RESIDENTIAL CHILD CARE PROGRAMS REPORT

Provider Organization: Linwood Center, Inc.

Licensing Agency: DHS

Contracting Agency(s): DHS, Autism Waiver

Program Administrator: William Moss

Certification: A00025 Exp. Date: 12/31/19

Type of Inspection: Re-License

<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>Rodgers</td>
<td>Males</td>
<td>9 – 21 Yrs.</td>
<td>5</td>
<td>5</td>
<td>#00595 – 4/11/2019</td>
<td>4/3/2019</td>
</tr>
<tr>
<td>Rusty Rim</td>
<td>Males</td>
<td>9 – 21 Yrs.</td>
<td>4</td>
<td>5</td>
<td>#00560 – 4/11/2019</td>
<td>4/3/2019</td>
</tr>
<tr>
<td>Chantilla</td>
<td>M/F</td>
<td>9 – 21 Yrs.</td>
<td>2</td>
<td>5</td>
<td>#00392 – 4/11/2019</td>
<td>4/3/2019</td>
</tr>
</tbody>
</table>

Inspection Summary

Number of Records Reviewed: Youth 2 Staff 21

Number of Interviews: Youth 1 Staff 3

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>14.31.06.07 C (1)</td>
<td>Three of three houses had structural and up keep deficiencies.</td>
</tr>
</tbody>
</table>

Corrective Action Plan: Yes X No


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

If Yes See Report(s) Date(s):

Complaint Outcome: N/A

Current Status of License: Renewed

Re-Licensure – Linwood Center – April 2019 – Cont’d

Licensing Coordinator: Mignon H. Atkins Date: 4/8/2019 Email: Mignon.atkins@maryland.gov

Program Manager: Andre Thomas Date: 4/9/2019 Email: andre.thomas@maryland.gov