**RESIDENTIAL CHILD CARE PROGRAMS REPORT**

**Provider Organization:** St. Ann’s Center for Children, Youth and Families  
**Licensing Agency:** DHS  
**Contracting Agency(s):** DHS, DJS, CFSA, MDH  
**Program Administrator:** Peggy Gatewood  
**Certification #:** A00087  
**Exp. Date:** 12/31/19  
**Type of Inspection:** Mid-Licensure  

<table>
<thead>
<tr>
<th>Site Name</th>
<th>Gender</th>
<th>Age Range</th>
<th>License Capacity</th>
<th>DHS Contract Limit</th>
<th>License#/ Exp. date</th>
<th>Date of site Inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>St. Ann’s Teen Mother Baby (Grace House)</td>
<td>F</td>
<td>13-21</td>
<td>36</td>
<td>5</td>
<td>#00093 12/24/2019</td>
<td>12/18/18</td>
</tr>
<tr>
<td>St. Ann’s Children’s Residential Program (Hope House)</td>
<td>M/F</td>
<td>2 days-12 yrs</td>
<td>57</td>
<td>0</td>
<td>#00093 12/24/2019</td>
<td>12/18/18</td>
</tr>
<tr>
<td>St. Ann Teen Female</td>
<td>F</td>
<td>13-19</td>
<td>16</td>
<td>0</td>
<td>#00093 12/24/2019</td>
<td>12/18/18</td>
</tr>
</tbody>
</table>

**Inspection Summary**

- **Number of Records Reviewed:** Youth 13 Staff 7
- **Number of Interviews:** Youth 3 Staff 5
- **Physical Plant Inspection:** Approved
- **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>14.31.06.05E(i)(j)</td>
<td>1 of 7 records reviewed did not have CPR certification documentation</td>
</tr>
<tr>
<td>14.31.06.05F(3)(c)</td>
<td>1 of 7 records reviewed did not have First Aid certification documentation</td>
</tr>
<tr>
<td>14.31.06.05E(1)(b)</td>
<td>1 of 7 records reviewed did not have 3 reference checks prior to hire</td>
</tr>
<tr>
<td>14.31.06.05E(1)(h)</td>
<td>1 of 7 records reviewed did not have documentation of RCYCP certification</td>
</tr>
</tbody>
</table>

**Corrective Action Plan:** Yes X No  
If yes, date of CAP: 12/18/18

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

If Yes See Report(s) Date(s): 12/18/18

**Complaint Outcome:** NA

**Current Status of License:** Continued

**Licensing**  
**Coordinator:** Patricia Sparrow  
**Date:** 1/18/19  
**Email:** Patricia.sparrow@maryland.gov

**Program Manager:** Andre Thomas  
**Date:** 1/22/19  
**Email:** Andre.thomas@maryland.gov

DHS/OLM (RCC) Updated: 8/2017