**Child Placement Agency Report**

**Provider Organization:**  Hearts and Homes for Youth, Inc.

**Licensing Agency:**  DHS  
**Contracting Agency(s):**  DHS, DJS

**Name of Chief Administrator:**  Jessica McKinnie  
**Email:**  jmckinnie@heartsandhomes.org

**License Type:**  Treatment Foster Care  
**Type of Inspection:**  Re-licensure Site Inspection

<table>
<thead>
<tr>
<th>Name and Address of CPA Office</th>
<th>License Capacity</th>
<th>DHR Contract Limit</th>
<th>Census by Placing Agency</th>
<th>License#/Exp. date</th>
<th>Date of site Inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hearts and Homes for Youth, Inc. Family Ties Treatment Foster Care 3919 National Drive, Suite 400 Burtonsville, Maryland 20866</td>
<td>Unlimited</td>
<td>25</td>
<td>DHS-15 DJS-0</td>
<td>#00159 4/1/2020</td>
<td>3/26/18</td>
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**Inspection Summary**

**Number of Records Reviewed:**  
- Youth 8  
- Staff 4  
- Foster Parent 6  
- Adoptive Parent NA

**Number of Interviews:**  
- Youth 2  
- Staff 4  
- Foster Parent 3

**CPA Office Inspection:**  Approved

**Number of ILP Apartments Inspected:**  N/A  
**Number of Foster Homes Inspected:**  2

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

<table>
<thead>
<tr>
<th>Violation(s)</th>
<th>Findings</th>
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<tbody>
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**Corrective Action Plan:**  Yes  
**If yes, date of CAP:**  

**Any Violations During Mid or Re-Licensure Periods:**  Yes  
**If Yes See Report (s) Date(s):** 11/30/17, 7/19/17, 1/26/18

**Complaint Outcome:**  N/A

**Current Status of License:**  Continued

**Licensing Coordinator:**  Michelle Goines  
**Date:**  4/23/18  
**Email:**  michelle.goines@maryland.gov

**Program Manager:**  Richard Berger  
**Date:**  4/23/18  
**Email:**  richard.berger@maryland.gov