



OFFICE OF LICENSING AND MONITORING

Residential Child Care Report Summary

Information

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|--------------------------------|----------------------------------------------------------------------------|
| Provider Organization | Making A Great Individual Contribution (MAGIC), Inc. |
| Name of Program Administrator | Diane Nelson |
| Email of Program Administrator | Diannenelson2467@gmail.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 |
|----------------|------------------|--------------------------|------------|------------|--------------|--------------------|-------------------------|
| Reservoir, 724 | 7 | 12 | 7 | | | #00618 02/28/24 | 6/28/23 |
| Purnell, 2633 | 5 | | 4 | | | #00302 02/28/24 | 6/28/23 |
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| Contracting Agency(s) | |
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Licensing Information

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| Licensing Agency | Maryland Department of Human Services |
| License Type | DHS |
| Type of Inspection | Re-licensure |

Current Status of License

RELICENSED

COMAR Citations

(CAP = Corrective Action Plan)

| | RCC Site | COMAR Citation | Comment | Citation Status (Resolved/CAP) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|--------------------|------------------------------|--------------------------------|
| <p>This Provider was cited for the listed COMAR violations which MAY present safety risks for children based on impact, scope, and frequency. These issues are either resolved or a corrective action plan has been implemented.</p> | Reservoir | 14.31.06.13C pg 35 | Medication log not completed | CAP |
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| <p>This Provider was cited for the listed COMAR violations which DO NOT present imminent safety risks for children based on impact, scope, and frequency.</p> | | | | |
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Office of Licensing and Monitoring Staff Information

| Name | Role | Email | Date |
|----------------------------------------|----------------------|-------------------------------|----------|
| Kisah Jarvis, LMSW <i>Kisah Jarvis</i> | Licensing Specialist | Kisah.Jarvis@maryland.gov | 8/1/2023 |
| Kimberly Brock <i>Kimberly Brock</i> | Program Manager | Kimberly.Brock1 @maryland.gov | 8/1/2023 |