**RESIDENTIAL CHILD CARE PROGRAMS REPORT**

**Provider Organization:** St. Ann’s Center for Children, Youth and Families

**Licensing Agency:** DHR-OLM  
**Contracting Agency(s):** DHR, DJS, CFSA

**Program Administrator:** Peggy Howard-Gatwood  
**Certification #:** A00087  
**Exp. Date:** 12/31/2017

**Type of Inspection:** Quarterly Evaluation

<table>
<thead>
<tr>
<th>Site Name</th>
<th>Gender</th>
<th>Age Range</th>
<th>License Capacity</th>
<th>DHR Contract Limit</th>
<th>License#/Exp. date</th>
<th>Date of site Inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>St. Ann’s Children’s Residential Program</td>
<td>M/F</td>
<td>2 days-12 years</td>
<td>57</td>
<td>57</td>
<td>#00093 12/24/2017</td>
<td>3/23/17</td>
</tr>
<tr>
<td>St. Ann’s Teen Mother-Baby Program</td>
<td>F/C</td>
<td>13-21</td>
<td>36</td>
<td>36</td>
<td>#00093 12/24/2017</td>
<td>3/23/17</td>
</tr>
<tr>
<td>St. Ann’s Teen Female Program</td>
<td>F</td>
<td>13-19</td>
<td>16</td>
<td>16</td>
<td>#00093 12/24/2017</td>
<td>3/23/17</td>
</tr>
</tbody>
</table>

**Inspection Summary**

**Number of Records Reviewed:**  
Youth: 3  
Staff: 3

**Number of Interviews:**  
Youth: 0  
Staff: 0

**Physical Plant Inspection:** Approved

**COMAR Violation:**  
Yes ___ No X

If Yes, list Cited Violation(s) below:

<table>
<thead>
<tr>
<th>Violation(s)</th>
<th>Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

**Corrective Action Plan:**  
Yes ___ No X  
If yes, date of CAP:  

**Complaint Outcome:** N/A

**Current Status of License:** Continued

**Licensing Coordinator:** Howard Rollins  
**Date:** 4/24/17  
**Email:** howard.rollins@maryland.gov

**Program Manager:** André Thomas  
**Date:** 4/24/17  
**Email:** andre.thomas@maryland.gov