

OFFICE OF LICENSING AND MONITORING

Child Placement Agency Report Summary

| Information | | | | |
|------------------------------|--------------------------------|--|--|--|
| Provider Organization | Parker Therapeutic Services | | | |
| Name of Chief Administrator | Deanna Dishman | | | |
| Email of Chief Administrator | d.dishman@parkertxservices.com | | | |

CPA Office Information Total DHS Date of Site Other License# Name/Address **License Capacity DHS Census DJS Census Contract Limit** Census **Exp Date** Inspection **Parker Therapeutic Services** 12/4/19 & # 00372 Unlimited 40 940 Madison Avenue, Suite 203 N/A N/A 44 3/6/2020 12/9/19 Baltimore, MD 21202

| Contracting Agency(s) |
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| Licensing Information | | | | |
|---------------------------|---------------------------------------|--|--|--|
| Licensing Agency | Maryland Department of Human Services | | | |
| License Type | Treatment Foster Care | | | |
| Type of Inspection | Quarterly Site Inspection | | | |
| Current Status of License | ACTIVE | | | |

| COMAR Citations | | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| This Provider was cited for the listed COMAR violations which DO NOT present imminent safety risks for children based on impact, scope, and frequency. | CPA Site | COMAR Citation | Comment | | | | |
| | Baltimore City | 07. 02.21.09 | A review of the agency's client and foster parent census revealed that one foster home had exceeded capacity (4 children in the home) without prior justification and approval in writing from the Administration. | | | | |
| | | 07.05.02.17 A (7) | One out of seven client files reviewed did not contain documentation of an annual physical examination. | | | | |
| | | 07.05.01.13 B (1) | One out of two personnel files reviewed did not contain an application. | | | | |
| | | 07.05.01.13. B (5) | One out of two personnel files reviewed did not contain documentation of the staff's credentials. | | | | |
| | | 07.05. 01. 14.C (4) (a) | One out of two personnel files reviewed did not contain documentation of employee's education. | | | | |
| | | 07.05.01.13. A (1) | One out of two personnel files reviewed did not contain a copy job description for the employee's position. | | | | |
| | | 07.05.01.16 A | One out of two employee files reviewed did not contain documentation of orientation. | | | | |
| | | 07.05.01.09 D | Two out of two personnel files reviewed did not contain any references. | | | | |
| | | 07.05.01.13 C (1) | . One of two personnel files reviewed did not contain documentation of a medical examination for the employee. | | | | |
| | | 07.05.01.13 C (2) | One out of two personnel files did not contain documentation of a completed TB test or information indication the employee was free from communicable disease. | | | | |
| | | 07.05.01.10 E | One of two personnel files reviewed did not contain documentation of vehicle insurance. | | | | |
| | | 07.02.21.05 A & B | One of two personnel files reviewed did not contain documentation of the employee completing preservice training prior to beginning employment. | | | | |

| Office of Licensing and Monitoring Staff Information | | | | | | | |
|------------------------------------------------------|-----------------------|----------------------------|------------|--|--|--|--|
| Name | Role | Email | Date | | | | |
| Deborah C. Taylor | Licensing Coordinator | DeborahTaylor@maryland.gov | 12/20/2019 | | | | |
| Richard Berger | Program Manager | RichardBerger@maryland.gov | 12/20/2019 | | | | |