**CHILD PLACEMENT AGENCY REPORT**

**Provider Organization:** Progressive Life Center ILP  
**Licensing Agency:** DHR  
**Contracting Agency(s):** DHR  
**Name of Chief Administrator:** Peter Fitts  
**Email:** pfitts@plcntu.org  
**License Type:** ILP  
**Type of Inspection:** Quarterly Review

<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>Progressive Life Center ILP 8800 Jericho City Drive Landover, MD 20785</td>
<td>Unlimited</td>
<td>10</td>
<td>7</td>
<td>#00417 06/26/2018</td>
<td>11/20/2017</td>
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**Inspection Summary**

**Number of Records Reviewed:** Youth 0  Staff 0  Foster Parent NA  Adoptive Parent NA  
**Number of Interviews:** Youth 0  Staff 0  Foster Parent NA  
**CPA Office Inspection:** Approved  
**Number of ILP Apartments Inspected:** 1  
**Number of Foster Homes Inspected:** NA  
**Current COMAR Violation:** Yes X No  

<table>
<thead>
<tr>
<th>If Yes, list Cited Violation(s) below:</th>
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</thead>
<tbody>
<tr>
<td>Violation(s)</td>
<td>Findings</td>
</tr>
</tbody>
</table>

**Corrective Action Plan:** Yes No X  
**If yes, date of CAP:**  
**Any Violations During Mid or Re-Licensure Periods:** Yes No  
**If Yes See Report (s) Date(s):**  
**Complaint Outcome:**  
**Current Status of License:** Continued

**Licensing**  
**Coordinator:** Sherlema Ferguson  
**Date:** 12/1/17  
**Email:** sherlema.ferguson@maryland.gov  
**Program Manager:** Richard Berger  
**Date:** 12/1/17  
**Email:** richard.berger@maryland.gov