

Maryland Department of Human Services Office of Licensing and Monitoring 311 W. Saratoga Street Baltimore, Maryland 21201 Office: 410.767.7871 Fax: 410.333.8408

| Provider Organization: The Children's Guild, Inc.  |                   |                     |                          |                                   |                        |                            |
|--|-------------------|---------------------|--------------------------|-----------------------------------|------------------------|----------------------------|
| Licensing Agency: DHS Contracting Agency(s): DHS   |                   |                     |                          |                                   |                        |                            |
| Name of Chief Administrator:Keisha BryanEmail:bryan.k@childrenguild.org                                    |                   |                     |                          |                                   |                        |                            |
| License Type:Treatment Foster CareType of Inspection:Quarterly   |                   |                     |                          |                                   |                        |                            |
| Name and Address of CPA Office   |                   | License<br>Capacity | DHS<br>Contract<br>Limit | Census by Placing<br>Agency       | License#/<br>Exp. date | Date of site<br>Inspection |
| The Children's Guild,<br>6802 McClean Blvd.<br>Baltimore, MD 21234   |                   | Unlimited           | 60                       | 57                                | #00300<br>7/25/2019    | 04/26/2019<br>04/29/2019   |
| Inspection Summary   |                   |                     |                          |                                   |                        |                            |
| Number of Records Reviewed: Youth <u>6</u> Staff <u>0</u> Foster Parent <u>8</u> Adoptive Parent <u>NA</u> |                   |                     |                          |                                   |                        |                            |
| Number of Interviews:   Youth   2   Staff   0   Foster Parent   2  |                   |                     |                          |                                   |                        |                            |
| <b>CPA Office Inspection:</b> 04/29/2019   |                   |                     |                          |                                   |                        |                            |
| Number of ILP Apartments Inspected: NA Number of Foster Homes Inspected: 4                                 |                   |                     |                          |                                   |                        |                            |
| Current COMAR Violation: Yes X No  |                   |                     |                          |                                   |                        |                            |
| If Yes, list Cited Violation(s) below:   |                   |                     |                          |                                   |                        |                            |
| Violation  |                   | Findings            |                          |                                   |                        |                            |
| 07.05.02.06 A(1)(a) PPD testing missing for one foster parent's child.                                     |                   |                     |                          |                                   |                        |                            |
| Corrective Action Plan: Yes X No If yes, date of CAP: 05/01/2019   |                   |                     |                          |                                   |                        |                            |
| Any Violations During Mid or Re-Licensure Periods: Yes No N/A_<br>If Yes See Report (s) Date(s):           |                   |                     |                          |                                   |                        |                            |
| Complaint Outcome: NA  |                   |                     |                          |                                   |                        |                            |
| Current Status of License: Continued   |                   |                     |                          |                                   |                        |                            |
| Licensing<br>Coordinator:  | Sherlema Ferguson | <b>Date:</b> 5/2/   | '19 <b>I</b>             | E <b>mail:</b> <u>sherlema.fe</u> | rguson@mary]           | and.gov                    |
| Program Manager:   | Richard Berger    | <b>Date</b> 5/2/    | '19 <b>H</b>             | Email: <u>richard.ber</u>         | ger@maryland.          | gov                        |