DATE: November 6, 2019

TO: All State and Local Staff
All Staff of the Office of Children’s Services

FROM: Tara Ragland, Director
Division of Licensing Programs


CONTACT(S): Robin Ely at (804) 662-7367 or robin.ely@dss.virginia.gov

This broadcast serves to alert relevant local governments and placing and funding agencies, including the Office of Children’s Services, to anticipate receipt of a mass distribution e-mail containing important up-dated information and website linkages about children’s residential facilities (CRF).

The mass distribution e-mail will contain information about the status of initial and renewal applications, licenses that have been denied, and facilities that were issued a provisional license due to health and safety violations. As of the date of broadcast, no CRF has been issued a provisional license, and no CRF has been denied a license.

All state and local department staff can find the website linkages mentioned above on FUSION at https://fusion.dss.virginia.gov/

The website linkages above can also be found on the department’s public website at http://www.dss.virginia.gov/facility/crf.cgi.
Current Initial CRF Applications in Process  
Child Welfare Unit Contact Number: (804) 662-7053

<table>
<thead>
<tr>
<th>FACILITY NAME</th>
<th>ADDRESS</th>
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<tbody>
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CRF Licenses Expiring in the Month of November 2019

<table>
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<tr>
<th>FACILITY NAME</th>
<th>LICENSE EXPIRATION DATE</th>
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<tr>
<td>Community Empowerment Program, LLC</td>
<td>11/18/2019</td>
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VDSS, Division of Licensing Programs  
Child Welfare Licensing Unit  
1604 Santa Rosa Road, Suite 130  
Henrico, Virginia 23229  
(804) 662-7367 or (804) 662-7053

11/2019
REPORT OF ISSUANCE OF A PROVISIONAL LICENSE OR DENIAL OF LICENSE FOR CHILDREN’S RESIDENTIAL FACILITIES BY THE DEPARTMENT OF SOCIAL SERVICES

Provisional Licenses Issued:

<table>
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<tr>
<th>FACILITY NAME</th>
<th>FACILITY LOCATION</th>
<th>EFFECTIVE DATE</th>
<th>EXPIRATION DATE</th>
<th>INSPECTOR NAME AND PHONE NUMBER</th>
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Denial of Licensure:

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<th>FACILITY LOCATION</th>
<th>DATE</th>
<th>INSPECTOR NAME AND PHONE NUMBER</th>
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</thead>
<tbody>
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