

OFFICE OF LICENSING AND MONITORING

Residential Child Care Report Summary

Provider Information

Provider Organization	Challengers Independent Living, Inc.		
Name of Program Administrator	Walter McNeil		
Email of Program Administrator	Challengers1@msn.com		

RCC Site Information

Name/Address	License Capacity	Total DHS Contract Limit	DHS Census	DJS Census	Other Census	License # Exp Date	Date of Site Inspection
Baltimore City, 3307	5	12	5	0	0	#73 4/30/2026	3/21/2025
Baltimore City, 3015	7		6	0	0	#1663 4/30/2026	3/19/2025

Contracting Agency(s)	DHS

Licensing Information

Licensing Agency	Maryland Department of Human Services		
License Type	Residential Group Home		
Type of Inspection	Quarterly		

ACTIVE

COMAR Citations (CAP = Corrective Action Plan)

	RCC Site	COMAR Citation	Comment	Citation Status (Resolved/CAP)	
This Provider was cited for the listed COMAR violations which <i>MAY</i> present safety risks for children based on impact, scope, and frequency. These issues are either resolved or a corrective action plan has been implemented.	Baltimore City, 3015	14.31.06.05E(1)(c)	There was no medical examination in the record.	CAP	
	Baltimore City, 3015	14.31.06.13B	Provider failed to follow its own Medication Management Policy. It also failed to properly train staff in accordance with its policy.	CAP	
	Baltimore City, 3015	14.31.06.18A(1)	Youth medication logs failed to document the necessary information about the administration of the youth's medication.	САР	
	Baltimore City, 3307; Baltimore City, 3015	14.31.06.13C	There were multiple discrepancies found in youth medication logs such as: omissions with no explanation as to why medication was missed, an undated medication log, using checkmarks instead of staff signatures to indicate that medication was administered, and a duplicate medication log.	САР	
This Provider was cited for the listed COMAR	Baltimore City, 3015	14.31.06.05 E (1)(I) (ii)	Page 2 of 2 was missing from the driving record.		
violations which DO NOT present imminent safety risks for children based on impact, scope, and frequency.	Baltimore City, 3015	14.31.06.05E(1)(g)	There was no staff signature on the I-9 form.		
	Baltimore City, 3015	14.31.06.07A (7)(a)	There was no operable landline telephone.		
	Baltimore City, 3015	14.31.06.13G	The immunization record in the file did not have the youth's name on it.		

Office of Licensing and Monitoring Staff Information

Name	Role	Email	Date		
Jasmine Bryant Byan	Licensing Specialist	jasmine.bryant1@maryland.gov	4/17/2025		

Kimberly Brock Kimberly Brock Program Manager kimberly.brock1@maryland.gov 4/17/2025