Child Placement Agency Report

Provider Organization: Umbrella Therapeutic Services, Inc.

Licensing Agency: DHS
Contracting Agency(s): DHS

Name of Chief Administrator: Wes Jones
Email: wjonesumbrella@yahoo.com

License Type: ILP
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>Umbrella Therapeutic Services, Inc. 4085 McDowell Lane Baltimore, Maryland 21227</td>
<td>Unlimited</td>
<td>10</td>
<td>10</td>
<td>#00452/12/20/2019</td>
<td>09/11/2018</td>
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</tbody>
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Inspection Summary

Number of Records Reviewed: Youth 4 Staff 0 Foster Parent NA Adoptive Parent N/A

Number of Interviews: Youth 0 Staff 0 Foster Parent N/A

CPA Office Inspection: Approved

Number of ILP Apartments Inspected: 0

Number of Foster Homes Inspected: N/A

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>07.05.04.04 A((6)(f)</td>
<td>Missing social security card in 1/4 records.</td>
</tr>
<tr>
<td>07.05.04.05 A(4)(i)</td>
<td>Missing court order in 1/4 records.</td>
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</tbody>
</table>

Corrective Action Plan: Yes X No

If yes, date of CAP: 09/11/2018

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

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

Complaint Outcome: NA

Current Status of License: Continued

Licensing Coordinator: Sherlema Ferguson Date: 9/11/18 Email: sherlema.ferguson@maryland.gov

Program Manager: Richard Berger Date: 9/11/18 Email: richard.berger@maryland.gov