CHILD PLACEMENT AGENCY REPORT

Provider Organization: Arrow Child and Family Ministries

Licensing Agency: Department of Human Services

Contracting Agency(s): DHS, DJS

Name of Chief Administrator: Rob Basler

Email: Rob.basler@arrow.org

License Type: Treatment Foster Care

Type of Inspection: Quarterly

<table>
<thead>
<tr>
<th>Name and Address of CPA Office</th>
<th>License Capacity</th>
<th>DHS Contract Limit</th>
<th>Census by Placing Agency</th>
<th>License#/Exp. date</th>
<th>Date of site Inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arrow Child and Family Ministries TFC 1605 Cromwell Bridge Road Baltimore, Maryland 21234</td>
<td>unlimited</td>
<td>80</td>
<td>DHS 55 DJS 1</td>
<td># 00224/ 7/15/19</td>
<td>10/30/18</td>
</tr>
<tr>
<td>Arrow Child &amp; Family Ministries TFC 116-18 West Main Street, Suite 101 Salisbury, Maryland 21801</td>
<td>unlimited</td>
<td>80</td>
<td>DHS 7 DJS 0</td>
<td>#00327/ 7/15/19</td>
<td>10/31/18</td>
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Inspection Summary

Number of Records Reviewed: Youth 16 Staff 0 Foster Parent 0 Adoptive Parent N/A

Number of Interviews: Youth 0 Staff 0 Foster Parent 0

CPA Office Inspection: Approved

Number of ILP Apartments Inspected: N/A

Number of Foster Homes Inspected: 0

Current COMAR Violation: Yes X No

If Yes, list Cited Violation(s) below:

<table>
<thead>
<tr>
<th>Violation(s)</th>
<th>Findings</th>
</tr>
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<tbody>
<tr>
<td>N/A</td>
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</table>

Corrective Action Plan: Yes X No

If yes, date of CAP:

Any Violations During Mid or Re-Licensure Periods: Yes X No

If Yes See Report(s) Date(s): N/A

Complaint Outcome: N/A

Current Status of License: Continued

Licensing Coordinator: Lisa Beeman Date: 11/1/18 Email: lisa.beeman@maryland.gov

Program Manager: Richard Berger Date: 11/1/18 Email: richard.berger@maryland.gov