S OFFICE OF LICENSING AND MONITORING

Child Placement Agency Report Summary

Information

Provider Organization	Jumoke, Inc.
Name of Chief Administrator	Zachary Dingle
Email of Chief Administrator	zdingle@jumoke.net

CPA Office Information

Name/Address	License Capacity	Total DHS Contract Limit	DHS Census	DJS Census	Other Census	License# Exp Date	Date of Site Inspection
Jumoke, Inc.	Unlimited	22	10	0	0	#2662 03/09/24	08/24/23

Contracting Agency(s)	Maryland Department of Human Services & Maryland Department of Juvenile Services
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Licensing Information

Licensing Agency	Maryland Department of Human Services		
License Type	Treatment Foster Care		
Type of Inspection	Quarterly		
Current Status of License	ACTIVE		

			(CAP = Corrective Action Plan)	
CPA Site	COMAR Citation	Comment	Citation Status (Resolved/CAP)	
5001391	TB Test [07.05.01.13B(4)pg21&07.05.01.13Cpg.22]	Up to date TB test was not in the record for one staff at the time of the record review.	САР	
	Dental/Vision/Hearing[07.05.02.17A(2)(7)pg.28,29]	Not in the record at the time of the review for four youth.	САР	
	Immunization[07.05.02.17A(3)pg.28]	Not in the record at the time of the review for one youth.	САР	
5001391	Vehicle Insurance[07.05.01.10Epg16]	Not in the record at the time	of the review for three staff.	
	Orientation[07.05.01.13A(4)Pg21,07.05.01.16APg.25]	Not in the record at the time of the review for two staff.		
	Non-TFC Annual Training for Supervisors & Workers 20hrs[07.05.01.13.B(7)Pg21,07.05.01.16B.(1)pg.25]	Not in the record at the time of the review for one staff.		
	Documentation of Education[07.05.01.14Cpg22]	Not in the record at the time of the review for one staff.		
	Birth Certificate/ SS Number [07.05.04.04A(6)(e)(f)Pg4]	Not in the record at the time of the review for one youth.		
	30 Day Placement Assessment[07.05.04.05Apg5]	Not in the record at the time of the review for one youth.		
	90 Day Case Plan[07.05.04.05Bpg.6]	Not in the record at the time of the review for three youth.		
	<u> </u>	Not in the record at the time	6.1	
 	5001391	TB Test[07.05.01.13B(4)pg21807.05.01.13Cpg.22] Dental/Vision/Hearing[07.05.02.17A(2)(7)pg.28,29] Immunization[07.05.02.17A(3)pg.28] Vehicle Insurance[07.05.01.10Epg16] Orientation[07.05.01.13A(4)Pg21,07.05.01.16APg.25] Non-TFC Annual Training for Supervisors & Workers 20hrs[07.05.01.13.B(7)Pg21,07.05.01.16B.(1)pg.25] Documentation of Education[07.05.01.14Cpg22] Birth Certificate/ SS Number[07.05.04.04A(6)(e)(f)Pg4] 30 Day Placement Assessment[07.05.04.05Apg5]	TB Test[07.05.01.13B(4)pg21&07.05.01.13Cpg.22] TB Test[07.05.01.13B(4)pg21&07.05.01.13Cpg.22] TB Test[07.05.01.13B(4)pg21&07.05.01.13Cpg.22] To tin the record for one staff at the time of the record review. Not in the record at the time of the review for four youth. Immunization[07.05.02.17A(2)(7)pg.28,29] Not in the record at the time of the review for one youth. Vehicle Insurance[07.05.01.10Epg16] Not in the record at the time Orientation[07.05.01.13A(4)Pg21,07.05.01.16APg.25] Not in the record at the time Non-TFC Annual Training for Supervisors & Workers 20hrs[07.05.01.13.B(7)Pg21,07.05.01.16B.(1)pg.25] Documentation of Education[07.05.01.14Cpg22] Not in the record at the time Number[07.05.04.04A(6)(e)(f)Pg4] 30 Day Placement Assessment[07.05.04.05Apg5] Not in the record at the time	

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Documentation of Daily or Weekly Monitoring [07.05.04.06G(1)(2)pgs.9]	Not in the record at the time of the review for four youth.
Progress Notes[07.05.04.10pg.13]C	Not in the record at the time of the review for four youth.

Office of Licensing and Monitoring Staff Information

Name	Role	Email	Date	
Shawnae Lowery Slaw L	Licensing Specialist	Shawnae.lowery1@maryland.gov	09/05/2023	
Nalicia Goods	Program Manager	nalicia.goods@maryland.gov	9/5/2023	