## Child Placement Agency Report

**Provider Organization:** Lutheran Social Services of the National Capital Area  
**Licensing Agency:** DHR  
**Contracting Agency(s):** CFSA  
**Name of Chief Administrator:** Kichelle Coleman  
**Email:** colemank@lssnca.org  
**License Type:** Child Placement Agency  
**Type of Inspection:** Quarterly

### Name and Address of CPA Office

<table>
<thead>
<tr>
<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>unlimited</td>
<td>0</td>
<td>CFSA 53</td>
<td># 00200/6/15/17</td>
<td>9/30, 10/2, 10/5 &amp; 10/7/15</td>
</tr>
</tbody>
</table>

**Lutheran Social Services**  
2503 Belair Drive  
Bowie, MD 20715

### Inspection Summary

- **Number of Records Reviewed:**  
  - Youth: 3  
  - Staff: 0  
  - Foster Parent: 4  
  - Adoptive Parent: n/a

- **Number of Interviews:**  
  - Youth: 4  
  - Staff: 0  
  - Foster Parent: 4

- **CPA Office Inspection:** Approved

- **Number of ILP Apartments Inspected:** N/A  
  **Number of Foster Homes Inspected:** 3

- **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>07.05.01.12 B (2)</td>
<td>Failure to make CPS allegation notification</td>
</tr>
<tr>
<td>07.05.01.08.A (2)</td>
<td>Failure to forward critical incident reports</td>
</tr>
</tbody>
</table>

- **Corrective Action Plan:** Yes X No  
  **If yes, date of CAP:** 10/7/15

- **Any Violations During Mid or Re-Licensure Periods:** Yes No

- **If Yes See Report(s) Date(s):** N/A

- **Complaint Outcome:** N/A

**Current Status of License:** Continued

**Licensing Coordinator:** Lisa Beeman  
**Date:** 10/8/15  
**Email:** Lisa.beeman@maryland.gov

**Program Manager:** Richard Berger  
**Date:** 10/8/15  
**Email:** richard.berger@maryland.gov