



# OFFICE OF LICENSING AND MONITORING

## Child Placement Agency Report Summary

### Provider Information

|                              |  |
|------------------------------|--|
| Provider Organization        | Hearts and Homes for Youth, Inc.   |
| Name of Chief Administrator  | Roma Marshall  |
| Email of Chief Administrator | <a href="mailto:rmarshall@heartsandhomes.org">rmarshall@heartsandhomes.org</a> |

### CPA Office Information

| Name/Address   | License Capacity | Total DHS Contract Limit | DHS Census | DJS Census | Other Census | License # Exp Date   | Date of Site Inspection |
|--|------------------|--------------------------|------------|------------|--------------|----------------------|-------------------------|
| Hearts and Home for the Youth Damamli (Mother/Infant)<br>Site # 5096630<br>5740 Executive Drive, Suite 208,<br>Catonsville, Maryland 21228 | Unlimited        | 18                       | 4          | 0          | 0            | #00492<br>08/14/2023 | 12/05/2022              |
| Hearts and Home for the Youth Damamli ILP<br>Site # 5001112<br>3919 National Drive, Suite 400<br>Burtonsville, MD 20866                    | Unlimited        | 18                       | 10         | 0          | 0            | #00161<br>08/14/2023 | 12/05/2022              |
| Hearts and Home Family Ties Treatment Foster Care<br>Site #5000800   | Unlimited        | 30                       | 22         | 0          | 0            | #00159<br>06/16/2024 | 12/05/2022              |

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|--|--|--|--|--|--|--|--|
| 3919 National Drive, Suite 400<br>Burtonsville, MD 20866 |  |  |  |  |  |  |  |
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| <b>Contracting Agency(s)</b> | <b>DHS and DJS</b> |
|------------------------------|--------------------|

### Licensing Information

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| Licensing Agency   | <b>Maryland Department of Human Services</b> |
| License Type       | Treatment Foster Care & Parent/Child ILP     |
| Type of Inspection | Quarterly                                    |

|                           |               |
|---------------------------|---------------|
| Current Status of License | <b>ACTIVE</b> |
|---------------------------|---------------|



### COMAR CITATIONS

|   | CPA Site | COMAR CITATION  | COMMENT  |
|---|----------|---|--|
| This Provider was cited for the listed COMAR violation which <b>MAY</b> present safety risks for children based on impact, scope, and frequency. These issues are either resolved or a corrective action plan | 5001112  | <b>Dental/Vision/Hearing</b><br>[07.05.02.17A(2)(7)pg.28, 29] | Current medicals were missing for four youths at the time of the review. |
|   | 5001112  | <b>Immunization</b><br>[07.05.02.17A(3)pg.28]                 | Two youths are missing their immunizations.                              |
|   | 5001112  | <b>Physical Exam</b><br>[07.05.02.17A(1)(7)pg.28, 29]         | Four youth are missing current physical examinations.                    |
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| has been implemented.   |         |   |   |
| This Provider was cited for the listed COMAR violations which <b>DO NOT</b> present imminent safety risks for children based on impact, scope, and frequency. | 5001112 | <b>30 Day Placement Assessment</b><br>[07.05.04.05Apg5]                         | The assessment provided for the one youth who does not have the document has another youth's information listed.                      |
|   | 5001112 | <b>90 Day Case Plan</b><br>[07.05.04.05Bpg.6]                                   | LDSS and youth signatures are missing for one youth.  |
|   | 5001112 | <b>Casey Life Skills Assessment (30 days)</b><br>[07.05.04.05A(2)pg.5]          | Two youths were missing the document at the time of the review. One youth. One youth assessment was completed outside of the 30 days. |
|   | 5000800 | <b>Con't Treatment Plan</b><br>[7.02.21.08A2pg.7,07.02.21.11pgs.10]             | One youth is missing the LDSS signature on the plan at the time of the review.  |
|   | 5001112 | <b>Documentation of Daily or Weekly Monitoring</b><br>[07.05.04.06G(1)(2)pgs.9] | September 8th, 2022 was the last documented monitoring that was documented monthly not weekly for one youth.                          |
|   | 5001112 | <b>Education/Employment</b><br>[07.05.04.05B(6)(a,b,c)pg.6]                     | Three youth missing current education/employment information at the time of the review.   |
|   | 5000800 | <b>Foster Parent Progress Notes (Daily or wkly)</b><br>[07.02.21.10D(3)pg.9]    | One youth missing daily or weekly notes are required per COMAR.   |
|   | 5000800 | <b>Initial Treatment Plan</b><br>[07.02.21.08A1pgs.6&7]                         | LDSS signature missing for the treatment plan of one youth.   |
|   | 5001112 | <b>Reference Check</b><br>[07.05.01.09DPG.15,07.05.01.13B(3)pg.21]              | Two references are missing for one staff person.  |

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|  | 5001112 | <b>Placement Agreement</b><br>[07.05.04.04B(2)a,b,c,dpg<br>.5]                    | Two youths were missing the documentation at the time of the review.              |
|  | 5000800 | <b>TFC Pre-service Training</b><br>[07.05.01.13.B(7)Pg21,0<br>7.02.21.05.A&Bpg.4] | Pre-service missing in the record at the time of the review for one staff person. |

### Office of Licensing and Monitoring Staff Information

| Name  | Role                 | Email  | Date       |
|---|----------------------|--|------------|
| Tawanna Tilghman-Marine<br> | Licensing Specialist | <a href="mailto:tawanna.tilghmanmarine@maryland.gov">tawanna.tilghmanmarine@maryland.gov</a> | 01/18/2023 |
| Nalicia Goods<br>           | Program Manager      | <a href="mailto:nalicia.goods@maryland.gov">nalicia.goods@maryland.gov</a>                   | 01/18/2023 |