# South Dakota Department of Social Services CERTIFICATE OF LICENSE

## as a CHILD WELFARE AGENCY

This is to certify that Children's Home Society is hereby granted this license to conduct and maintain a Residential Treatment Program located at 24100 Rockerville Road in Rapid City, SD 57701 to provide care for a maximum of 53 children ages 4 to 14 years, for the period from July 1, 2020 to June 30, 2021.

This facility satisfactorily complies with requirements of the South Dakota Compiled Laws of 1967, South Dakota Department of Social Services. This license is subject to revocation for Sections 26-6-1 through 26-6-27 and the Child Care Standards as established by the reasonable cause as cited in SDCL 1967; Section 26-6-23. Issued this 8th day of July 2020.



License Number R 51

Kingama Wiasseler

Department of Social Services Child Protection Services 700 Governors Drive Pierre, S.D. 57501-2291 605-773-3227

## LICENSING RENEWAL STUDY RESIDENTIAL TREATMENT CENTERS ARSD 67:42:01, 67:42:08

| AGENCY NAME: |  |        | 1E:  | Black Hills Children's Home (R51)  |                 |  |
|--------------|--|--------|--|--|-----------------|--|
| DIRECTOR:    |  |        |  | Michelle Lavelle   |                 |  |
|              |  |        |  |  |                 |  |
| 1.           | Lice   | ensing | g Requirements - 67                                | 7:42:07:11.01, 67:42:08:01.01, SDCL 26-6-11, 42 CFR  | 441 Subpart D   |  |
|              | A.   | The    | following have bee                                 | n submitted to the Department:   | YES             | NO   |
|              |  | 1.     | Application materia                                | als for license.   |                 |  |
|              |  | 2.     | Documentation of                                   | need as per SDCL 26-6-11.  | N/A             | N  |
|              |  | 3.     | A copy of the b<br>Department of Hea               | ouilding plans (approved by the Fire Marshal and alth).  | N/A             |  |
|              |  | 4.     |  | verify the agency/facility is currently accredited by<br>oint Commission or making progress in pursuit of                |                 |  |
|              |  | 5.     |  | mpleted an annual attestation statement and/or been to verify they meet the requirements as a Psychiatric nent Facility. | <b>✓</b>        |  |
|              | B.   | age    |  | a part of the purchase of service contract with the  |                 |  |
|              | Cor  | mmer   | nts:   |  |                 |  |
|              | An application for licensure dated June 16, 2020 is on file in the licensing record. It of compliance with the Civil Rights Act of 1964. A copy of the current attestation st Operating Officer, Muriel Nelson and dated June 16, 2020, was submitted with the renewal and is on file in the licensing record.   |        |  |  | tatement signed | by Chief   |
| 2.           | Ane  | encv   | Responsibilities – SC                              | OCL 26-6-11  | YES             | NO   |
|              | A.   |        |  | ment needs of the organization are adequately met.   | ✓               | 113  |
|              | В.   |        |  | ent funds to meet the needs of the community.  |                 | Andrew Live, Management of the Control of the Contr |
|              |  |        | CONTRACTOR AND | she rands to meet the needs of the community.  | A               |  |
|              | Comments:  The reviewers found the Black Hills Children's Home facilities to be adequately furnished and maintained to provide for the needs of the residents it serves. Children's Home Society of South Dakota financial reports the include Black Hills Children's Home are submitted with the Sioux Falls Children's Home application for license renewal. The records indicate the availability of sufficient funds to meet the needs of the program. |        |  |  |                 | reports that<br>for license  |
| 3.           | Ins  | uran   | <u>ce</u> - 67:42:01:35                            |  | YES             | NO   |
|              | A.   |        | nicles used to transpurance.                       | port clients have appropriate passenger liability  | ✓               |  |
|              | В.   | The    | e agency carries pub                               | olic liability insurance.  | _               |  |
|              |  |        |  |  |                 |  |

### Comments:

Auto liability and commercial general liability insurance is purchased from Philadelphia Indemnity Insurance Company policy # PHPK2091520. Professional liability insurance is purchased from Tokio Marine Specialty Insurance Company policy# PPK2092208. A copy of the Certification of Liability Insurance verifying coverage through February 1, 2021 was submitted with the application materials.

| 4. | Acco                          | ountir                     | ng Systems - 67:42:01:34   | YES                                 | NO                            |  |  |
|----|-------------------------------|----------------------------|--|-------------------------------------|-------------------------------|--|--|
|    | Α.                            | An a                       | udit of the accounts has been done in the last year by a CPA.  | ✓                                   |                               |  |  |
|    | Com                           | nmen                       | ts:  | •                                   |                               |  |  |
|    | Child<br>subr<br>Soci<br>Eide | dren's<br>mitted<br>iety o | s Home Society of South Dakota financial audit reports that include Black with the Sioux Falls Children's Home application for license renewal. A f South Dakota's financial reports for the period ending June 30 <sup>th</sup> , 2019 a ly LLP, CPA's on October 23, 2019. A copy of the audit report, including policies, is on file in the licensing record. | An audit of Child<br>and 2018 was o | dren's Home ompleted by       |  |  |
| 5. | <u>Staf</u>                   | ff Qua                     | <u>llifications</u> - 67:42:08:02, 67:42:07:07   |                                     |                               |  |  |
|    | A.                            | Prog                       | ram Director   | YES                                 | NO                            |  |  |
|    |                               | 1.                         | Masters Degree in an accredited behavioral or social science area plus two years relevant alternative child care experience; or  | ✓                                   |                               |  |  |
|    |                               | 2.                         | Bachelor of Arts/Bachelor of Science in an accredited behavioral or social science area plus four year's relevant alternative child care experience.   | N/A                                 | w                             |  |  |
|    | Comments:                     |                            |  |                                     |                               |  |  |
|    | Pro                           | gram                       | Maseman, BS in Wellness Management and MS Counseling and Human Re<br>Director for Black Hills Children's Home. He has been employed by Ch<br>2002 and assumed his present position as Program Director in February of  | ildren's Home S                     | ment, is the<br>Society since |  |  |
|    | В.                            | Oth                        | er Staff   | YES                                 | NO                            |  |  |
|    |                               | 1.                         | At least eighteen years of age.  | ✓                                   |                               |  |  |
|    |                               | 2.                         | If under age twenty-one, is under direct supervision of an experienced child care staff; and 3 years older than any children supervised.   | ✓                                   |                               |  |  |
|    | Comments:                     |                            |  |                                     |                               |  |  |
|    | sub                           | mitte                      | staff, including their qualifications, employed at the time of application d with the application for license renewal. All staff for whom personnel one years of age or older.   | on for license records were re      | renewal was<br>viewed were    |  |  |
| 6. | <u>Sta</u>                    | ff/Chi                     | <u>ld Ratio</u> - 67:42:08:03  | YES                                 | NO                            |  |  |
|    | A.                            | 1:6                        | during waking hours.   | <b>✓</b>                            |                               |  |  |
|    | В.                            | 1:12                       | 2 in the building during sleeping hours.   | <b>✓</b>                            |                               |  |  |
|    | C.                            | One                        | e staff member present in each separate sleeping unit during sleeping  | S 01195500                          |                               |  |  |

|      | hou  | rs.   | ✓                |   |
|------|--|---|------------------|---|
| D.   | Arrangements made for substitute staff during vacations, illness, or off-duty time of regular staff. |   |                  |   |
| E.   | Cerl   | cified special ed teachers are employed (when appropriate).   | ✓                |   |
| F.   | prof   | visions are made for auxiliary staff members, i.e., mental health ressionals, physical therapist, and/or occupational therapist (when ropriate).                                    | ✓                | 40-   |
| G.   |  | ninimum of two adults are on the grounds at all times when children are sent.   | <b>/</b>         |   |
| H.   | app  | facility has a written plan to ensure that staff, law enforcement, or ropriate emergency responders are available at the center within a sonable time in the event of an emergency. | <b>✓</b>         | ***************************************   |
| Con  | nmer   | nts:  |                  |   |
|      |  | , day and overnight shift staffing schedule was submitted with the license r<br>ty is within staff to child ratio at all times.   | enewal applica   | ation indicated   |
| Per: | sonne  | el Records - 67:42:07:07, 67:42:07:08, 67:42:07:09; SDCL 26-6-14.11   |                  |   |
| A.   | Per  | sonnel records are maintained and contain the following:  | YES              | NO  |
|      | 1.   | Resume or application that includes educational background, personal, and employment history.   | <b>✓</b>         | Valence and the second state of the second  |
|      | 2.   | Job description.  | ✓                | 72.00   |
|      | 3.   | Annual performance appraisal.   | ✓                |   |
|      | 4.   | Verification of contact with at least three former employers or professional references if former employers not available.  | ✓                | 59,000 (140 may 100 00 00 000 100 may 100 00 00 00 00 00 00 00 00 00 00 00 00   |
|      | 5.   | Verification of screening for substantiated reports of child abuse or neglect.  | <b>✓</b>         | Samuel Control  |
|      | 6.   | Verification of submission of fingerprints to the DCI.  | <b>✓</b>         |   |
|      | 7.   | Verification of sex offender registry checks.   | ✓                | 200 - |
|      | 8.   | Verification of current certification in basic 1st aid and CPR.   | ✓                |   |
|      | 9.   | At least one official onsite designated to authorize the Reasonable and Prudent Parent Standard.  | <b>√</b>         |   |
| Tw   |  | nts:  personnel records were reviewed. Each record reviewed contained document above requirements.  | ntation to verif | y compliance  |
| 7020 | 71.50 NO. 110.00   | ce Training – 67:42:07:04, 67:42:08:04, 42 CFR 483.376  | YES<br>✓         | NO  |
| A.   | ine  | ere is a written plan for orientation and training for staff and volunteers.  |                  |   |

7.

8.

| В.   | Each employee has a documented record of an initial orientation to the center during their first month of employment that includes the facility's functions, services, community resources and specific job functions.   | <b>✓</b> |           |  |  |  |  |
|--|--|----------|-----------|--|--|--|--|
| C.   | Each employee has a documented record of a minimum of forty hours annual in-service training.  | <b>√</b> |           |  |  |  |  |
|  |  |          |           |  |  |  |  |
| D.   | Each employee receives in-service training during the first year of employment that includes all of the areas required in 67:42:07:04.   | <b>✓</b> |           |  |  |  |  |
| E.   | Training for all employees after the first year of employment is determined by an annual evaluation and is competency based.   | See      | Comments  |  |  |  |  |
| Con  | nments:  |          |           |  |  |  |  |
| Black Hills Children's Home uses an orientation checklist as an orientation plan and to document completion of the orientation to the facility by new staff. The orientation plan includes competency assessments in the areas of supervision, behavior management, safe crisis management and emergency procedures. The orientation plan appears to meet all of the requirements of licensing rule. Each personnel record reviewed contained documentation to verify the employee completed orientation during their first thirty days of employment. Annual in-service training for employees is broken down monthly and allots for 112 total hours of yearly training offered to employees. The in-service training appears to relate to all areas required for staff during the first year of employment. Personnel records for staff employed included documentation of staff attaining at least forty hours of in-service training during the last year. |  |          |           |  |  |  |  |
| em<br>em<br>per<br>for<br>bas  | It was the impression of the reviewer that the performance appraisal used by Black Hills Children's Home is well suited for use to assess staff competency in carrying out their job duties and training after the first year of employment appears to be competency based. It is the recommendation of the reviewer that the agency and employee identify areas where training is needed in the coming year based off the evaluation of the employee's performance and clearly identify the training to be received in the performance appraisal. Six records reviewed for employees employed more than a year did not contain a plan to provide for competency-based training based on an annual evaluation of the staff member's competencies. Please assure all personnel files contain a plan to provide for identify competency-based training based on an annual evaluation of the staff member's competencies to comply with ARSD 67:42:07:04. |          |           |  |  |  |  |
|  | orting Suspected Child Abuse or Neglect, Changes in Circumstances and ious Occurrences - 67:42:01:12, 67:42:07:15, 67:42:07:16, 42 CFR 483.374   | YES      | <u>NO</u> |  |  |  |  |
| A.   | The facility has a written procedure for handling and reporting suspected inhouse CA/N. It includes:   |          |           |  |  |  |  |
|  | <ol> <li>A definition of what constitutes CA/N;</li> </ol>   | ✓        | 2         |  |  |  |  |
|  | Immediate reporting to DSS or law enforcement;   | ✓        |           |  |  |  |  |
|  | <ol> <li>A procedure for assuring the incident will not recur pending the<br/>investigation;</li> </ol>  | <b>✓</b> |           |  |  |  |  |
|  | 4. A procedure for evaluating the continued employability of any staff member involved in an incident of CA/N.   | <b>✓</b> |           |  |  |  |  |
| В.   | Each employee has signed a statement acknowledging and understanding the reporting procedure.  | <b>✓</b> |           |  |  |  |  |
| C.   | C. The facility is aware of its need to report any changes of circumstances that may affect its licensed status.   |          |           |  |  |  |  |

9.

|     | D.   | and   | facility has written procedures for reporting serious occurrences to CPS SD Advocacy Services and to the parent or legal guardian within 24 rs after the serious occurrence.   | <b>✓</b>                   |   |
|-----|------|-------|--|----------------------------|---|
|     |      | 1.    | The death of a resident is reported to CMS by the close of business the day after the death.   | <b>✓</b>                   |   |
|     |      | 2.    | A copy of the report of a serious occurrence is retained in the resident's record.   | <b>✓</b>                   |   |
|     | Blac |       | nts:<br>Ils Children's Home written procedures for reporting suspected incidents of co<br>occurrences relate to the above requirements.  | child abuse and            | neglect and                             |
| 10. | Tre  | atme  | <u>nt</u> – 67:42:01:06, 67:42:01:01(7), 67:42:07:04:01, 67:42:07:29, 67:42:08:06, 67:42:08:07, 67:42:07:10, 67:42:01:21, 42 CRF 441 Su  | 01, 67:42:08:01<br>bpart D | .01,                                    |
|     | A.   | The   | re are written procedures relating to:   | YES                        | NO                                      |
|     |      | 1.    | Intake.  | ✓                          |   |
|     |      | 2.    | Treatment.   | ✓                          |   |
|     |      | 3.    | Discharge.   | ✓                          |   |
|     |      | 4.    | Discipline.  | ✓                          |   |
|     |      | 5.    | Confidentiality.   | ✓                          |   |
|     |      | 6.    | Health care of children.   | ✓                          |   |
|     |      | 7.    | Emergency procedures in case a child is injured.   | ✓                          | 23                                      |
|     |      | 8.    | The child's parent or guardian has signed and dated a statement that lists the specific policies covered as verification that the facility provided the required information.  | <b>✓</b>                   |   |
|     |      | 9.    | Public Law 113-183 (Reasonable and Prudent Parents Standard).  | 1                          |   |
|     |      | Con   | nments:  |                            | ***                                     |
|     |      | Blac  | ck Hills Children's Home written procedures relate to all of the above required<br>appliance with licensing rules.   | d areas that are           | e in                                    |
|     | В.   |       | ldren attend an on grounds school.   | ✓                          |   |
|     |      | Con   | nments:  |                            |   |
|     |      | Blac  | ck Hills Children's Home has an on-grounds school staffed as noted in Sect ds of children in care.   | ion 6 to meet t            | he education                            |
| C.  | Cas  | se re | cords are maintained and include the following:  |                            |   |
|     |      | 1.    | Face sheet/application form with identifying information.  | ✓                          | 2                                       |
|     |      | 2.    | Documentation to verify the child meets PRTF eligibility.  | ✓                          | *************************************** |
|     |      | 3.    | Treatment plans developed and signed by the treatment team that includes the child, parent or guardian if appropriate, facility staff working with the child, placing agency staff and those required by 42 CFR 441.156. | ₹                          |   |

| 4.  | Treatme                          | ent plans are established within fourteen days of placement.   | ✓        |  |
|-----|----------------------------------|--|----------|--|
| 5.  | psycholo<br>strength<br>discharg | ent plans are based on assessment of the child's medical, ogical, social, behavioral and developmental needs and is, projected length of stay, conditions for discharge with the plans to ensure continuity of care and reflect the need for the PRTF level. |          |  |
|     |                                  | _  | ✓        |  |
| 6.  | and the                          | ent plans contain treatment goals and objectives for the child<br>ir family with an integrated program of therapies, activities and<br>notes designed to meet the goals.   | ✓        |  |
| 7.  | Treatme<br>that incl             | ent plans include conditions for discharge, and discharge plan udes:   |          |  |
|     | a.                               | Projected date of discharge;   | ✓        |  |
|     | b.                               | Responsibilities of provider, child, family and placing agency.  | ✓        |  |
|     | c.                               | Transitional services to be provided and by whom;  | ✓        |  |
|     | d.                               | Crisis and emergency plans.  | ✓        |  |
|     | e.                               | Links with resources and preparation to navigate adult system if 16 or older.  | ✓        |  |
|     | f.                               | Aftercare services   | ✓        |  |
|     | g.                               | List of responsible persons; and   | ✓        |  |
|     | h.                               | Involvement of Tribe in aftercare planning if Native American.   | ✓        |  |
| 8.  |                                  | ent plan is reviewed at least every 30 days and a progress report placement agency.  | <b>✓</b> |  |
| 9.  | toward                           | ent plan is updated every three months to include progress achieving goals and amendments to the plan and sent to the ent agency (meets requirement for progress report).  | ✓        |  |
| 10. | Physica<br>admissi               | exam (twelve months prior to or thirty days following on).   | <b>✓</b> |  |
| 11. | Current                          | immunization record.   | ✓        |  |
| 12. | A signe                          | d authorization for medical care at the time of placement.   | ✓        |  |
| 13. | On-goir                          | g records of medical/dental/eye/hearing care.  | ✓        |  |
| Rec | ords are                         | kept in a locked file.   | ✓        |  |
|     |                                  | te compact administrator has been contacted before acceptance state child.   | N/A      |  |
| Sta | andard in                        | tion of utilization of the Reasonable and Prudent Parent<br>the treatment plan which is reviewed by facilities designee<br>to apply the standard.  | <b>✓</b> |  |

### Comments:

D. E.

F.

Eight records were reviewed for children in care and documentation was found in each to verify compliance with above licensing rules.

| 11. | Med        | dications - 67:42:07:19, 67:42:07:20, 67:42:07:22, 67:42:07:23   |                   |  |  |  |  |
|-----|------------|--|-------------------|--|--|--|--|
|     | A.         | The facility has written procedures relating to the storage and administration of medication which include:  | YES               | <u>NO</u>  |  |  |  |
|     |            | 1. Conditions under which medications may be given.  | ✓                 |  |  |  |  |
|     |            | 2. Procedures for documenting the administration of medication.  | ✓                 |  |  |  |  |
|     |            | <ol> <li>Procedures for immediately notifying the facility's nurse in cases of<br/>medication errors or drug reactions. The nurse assesses the situation<br/>and determines whether there is a need to report the incident to the<br/>attending physician.</li> </ol>  |                   |  |  |  |  |
|     |            | <ol> <li>Procedures for evaluating and recording each child's reactions to<br/>prescribed medication.</li> </ol>   |                   |  |  |  |  |
|     | В.         | A licensed nurse is responsible for administration of medications.   |                   | The same of the sa |  |  |  |
|     | C.         | Psychotropic drugs are prescribed by a MD, CNP or PA with ongoing quarterly follow-up.   | ✓                 |  |  |  |  |
|     | D.         | Medicine is kept in a locked cabinet.  |                   |  |  |  |  |
|     | E.         | A medication record is kept on each child.   |                   |  |  |  |  |
|     | Comments:  |  |                   |  |  |  |  |
|     | abo<br>pre | ck Hills Children's Home written procedures for storage and administration<br>ove requirements and are in compliance with licensing rules. All eight residual<br>scribed psychotropic medication and each contained documentation to verify a<br>scribing practitioner of the continued need for the medication. | lents' records re | eviewed were   |  |  |  |
| 12. |            | ergency Safety Interventions (ESI) - 67:42:07:24, 67:42:07:25, 67:42:07:26, 42:08:05, 42 CFR 483 Subpart G   | YES               | <u>NO</u>  |  |  |  |
|     | A.         | The facility has a written procedure relating to the use of ESI's that allows for use only to ensure safety of the child or others and by order of a physician or other licensed practitioner.   |                   |  |  |  |  |
|     | В.         | Use of ESI's is incorporated into the treatment plan.  | <b>✓</b>          |  |  |  |  |
|     | C.         | Placement agency/parent/guardian are informed of policies, give written approval for use of ESI's at the time of admission and are notified of use of ESI's as soon as possible.   |                   |  |  |  |  |
|     | D.         | Only qualified staff give and receive orders and monitor and provide assessments following ESI's.  | <b>-</b> ✓        |  |  |  |  |
|     | E.         | Trained clinical staff continually monitors children while involved in ESI's.  | ✓                 |  |  |  |  |
|     | F.         | ESI's do not exceed times allowed in orders.   | ✓                 |  |  |  |  |
|     | G.         | Required reports are completed following ESI's.  | <b>✓</b>          |  |  |  |  |
|     | Н.         | Staff involved in an ESI meets with the child involved to discuss the ESI, and   |                   | No.  |  |  |  |

|     |                     | with administrative starr, within 24 hours after use of the ESI.   | ✓              |   |  |
|-----|---------------------|--|----------------|---|--|
|     | I.                  | Medical treatment is provided for a resident injured during an ESI.  | ✓              |   |  |
|     | J.                  | Seclusion rooms meet the physical specifications of 67:42:07:25.   | N/A            |   |  |
|     | Blac<br>com<br>revi | nments:  ck Hills Children's Home written procedures for use of Emergency Safety upliance with licensing rules and federal requirements for a PRTF. Four incide ewed with all involving the use of restraint. Documentation was found in each in the above requirements. | ents of use of | an ESI were                             |  |
| 13. | Volu                | <u>unteers</u> - 67:42:07:14   | YES            | NO                                      |  |
|     | A.                  | Have a written job description with specific responsibilities.   | ✓              |   |  |
|     | В.                  | Supervised and evaluated by an experienced staff member.   | 1              |   |  |
|     | C.                  | Three documented unrelated references.   | ✓              |   |  |
|     | D.                  | Documented orientation.  | <b>✓</b>       |   |  |
|     | E.                  | Documented in-service training as per 67:42:07:04 if volunteer works thirty plus hours per week.   | N/A            |   |  |
|     | F.                  | Informed of obligation to report suspected CA/N.   | ✓              |   |  |
|     | G.                  | Verification of screening for substantiated reports of child abuse or neglect.   | ✓              |   |  |
|     | Н.                  | Verification of submission of fingerprints to the DCI.   | ✓              |   |  |
|     | I.                  | Verification of sex offender registry checks.  | <b>✓</b>       |   |  |
|     | (Same               | nments:<br>ck Hills Children's Home did not use volunteers in the last year.   |                |   |  |
| 14. | Phy                 | sical Facility - 67:42:07:11, 67:42:07:12  | YES            | NO                                      |  |
|     | A.                  | There is a current fire inspection.  | ✓              |   |  |
|     | В.                  | There is a current health inspection.  | <b>✓</b>       | X                                       |  |
|     | C.                  | A fire escape plan is posted.  | <b>✓</b>       |   |  |
|     | D.                  | A minimum of four fire drills are held annually.   | <b>✓</b>       | 3                                       |  |
|     | E.                  | Children of opposite genders over the age of six have separate sleeping facilities.  | <b>✓</b>       | Name and the second                     |  |
|     | F.                  | Sleeping children are monitored.   | <b>✓</b>       | *************************************** |  |
|     | G.                  | Each child has his own bed with linens, blankets and pillows.  | <b>-</b>       | **************************************  |  |
|     | Comments:           |  |                |   |  |

A copy of the current fire/health inspection dated July 9, 2020 is on file in the licensing record. A copy of the compliance plan and notation of work completed to be in compliance is also in the record.

| 15. | Nut   | <u>rition</u> - 67:42:07:13  | YES               | NO                          |
|-----|---|--|-------------------|-----------------------------|
|     | A.  | Meals are of sufficient quantity to meet children's nutritional needs.       | <b>-</b>          |                             |
|     | В.  | Arrangements are made for children with a special prescribed diet.           |                   |                             |
|     | Cor   | mments:  |                   |                             |
|     | Cor   | mments from staff and residents interviewed regarding meals served were gene | erally favorable. |                             |
| 16. | Rec   | commendations  |                   |                             |
|     | Black Hills Children's Home is found to be in substantial compliance with licensing rules for Resider Treatment Centers. Please refer to the body of this licensing study for comments and recommendati relating to In-service Training.                  |  |                   |                             |
|     | It is recommended that a satisfactory license be issued to operate Black Hills Children's Home as a Resider Treatment Center at 24100 S Rockerville Road, Rapid City, South Dakota to provide care for a maximum fifty-three youth ages four to fourteen. |  |                   |                             |
|     |   | Completed By: Kevin Kanta Program Specialist                                 |                   | 7/22/20                     |
|     |   | Kevin Kanta, Program Specialist  |                   | Date:                       |
|     |   | Date of On-Site Visit:   | 7/1/20            | Marine - Control - Incompre |