Residential Child Care Programs Report

Provider Organization: The Arc of Washington County

Licensing Agency: DHS
Contracting Agency(s): DHS, DJS

Program Administrator: Doug Ford, Jr.
Certification #: A00010
Exp. Date: 12/31/19

Type of Inspection: Quarterly

<table>
<thead>
<tr>
<th>Site Name</th>
<th>Gender</th>
<th>Age Range</th>
<th>License Capacity</th>
<th>DHS Contract Limit</th>
<th>License#/Exp. date</th>
<th>Date of site Inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bryan Place</td>
<td>Female</td>
<td>15-20</td>
<td>5</td>
<td>5</td>
<td>#00630 10/15/19</td>
<td>1/25/19</td>
</tr>
<tr>
<td>Marion Street</td>
<td>Female</td>
<td>10-17</td>
<td>4</td>
<td>4</td>
<td>#00310 10/15/19</td>
<td>1/25/19</td>
</tr>
<tr>
<td>Hamaker Lane</td>
<td>Male</td>
<td>10-17</td>
<td>4</td>
<td>4</td>
<td>#00060 10/15/19</td>
<td>1/25/19</td>
</tr>
<tr>
<td>St. Paul Road</td>
<td>Male</td>
<td>10-17</td>
<td>4</td>
<td>4</td>
<td>#00571 10/15/19</td>
<td>1/25/19</td>
</tr>
</tbody>
</table>

Inspection Summary

Number of Records Reviewed: Youth _5_ Staff _0_

Number of Interviews: Youth _0_ Staff _0_

Physical Plant Inspection: Approved

Current COMAR Violation: Yes _X_ No __

If Yes, list Cited Violation(s) below:

<table>
<thead>
<tr>
<th>Violation(s)</th>
<th>Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>14.31.06.17 B</td>
<td>1/5 youth records did not have referral material</td>
</tr>
<tr>
<td>14.31.06.17 B</td>
<td>1/5 youth records did not have psychological/psychiatric assessment</td>
</tr>
</tbody>
</table>

Corrective Action Plan: Yes _X_ No __
If yes, date of CAP: 1/25/19

Any Violations During Mid or Re-Licensure Periods: Yes ___ No _X_
If Yes See Report(s) Date(s): N/A

Complaint Outcome: N/A

Current Status of License: Continued

Licensing Coordinator: Jennifer McCabe
Date: 1/31/2019
Email: Jennifer.mccabe@maryland.gov

Program Manager: Andre’ Thomas
Date: 1/31/2019
Email: Andre.thomas@maryland.gov