a facility, the septic system inspection report must reflect the number of bedrooms (please note – number of bedrooms, not number of residents) in the facility applied for.
- Policies and Procedures, for review and approval. These must be submitted at least forty-five (45) days prior to the expected facility opening date. The rules describing the regulatory requirements for youth care facilities can be found at the web address above.

- Completion of FBI Fingerprint Criminal Background Checks Instate Protective Services Background Checks and Violent and Sexual Offender Background Checks for all the administrator; all staff; volunteer's or interns are required prior to hire.

The completion of such checks is the responsibility of the department. There is a fee for completion of the FBI Fingerprint Criminal Background Check. Instructions and paperwork require can be located under the New Hire Packet Office of Inspector General website:

<https://dphhs.mt.gov/qad/Licensure/HealthCareFacilityLicensure/lbfacilityapplications/privatealternativeadolescentresidentialoutdoorprogram>

Out of state background checks must be completed for the administrator; all staff; volunteer's or interns that have lived out of the State of Montana. The completion of such checks is the responsibility of the provider/employer. If you need assistance you may contact Gayl Kearns at the number listed below.

Fingerprint cards and New Hire Packets for employees must be mailed to:

Gayl Kearns, Administrative Assistant  
DPHHS/Office of Inspector General/Licensure Bureau  
2401 Colonial Drive, PO Box 202953  
Helena MT 59620-2953

In addition to submission of all the aforementioned information and documentation, you will need to schedule an onsite Physical Compliance inspection with the Bureau Construction Consultant. Review and approval of all required documentation, and approval by the Construction Consultant are required prior to the issuance of a license. You may not admit residents in your facility until you are licensed.

Upon submission and approval of all the aforementioned information and documentation and the final approval from the Bureau construction consultant, the Licensure Bureau will issue a six (6) month provisional license. A health care facility surveyor from the Licensure Bureau will conduct an on-site survey of the facility within the provisional license period to assess compliance with critical access hospital regulations. This visit is also an opportunity for the facility to obtain any clarification on those regulations.

If you have further questions, or questions during the licensure process, you may contact the Licensure Bureau at 406-444-2676.

Sincerely,

*Tara Wooten*

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