



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](mailto:snicholsumbrella@yahoo.com)

**License Type:** ILP

**Type of Inspection:** Quarterly

Name and Address of CPA Office	License Capacity	DHS Contract Limit	Census by Placing Agency	License#/ Exp. date	Date of site Inspection
Umbrella Therapeutic Services, Inc. 4085 McDowell Lane Baltimore, MD 21227	Unlimited	10	10	#00452 12/20/2019	05/21/2019

**Inspection Summary**

**Number of Records Reviewed:** Youth 1 Staff 3 Foster Parent NA Adoptive Parent NA

**Number of Interviews:** Youth 2 Staff 0 Foster Parent NA

**CPA Office Inspection:** Approved

**Number of ILP Apartments Inspected:** 5

**Number of Foster Homes Inspected:** NA

**Current COMAR Violation:** Yes X No     

**If Yes, list Cited Violation(s) below:**

Violation(s)	Findings
07.05.01.02 B (5)	Pre-placement assessment in 1/1 record was not completed by a licensed social worker/child placement worker.
07.05.01.13 A (1)	A job description was missing in 1/3 personnel records.
07.05.01.13 A (4)/07.05.01.16 A	Documentation of an orientation was missing in 1/3 personnel records.
07.05.04.07 C (1) (a-c)	Repairs needed in 2/5 apartments.

**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:** 5/23/19

**Email:** [dante.scancella@maryland.gov](mailto:dante.scancella@maryland.gov)

**Program Manager:** Richard Berger

**Date:** 5/23/19

**Email:** [richard.berger@maryland.gov](mailto:richard.berger@maryland.gov)