



**RESIDENTIAL CHILD CARE PROGRAMS REPORT**

**Provider Organization:** Children’s Home, Inc.

**Licensing Agency:** DHR

**Contracting Agency(s):** DHR, DJS

**Program Administrator:** Yvette Lucas

**Certification #** A00201 **Exp. Date:** 12/13/17

**Type of Inspection:** Quarterly

Site Name	Gender	Age Range	License Capacity	DHR Contract Limit	License#/ Exp. date	Date of site Inspection
Shelter	Females	13-17	8	None	00268 6/15/17	3/20/17
Transitional Living/High Intensity	Males	13-17	8	None	00144 6/15/17	3/20/17
Diagnostic Center	Females	13-19	16	11	00536 6/15/17	3/21/17
Group Home	Males Females	13-20	48	34	00268 6/15/17	3/21/17

**Inspection Summary**

**Number of Records Reviewed:** Youth  0  Staff  6

**Number of Interviews:** Youth  0  Staff  0

**Physical Plant Inspection:** APPROVED

**COMAR Violation:** Yes  x  No

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

Violation(s)	Findings
14.31.06.15G	1 employee no training
10.03.57.04C	2 employees no Certification.
14.31.06.05E(1)	1 employee no driving record
14.31.06.07E(5)	Bedroom walls soiled and stained
14.31.06.07I	Bedroom furniture had graffiti
14.31.06.07E(4)	Bathroom wall and ceiling had chipped and peeling paint
14.31.06.07G(1)	Bathroom toilet clogged.
14.31.06.07G(1)	Bathroom needs to be cleaned.

**Corrective Action Plan:** Yes  X  No

**If yes, date of CAP:** 3/21/17

**Complaint Outcome:** N/A

**Current Status of License:** Continued

**Licensing**

**Coordinator:** Odetta Bulluck      **Date:**      **Email:** [Odetta.squire-bulluck@maryland.gov](mailto:Odetta.squire-bulluck@maryland.gov).

**Program Manager:** André Thomas      **Date:**      **Email:** [andre.thomas@maryland.gov](mailto:andre.thomas@maryland.gov)