Licensed Child Caring Agency Site Visit Report
Residential Care

Licensee: Jackson County Juvenile Barriers 2 Bridges (B2B)
Executive Director: Eric Guyer
Program Manager: Megan McUne
County Commissioner Chair: Rick Dyer

Date of site visit: December 1, 2021
Licensing Coordinator: Robin DuVal, assisted by Todd Cooley

Other Regulatory or Accrediting Agencies: Oregon Youth Authority and Oregon Health Authority

Program Compliance: The program was found to be compliant or will be compliant with OAR 413-215-0001 to 413-215-0131, Licensing Umbrella Rules, and OAR 413-215-0501 to 413-215-0586, Licensing Residential Care Agencies Rules. Personnel records were reviewed and compliance with required background checks was documented for employees in all programs.

Program Description(s): 15 bed residential program serving adjudicated male youth ages 12-18 years of age. Barriers 2 Bridges (B2B) is a voluntary program in which youth and their families agree to enter when a youth has emotional and/or behavioral problems which cannot be adequately assessed while at home. B2B determines the level of the youth's need for services, develops, and implements an individual case plan, and provides rehabilitative services to further stabilize the behavior for successful transition back into the community.

Program type and services: BRS level 5 Intensive Residential. Provides BRS group and individual services, education, mental health, and addictions treatment.

Capacity and Age Range: 15, ages 10-20

Funding sources: Jackson County General Fund and Medicaid BRS

Contracts and sources for referrals:

Contracts: Lynn Greene LPC – Mental health counseling
Referrals: Jackson County Community Justice – Juvenile Department

Average length of stay: 6 months

Average daily population served: 8

Number of children served annually: 27

Use of seclusion or restraint: No. However, staff is trained in CPI with restraints that can be utilized in the event of an emergency.

Interviews: During the review, this licensor spoke with the Program Director, Program Supervisor, multiple staff and two youth.

Youth felt safe at the program and feels the program is helping them. They have regular contact with people on their approved contact list and time isn't restricted. Youth feel comfortable talking to any number of staff across shifts. The food doesn't taste the best but they have regular meals and snacks. Youth know that management is working on improving food quality. Youth report giving input on their treatment plans and feel listened to. Neither youth report any issues with getting medications as prescribed. School is going well and they prefer the smaller setting. Youth report the program does well at working with people and is family oriented. The least favorite aspect of the program is the food.

Two interviewed staff described the types and frequency of training at time of hire and ongoing. They have regular staff meetings, have daily contact with their immediate supervisor, and management is responsible to concerns made by staff. Both report staffing has been challenging, and they have been working extra shifts to cover, however the program is working on hiring. The food quality could improve as well as having better and more nutritious breakfast food. Neither staff physically intervene since the program changed to a policy of no hands on. Staff reported the program does well at integrating youth into society (out in the "real world") and providing structure, individual and group therapy, and incentives to children they serve. One staff was fully aware of the requirements of mandatory abuse reporting, while the other was unclear in their knowledge. This licensor provided training during the interview and followed up with the Program Manager.

Observations: During the review, the walkthrough consisted of the youth bedrooms, common areas, bathrooms, classroom, and recreation room. The program was clean and in good repair.

Program Strengths, directly quoted by the agency:
Barriers to Bridges program has many strengths. We are a program that is able to serve youth that are local to our community, meaning families can and are involved in youths treatment. We ensure our youth get lots of practice in their skills by taking them in to the community for various activities and outings like, mountain bike riding, hiking, recreation at local parks, photography, movies, facility shopping (taking them to help buy items we need for the program), and other various outings and activities. Covid prevented some of this but we worked hard to find activities and areas that limited their exposure. We also have a great education program that is very individualized and helps students not only get caught up on credit, start or finish their GED, and others begin online college courses all while learning and practicing new skills to help them be successful once back in public school. We also have an on-site MH and A&D counselor who provides services to our youth while they are with us but also once they leave creating a continuum of care that has shown to be effective at keepings kids engaged in these much-needed services once they graduate or leave B2B.
Further, Barriers to Bridges values relationships with youth, with staff investing time and effort in to building rapport and individualized goals that reflect the youths input and goals. We work closely with families and probation officers, as well as community members to build a strong support network outside of B2B for our youth when they leave.

B2B has also begun to shift our focus to a restorative model working closely with Resolve, a local agency that trains and helps others implement this philosophy into their work.
We have an incentive program that motivates youth to do well so that they can use earned points to purchase fun items out of the "green hwy store" and reward youth with Resident of the Week as well as Room of the Week. B2B works hard to build on strengths and use positive reinforcement while holding youth accountable in a more restorative way.
Our staff also have worked hard at improving their group facilitation skills and provide groups with engagement and reflection that builds skills and creates a common language.

Program Challenges, directly quoted by the agency:
As with most residential programs, consistency among the staff members when enforcing rules and using consequences and discipline is an area that we continually work to improve on. Another challenge that B2B struggles with is being as individualized for each youth as we would like. Our youth come with a wide range of skills, and individualizing groups is a challenge that staff work hard to address through individual counseling. We are also, like most, working to be creative in our recruitment for new staff so that we can have a fully trained full-time staff as well as a full on-call list to draw from heading into the new year

Changes that have occurred in the last 2 years, directly quoted by the agency:
Megan McUne was hired as program manager, and we have a new detention manager that works closely with her to ensure the "upstairs" is running smoothly. We have begun to implement Restorative Justice practices throughout the facility, and to build a new behavior management system (accountability system) to replace the "point system" that is currently in use.
We also were raised to "intensive BRS" and will begin the process of being designated a QRTP (Quality Residential Treatment Program).

Lawsuits, directly quoted by the agency: None

Grievances and complaints filed in the last two years, directly quoted by the agency: No formal grievances filed during review period.

Summary of Review					
Program and Services 413-215-0011(2)	**Yes**	**No**	**N/A**		
Program and services are in scope of license	X				
Governance of the Agency 413-215-0021	**Yes**	**No**	**N/A**		
(1)(a) Minimum of 5 board members	X				
(2)(f) Formally evaluate the exec. Director's performance annually	X				
(2)(g) Approves annual budget	X				

(2)(h) Obtain and review an annual independent financial review or audit of financial records.	X				
(2)(k) Written quality improvement program	X				
(2)(l) Meeting minutes	X				
Executive Director or Program Director 413-215-0021	**Yes**	**No**	**N/A**		
(3)(a) knowledge of requirements for providing care and treatment appropriate to programs	X				
(3)(g) Approval from BCU	X				
Discipline, Behavior Management, and Suicide Prevention 413-215-0076	**Yes**	**No**	**N/A**		
(3) Agency uses appropriate and positive methods of behavior management and nationally recognized non-violent crisis intervention	X				
(3)(b)(C) Agency does not use chemical and mechanical restraint (excluding medically necessary devices/prescriptions)	X				
(3)(c) Agency uses appropriate time-out rooms (adequate space, heat, light and ventilation and is not capable of locking) and documents use in child's record when applicable	X				
(3)(e) Agency uses seclusion appropriately/consistent with policy			X		
(4) Agency has adequate plan in place to respond to suicidal behavior/warning signs	X				
Contractors (if applicable) 413-215-0061(6)	**Yes**	**No**	**N/A**		
(a) Agency ensures the contractor meets the requirements of this rule and Chapter 413 division 215			X		
(b)(B) Contract includes the following: (i) Services provided (ii) Contractor fees (iii) Disclosure of information from contractor to agency (iv) Lines of authority (v) Adherence to rules, including background check (vi) Any liability of the agency for acts of the contractor, rights of indemnity and limitations on liability			X		

Supplemental Information Provided by CCA	Yes	No	N/A	Comments	
Documents as indicated on the form titled "Renewal Licensing Required Documents"		X		Certificate of Occupancy will be submitted once obtained.	
Documents as indicated on form titled "Required Financial Documents and Information"	X				
All required policies and procedures as identified in the "Umbrella Rules"		X		The agency will submit the following policies and procedures for review: • Conflict of Interest • Grievances • Personnel	
All required policies and procedures as identified in "Agency Type Specific Rules"		X		The agency will review all medication policy and procedures to ensure all licensing requirements are met and submit for review. Update Referral Policy to reflect correct ages served.	
SB710 Requirements: Policy and Procedures; notifications to guardian and children in care.	X				
Physical Plant	**Yes**	**No**	**N/A**	**Corrective Actions**	**Corrective Action Completed**
413-215-0046(3)(a) Foster Rights Posted (if children in DHS custody)	X				
413-215-0051(1) Sufficient safe space, equipment, and office equipment	X				
413-215-0091(12) License is posted in common area at each facility	X				
413-215-0001(5)(d), 0516(4(a)(I) & 0521(1) Adequate furnishings and personal items	X				
413-215-0511(2)(a) &(c) Buildings are smoke free, clean and in good repair	X				
413-215-0511(2)(d) Rooms are free of harmful drafts, odors, and excessive noise		X		**Corrective Action:** The bathrooms were odorous of urine. The agency shall ensure bathrooms are clean and free from odor.	
413-215-0511(2)(e) Rooms are adequate in size and arrangement	X				
413-215-0511(2)(f) System provides a continuous supply of hot and cold water to taps located throughout the facility	X				
413-215-0511(2)(h) Building is well ventilated and room temperature is within a normal comfort range		X		**Corrective Action**: Shower/bathroom ventilation. The agency shall inspect the effectiveness of the bathroom	

413-215-0516(1) All parts of the facility ensure the safety of children	X			ventilation. The bathroom was observed following a shower and water was dripping from the ceiling and doorway.	
Room and Space Requirements Bedrooms 413-215-0516(3)	**Yes**	**No**	**N/A**	**Comments**	
(a) Adequate furnishings and personal items	X				
(b) Separate from rooms used for dining, living, laundry, kitchen, and storage	X				
(c) Outside room with window allowing egress from building		X		*Comment:* Approved exception on file.	
(d) Ceiling at least 90 inches	X				
(e) Minimum 60 SF per bed	X				
(f) No more than 25 if dorm style	X				
(g) Permanently wired fixtures	X				
(h) Window covering	X			*Comment:* Window covering is frosted glass.	
(i) Beds are 3 feet apart and maintained to ensure safety	X				
Room and Space Requirements Bathrooms 413-215-0516(4)	**Yes**	**No**	**N/A**	**Corrective Action**	**Corrective Action Completed**
(a)(A)&(B) 1:8 ratio for toilets and sinks	X				
(a)(D) Hot and cold running water, soap, and approved hand drying options	X				
(a)(E) 1:10 ratio for shower or bathtub	X				
(a)(E) Individual privacy	X				
(a)(F) Window covering			X		
(a)(G) Permanently wired fixtures	X				
(a)(H) Adequate ventilation		X		**Corrective Action:** The agency shall inspect the effectiveness of the bathroom ventilation and repair as needed. The bathroom was observed following a shower and condensation/water was dripping from the ceiling and doorway.	
(b)&(c) Wooden racks on floors are prohibited and impervious shower mats are disinfected & dried daily	X				
Room and Space Requirements Kitchen 413-215-0516(6)	**Yes**	**No**	**N/A**	**Comments**	
(a) Used exclusively for storage, food preparation, dish washing and activities related to eating			X	*Comments:* • All meals are prepared at the County Jail and brought over for youth, as well as from other outside vendors.	
(b) Walls, floors are easily cleanable			X		
(c) Equipment and utensils are easily cleanable, durable, nontoxic, and kept clean			X		
(e) Equipment is easy to clean beneath, between and behind			X		
Room and Space Requirements 413-215-0516	**Yes**	**No**	**N/A**		
(2) There is a separate living room or lounge area – 15 SF minimum per child	X				

(5) There is a separate dining room with capacity for ½ of children in care and 15 SF per child in care	X				
(7) Laundry is separate from living areas, kitchen and dining	X				
(8) Separate storage areas are provided for food, kitchen supplies, utensils, clean linens, soiled linens and clothing, cleaning supplies and equip, poisons, chemicals, outdoor recreational and maintenance equipment	X				
(9) Outdoor activity area is protected from vehicles and other hazards and of a size and availability appropriate to the age and needs of children in care	X				
(11) & 413-215-0076(3)(c)(C)Time out rooms have adequate space, heat, light and ventilation and is not capable of locking			X		
Furnishings and Personal Items 413-215-0521	**Yes**	**No**	**N/A**		
(1) There is a bed with frame, clean mattress and pillow and personal storage (dresser, closet)	X				
(2) Linens are in good repair. There is a waterproof mattress cover or mattress. Linens are appropriate and towels and washcloths are provided	X				
(3) Bedding is changed weekly or when soiled	X				
(4)&(5) Personal hygiene supplies and appropriate clothing are provided	X				
Food Services 413-215-0536(1)&(2)	**Yes**	**No**	**N/A**		
(1)(a) Meals are arranged daily, consistent with normal mealtimes that occur during the hours of operation	X				
(1)(b) Menus are prepared in advance in accordance with USDA guidelines, provide a variety of foods and are adjusted for seasonal changes.	X				
(1)(b) Menus are kept for at least 6 months	X				
(1)(c) Drinking water is freely available	X				
(2)(a) Food is stored, prepared & served in a sanitary manner	X				
(2)(c) & (d) Food products are obtained from commercial suppliers (exception of fruits &	X				

vegetables), unpasteurized juice is prohibited, and only Grade A pasteurized and fortified milk in appropriate container.					
Safety 413-215-0541	**Yes**	**No**	**N/A**	**Corrective Actions**	**Corrective Action Completed**
(2)(a) Written emergency plan	X			**Corrective Action:** Evacuation Drill logs are missing required elements; therefore, the information was not captured. The agency shall utilize and implement an evacuation drill log which identifies each area of information required, complete each area, and retain the documentation for 2 years. **This is a repeat violation from 2019.**	
(2)(b) Telephone numbers for local police and fire are posted near all telephones	X				
(2)(c) Operative flashlights sufficient in number are readily available to staff	X				
(3)(a) Evacuation drill occurs monthly under varying conditions, is retained 2 yrs and contains; (A) identify of person conducting drill (B) date & time (C) notification method (D) staff participating (E) # of children & staff evacuated (F) special conditions simulated (G) problems encountered (H) time to complete		X			
Safety – Transportation 413-215-0541	**Yes**	**No**	**N/A**		
(5)(b) Vehicle has insurance policy, is smoke free, safe operating condition, and has first aid kit and fire extinguisher 2-A:10-BC	X				
Medication 413-215-0551	**Yes**	**No**	**N/A**	**Corrective Actions**	**Corrective Action Completed**
(3)&(7)(e) Medications have a prescription and are stored in the original container with prescription label	X			**Corrective Actions:** • The agency shall review policy and procedure to ensure medication disposals are occurring in accordance with state and federal law. • The agency shall ensure all unused medication are documented capturing all required elements (a-e).	
(4)&(5) Herbal supplements and remedies, medical treatments, special diets, physical therapy, physical aides or limitations have a written order signed by a physician or qualified medical professional.	X				
(7)(c) Medications are inaccessible to children	X				
(8) Medications are disposed in accordance with state and federal law		X			
(9) Written record of the disposal of medications is maintained and includes: (a) description and amount (b) name (c) reason		X			

(d) method (e) staff & witness signature				The written disposal record shall be thoroughly completed and maintained. • Possible adverse reactions (side effects) for each medication must be included on or with the youths medication record. During the course of the review, the nurse added them to the current youths records. The agency shall ensure policy and procedures are updated, implemented, and trained to staff. • The medication administration records had some blanks. The agency shall ensure the written medication administration are filled out accurately without blanks. An explanation must be documented for any missed medications.	
(10) Written record of the administration of medication includes: (a) name (b) description (c) dates and times (d) missed doses (e) medication disposed (f) method of administration (g) ID of person administering (h) possible adverse reactions (i) medication taken outside facility		X			
Extracurricular, Enrichment, Cultural & Social Activities 413-215-0554	**Yes**	**No**	**N/A**		
(2) Children have ongoing opportunities to participate in at least one age-appropriate or developmentally appropriate activity	X				
Minimum Staffing Requirements 413-215-0561	**Yes**	**No**	**N/A**		
(1)&(2) Supervision is adequate for the type of program, location, age and type of children, ability of supervisor to respond, electronic back-up systems. Minimum ratios are maintained: Under 30 months of age: 1:4 30 months to > 6 yrs or non-ambulatory: 1:6 Ages 6 and older: 1:7 Overnight (staff awake) 1:10	X				
(4)(a) When one staff on duty, there is additional staff immediately available with max response time of 30 minutes	X				
(5) There is at least one on-site employee authorized to apply the *reasonable and prudent parent* standard	X				
Separation of Residents 413-215-0566	**Yes**	**No**	**N/A**		

(1) Children are in separate bedrooms than adults, unless parent and child, or there is written approval from guardian/parent and licensing coordinator			**X**		
(2) There is adequate supervision of children if both males and females are served by the program			**X**		

Personnel Files 413-215-0061	**Yes**	**No**	**N/A**		
Staff Name/Position	X				
(3)(g) Date of Hire	X				
(3)(a) record of education, training and previous employment	X				
(1)(b) & (3)(b) reference checks completed and documented	X				
(1)(a) & (3)(c) Background check completed and documented	X				
(3)(d) Annual performance evaluations	X				
(3)(f) Record of personnel actions	X				
(3)(g) Termination date, reason for termination	X				
(3)(h) Current job description (1)(c) Employee meets minimum qualifications stated in current job description	X				
New Employee Orientation – Umbrella Requirements (30 days) 413-215-0061(4)	**Yes**	**No**	**N/A**	**Corrective Actions**	**Corrective Action Completed**
(a) Agency policies and procedures		X		**Corrective Action:** The agency has a detailed orientation training checklist; however, documentation confirming completion was inconsistent or altogether missing. The agency shall implement a system to ensure training occurs as scheduled and is documented appropriately. **This is a repeat violation from 2019.**	
(b) Ethical and professional guidelines		X			
(c) Organizational lines of authority		X			
(d) Attributes of population served		X			
(e) & (5)(a) to (c) Mandatory reporting that includes: (a) legal definition of child abuse ORS 419B.005, Oregon Laws 2016, chapter 106, section 36 (b) legal responsibility to immediately report		X			

(c) legal responsibility to report is personal to the employee					
(f) Privacy laws		X			
(g) Emergency procedures		X			
New Employee Orientation – Residential (30 days) 413-215-0556	**Yes**	**No**	**N/A**	**Corrective Actions**	**Corrective Action Completed**
(1)(a) Discipline and behavior management including de-escalation, crisis prevention, positive behavior management, and disciplinary techniques that are non-punitive in nature		X		**Corrective Action:** The agency has a detailed orientation training checklist; however, documentation confirming completion was inconsistent or altogether missing. The agency shall implement a system to ensure training occurs as scheduled and is documented appropriately. **This is a repeat violation from 2019.**	
(1)(b) Restraint and seclusion (if applicable)		X			
Ongoing Training	**Yes**	**No**	**N/A**		
413-215-0536(2)(b) Employees who handle food served to children have a valid food handler's card			X		
413-215-0541(5)(a) Employees transporting children have: current driver's license, insurance, trained in emergency procedures and behavior management, and training for 15+ passenger vans if applicable)	X				
413-215-0556(2)(a) Environmental emergencies	X				
413-215-0556(2)(b) Universal Precautions	X				
413-215-0556(2)(c) Discipline and Behavior Management	X				
413-215-0556(3) Staff providing direct care must maintain current CPR/First Aid certification	X				
413-215-0556(4) Designated staff authorized to apply reasonable and prudent parent standard are trained in application of the standard	X				
413-215-0061(5) Mandatory reporting (annually) that includes: (a) legal definition of child abuse ORS 419B.005, Oregon Laws 2016, chapter 106, section 36 (b) legal responsibility to immediately report	X				

(c) legal responsibility to report is personal to the employee					

Children's Records	**Yes**	**No**	**N/A**	**Corrective Actions**	**Corrective Action Completed**
Health Services 413-215-0546					
(2) Medical history obtained within 30 days (significant findings, current immunizations, history of surgical procedures-health issues-injuries, allergies, dental, vision, hearing, behavioral health, and physician orders)	X			**Corrective Action:** The reviewed youth files did not contain any documentation of age-appropriate instruction. The agency shall ensure this instruction is provided and documented in each youth file. **This is a repeat violation from 2019.**	
(2)(e) Documentation of age appropriate instruction – pregnancy prevention, nutrition, prevention of HIV & AIDS, and prevention and treatment of sexually transmitted disease		X			
(4)(a) to (f) Medical exams (3 in first year of life, 2,4,6,9,14)			X		
Consents 413-215-0576(1)	**Yes**	**No**	**N/A**		
(a) Provide routine and emergency medical care	X				
(b) Use the discipline and behavior management system	X				
(c) Use restraint or seclusion (if applicable). Must specify the reasons for the intervention and how staff are trained and supervised	X				
(d) Restrict contact with persons outside of the agency	X				
(e) Allow access as defined in 413-215-0091 & 0101	X				
(f) Impose a dress code	X				
(g) Apply the reasonable and prudent parent standard	X				
Disclosures 413-215-0576(2) Parent/guardian has acknowledged in writing:	**Yes**	**No**	**N/A**	**Corrective Actions**	**Corrective Action Completed**

(a) Information regarding personal or room searches and protocols for confiscation of contraband	X			**Corrective Actions:** • The agency shall ensure disclosure (b) is included in its entirety in the program handbook. • The agency shall ensure disclosure (c) is included in the disclosures.	
(b) Statement of Rights of Children and Parents/Guardians		X			
(c) Any policies and procedures upon request		X			
Authorizations 413-215-0576(3)	**Yes**	**No**	**N/A**		
(a) Disclose or exchange information with others	X				
(b) Child specific visitors	X				
(c) Visitation resources are pre-approved	X				
(d) Activity specific authorizations are pre-approved to allow children to participate in potentially hazardous activities, including but not limited to using motorized yard equipment, swimming, and horseback riding.	X				
Information about Children in Care 413-215-0581(1) Summary sheet contains the following:	**Yes**	**No**	**N/A**		
(a)The name, gender, date of birth, religious preference, and previous address	X				
(b) Name and location of previous and current school	X				
(c) Date of admission	X				
(d) Legal custody	X				
(e) The name, address, and telephone number of: (A) The child in care's parents. (B) The child in care's legal guardian, if different than the parents, and a copy of the document that provides for his or her authority over the *child in care*. (C) Other persons significant to child (D) Other professionals to be involved in service planning (if applicable)	X				
Service Planning 413-215-0581(2)	**Yes**	**No**	**N/A**		
(b) Intake document is completed the date child accepted into care (emergency placement 48 hours)	X				

(d) Assessment is completed within 30 days and contains relevant historical info., current behavioral observations, identified need for services, and how agency will provide services	X				
(e) (A)&(B) Service plan within 60 days (parent, guardian and child actively involved). Describes how child's issues will be addressed, anticipated outcomes and reviewed by child and guardian/parent.	X				
(e)(C)&(D) Service plan is reviewed quarterly and revised when information indicates other services should be provided	X				
Case Management 413-215-0581(3)	**Yes**	**No**	**N/A**		
(a) Services are documented, progress toward achieving goals is tracked	X				
(b)-(d) discharge planning and instructions	X				
(f) Incident Reports	X				
Financial Records 413-215-0581(4)	**Yes**	**No**	**N/A**		
Records contain date, amount, source, purpose, signatures			X		
Personal Possessions Records 413-215-0581(5)	**Yes**	**No**	**N/A**		
Individual written inventory of all personal possessions is maintained and updated as needed	X				
Records and Documentation 413-215-0071	**Yes**	**No**	**N/A**	**Corrective Actions**	**Corrective Action Completed**
(1) Stored safely	X			**Corrective Actions:** • Personnel, youth records and medication records are incomplete missing required elements noted above. • Personnel training records were not easily identifiable or accessible.	
(2) Permanent, legible, dated, and signed	X				
(3)&(4) Uniform in organization, readily identifiable and accessible, current, and complete, containing all required info. No eraser tape or white out.		X			
(7) Permanent registry for each child includes: Name Gender Birth date	X				

Names, addresses of parents or guardians Dates of admission Placement upon discharge					

Corrective Actions and Timeframes: Please submit the following to verify compliance.

Within 45 days of receipt of this report **Jackson County Juvenile B2B** must submit a letter of verification indicating the agency is in compliance with the specific rules cited above and describing how compliance will be maintained going forward. Along with the letter of verification, the agency must submit any and all specific documentation requested in the body of this report. The letter of verification and any additional requested documents are to be emailed directly to Robin DuVal, ROBIN.M.DuVal@dhsoha.state.or.us.

Recommendations:

- Provide a refresher training to all staff regarding mandatory abuse reporting requirements. One of two interviewed staff was either unaware or unclear about mandatory abuse reporting requirements.
- Ensure youth and guardian statement of rights in the Handbook and all other referenced documents include all requirements per OAR 413-215-0046(1)(a-j).

Exceptions: Bedroom window egress exception on file.

Changes in License: No changes to the license.

Licensing Coordinator's Signature: Robin DuVal Date: 12/29/2021

Manager Review: _____ Date: 12-29-2021