



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

CHILD PLACEMENT AGENCY REPORT

Provider Organization: National Center for Children and Families, Inc.

Licensing Agency: DHS

Contracting Agency(s): DHS, CFSA

Name of Chief Administrator: Dr. Sheryl Chapman

Email: sherylbc@aol.com

License Type: Treatment Foster Care

Type of Inspection: Quarterly

Name and Address of CPA Office	License Capacity	DHR Contract Limit	Census by Placing Agency	License#/ Exp. date	Date of site Inspection
National Center for Children and Families 6391 Greentree Road Bethesda, MD 20817	Unlimited	30 TFC	29	#00063 4/12/2020	01/25/2019
National Center for Children and Families 6404 Ivy Lane, Suite 500 Greenbelt, MD 20770	Unlimited	0	353 (CFSA)	#004700 4/12/2020	01/15/2019

Inspection Summary

Number of Records Reviewed: Youth 0 Staff 15 Foster Parent 13 Adoptive Parent NA

Number of Interviews: Youth 0 Staff 5 Foster Parent 0

CPA Office Inspection: Approved

Number of ILP Apartments Inspected: NA

Number of Foster Homes Inspected: 0

Current COMAR Violation: Yes X No _____

If Yes, list Cited Violation(s) below:

Violation(s)	Findings
07.05.01.13 B(1)	Missing application in 1 out of 15 personnel records.
07.05.01.09 A(2)	CPS clearances received late in 7 out of 15 personnel records.
07.05.02.18 F(5)	Missing record of child placements in 8 out of 13 foster parent records.
07.05.02.18 F(1)	Missing face sheet in 2 out of 13 foster parent records.
07.05.02.06 A(1)	Missing PPD in 1 out of 13 foster parent records.
07.05.02.11 E(10)	Missing school reference in 1 out of 13 foster parent records.
07.05.02.16 G	Missing annual re-certification in 4 out of 13 foster parent records.
07.02.21.09	Home capacity reflects 5 instead of 2.
07.05.02.11 E(7)	Late CPS clearances in 2 out of 13 foster parent records

Corrective Action Plan: Yes X No _____

If yes, date of CAP: 02/06/2019

Any Violations During Mid or Re-Licensure Periods: Yes _____ No X N/A _____

If Yes See Report (s) Date(s):

Complaint Outcome: NA

Current Status of License: Continued

Licensing

Coordinator: Sherlema Ferguson **Date:** 2/6/19 **Email:** sherlema.ferguson@maryland.gov

Program Manager: Richard Berger **Date:** 2/6/19 **Email:** richard.berger@maryland.gov