



OFFICE OF
LICENSING AND MONITORING
Residential Child Care Report Summary

Information

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|--|---------------------------------------|
| Provider Organization | Challenger's Independent Living, Inc. |
| Name of Certified Program Administrator | Walter McNeil |
| Email of Certified Program Administrator | Challengers1@msn.com |

RCC Site Information

| Name/Address | License Capacity | Total DHS Contract Limit | DHS Census | DIS Census | Other Census | License # Exp Date | Date of Site Inspection |
|-----------------------|------------------|--------------------------|------------|------------|--------------|--------------------|-------------------------|
| Baltimore City 3307 | 5 | 12 | 5 | 0 | 0 | #00411 4/22/24 | 2/28/24 |
| Baltimore City 3015 | 7 | | 6 | 0 | 0 | #00550 4/22/24 | 2/29/24 |
| Contracting Agency(s) | DHS | | | | | | |

Licensing Information

| | | |
|---------------------------|---------------------------------------|--|
| Licensing Agency | Maryland Department of Human Services | |
| License Type | Group Home | |
| Type of Inspection | Relicensure | |
| Current Status of License | Relicensed | |

COMAR Citations

(CAP = Corrective Action Plan)

| This Provider was cited for the listed COMAR violations which MAY present safety risks for children based on impact, scope, and frequency. These issues are either resolved or a corrective action plan has been implemented. | COMAR Citation | | Comment | Citation Status (Resolved/CAP) |
|--|----------------|---------------------|--|--------------------------------|
| | RCC Site | COMAR Citation | | |
| This Provider was cited for the listed COMAR violations which DO NOT present imminent safety risks for children based on impact, scope, and frequency. | Baltimore 3315 | 14.31.06.05E(1)(d) | Staff did not have negative TB results | Resolved |
| | Baltimore 3307 | 14.31.06.13 H | Youth did not have annual physical exam | CAP-appt 4/24 |
| | | | | |
| | | | | |
| | Baltimore 3315 | [14.31.06.05E(1)(h) | Staff did not have RCYCP w/in 180 days of hire | |
| | Baltimore 3315 | 14.31.06.05E(1)(c) | Staff did not have pre-employment medical exam | |
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| | | | | |

Office of Licensing and Monitoring Staff Information

| Name | Role | Email | Date |
|-------------------------|----------------------|-------------------------------|----------|
| <i>Patricia Sparrow</i> | Licensing Specialist | Patricia.sparrow@maryland.gov | 4/1/2024 |
| <i>Kimberly Brock</i> | Program Manager | Kimberly.brock1@maryland.gov | 4/1/2024 |