## CHILD PLACEMENT AGENCY REPORT

**Provider Organization:** Kennedy Krieger Institute  
**Licensing Agency:** DHS  
**Contracting Agency(s):** DHS  
**Name of Chief Administrator:** Elizabeth Thompson  
**Email:** Thompson@kennedykrieger.org  
**License Type:** Treatment Foster Care  
**Type of Inspection:** Quarterly

<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>Kennedy Krieger Institute</td>
<td>Unlimited</td>
<td>SED50 Medical 50</td>
<td>45</td>
<td>#00357 9/16/20</td>
<td>3-8-19</td>
</tr>
</tbody>
</table>

### Inspection Summary

**Number of Records Reviewed:** Youth 0  Staff 11  Foster Parent 0  Adoptive Parent NA  
**Number of Interviews:** Youth 0  Staff 5  Foster Parent 0  
**CPA Office Inspection:** Approved  
**Number of ILP Apartments Inspected:** N/A  
**Number of Foster Homes Inspected:** 0  
**Current COMAR Violation:** Yes X No  

If Yes, list Cited Violation(s) below:

<table>
<thead>
<tr>
<th>Violation(s)</th>
<th>Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>07.05.01.13.B (7) 07.02.21.05 A &amp; B 07.05.01.09 D</td>
<td>Three (3) child placement workers did not have the required 20 hours of pre-service training before assuming case work responsibilities. 1 out of 11 personnel records did not have the required four references before hire.</td>
</tr>
</tbody>
</table>

**Corrective Action Plan:** Yes X No  
If yes, date of CAP: 3/8/19

**Any Violations During Mid or Re-Licensure Periods:** Yes No N/A  
If Yes See Report (s) Date(s):  
**Complaint Outcome:** N/A

**Current Status of License:** Continued

**Licensing Coordinator:** Tina Bullock  
**Date:** 3/19/19  
**Email:** tina.bullock@maryland.gov

**Program Manager:** Richard Berger  
**Date:** 3/19/19  
**Email:** richard.berger@maryland.gov