CHILD PLACEMENT AGENCY REPORT

Provider Organization: Umbrella Therapeutic Services, Inc.

Licensing Agency: DHS

Contracting Agency(s): DHS

Name of Chief Administrator: Dr. Sheryl Neverson

Email: snicholsumbrella@yahoo.com

License Type: ILP

Type of Inspection: Martin Pollak Project

<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, MD 21227</td>
<td>Unlimited</td>
<td>10</td>
<td>9</td>
<td>#00452 12/20/2019</td>
<td>06/26/2019</td>
</tr>
</tbody>
</table>

Inspection Summary

Number of Records Reviewed: Youth 0 Staff 1 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: 2 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>07.05.01.09 D/07.05.01.13 B (3)</td>
<td>The required number of references was missing in 1/1 personnel record.</td>
</tr>
<tr>
<td>07.05.01.09 A (2)/07.05.01.13 B (2)</td>
<td>Maryland CPS clearance missing in 1/1 personnel record.</td>
</tr>
<tr>
<td>07.05.01.13 B-C</td>
<td>Physical exam missing in 1/1 personnel record.</td>
</tr>
<tr>
<td>07.05.01.10 E</td>
<td>Documentation of vehicle insurance missing in 1/1 personnel record.</td>
</tr>
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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 ____ No X

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

Complaint Outcome: Not Applicable

Current Status of License: Continued

Licensing Coordinator: Dante Scancella Date: 7/2/19 Email: dante.scancella@maryland.gov

Program Manager: Richard Berger Date 7/2/19 Email: richard.berger@maryland.gov