CHILD PLACEMENT AGENCY REPORT

Provider Organization:  Hearts and Homes for Youth, Inc.

Licensing Agency:  Department of Human Resources  
Contracting Agency(s):  DHR, DJS

Name of Chief Administrator:  Jessica McKinnie  
Email:  jmckinnie@heartsandhomes.org

License Type:  TFC

Type of Inspection:  Quarterly Inspection

<table>
<thead>
<tr>
<th>Name and Address of CPA Office</th>
<th>License Capacity</th>
<th>DHR 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>Family Ties Treatment Foster Care</td>
<td>Unlimited</td>
<td>25</td>
<td>DHR 10</td>
<td>#00159</td>
<td>10/14/16</td>
</tr>
<tr>
<td>3919 National Drive, Suite 400</td>
<td></td>
<td></td>
<td>DJS 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Burtonsville, Maryland 20866</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Inspection Summary

Number of Records Reviewed:  Youth 5  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:  0  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>
</thead>
<tbody>
<tr>
<td>07.05.02.10 D(3)</td>
<td>5/5 foster parent progress notes did not reflect weekly or daily youth progress. Form does not capture the necessary data or time frames required by COMAR</td>
</tr>
</tbody>
</table>

Corrective Action Plan:  Yes X  No ___  If yes, date of CAP:  10/4/16

Complaint Outcome:  N/A

Current Status of License:  Continued

Licensing
Coordinator:  Michelle Goines  Date:  10/25/16  Email:  michelle.goines@maryland.gov

Program Manager:  Richard Berger  Date 10/25/16  Email:  richard.berger@maryland.gov