

Center Licensing Inspection Full Report

All licensed child care programs are inspected at least once each year. Non-compliances are documented and grouped as Serious, Moderate or Low risk violations. Documenting statements and supplemental information may be included in this report. Licensing inspection reports from the previous three years can be viewed on the child care website at http://jfs.ohio.gov/CDC/childcare.stm. This includes complaint investigation reports with substantiated allegations. For any other child care records, please contact the Child Care Help Desk at 1-877-302-2347, option 4.

	Program Det	ails		
Program Name	Program Number		Program Type	
LCCAA Head Start Lagrange	2190020231		Child Care Center	
Address 12079 Lagrange Rd. Lagrange OH 44050			County LORAIN	
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½	
Fire Inspection Approval Date 08/05/2021	Food Service Risk L Level II	Food Service Risk Level Level II		

Inspection Information				
Inspection Type	Inspection So	cope	Inspection Notice	
Annual	Full		Unannounced	
Inspection Date 12/17/2021	Begin Time 8	:00 AM	End Time 12:46 PM	
Reviewer:			·	
ELAINE OBRIEN				
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
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License Capacity and Enrollment at the Time of Inspection				
Age Group	License Capacity	Enrollment		
	Totals	Full Time	Part Time	Total
Infant (Birth to < 18 m)		0	0	0
Young Toddler		0	0	0
Total Under 2 ½ Years	0	0	0	0
Older Toddler		0	0	0
Preschool		18	0	18
School Age		0	0	0
Total Capacity/Enrollment	20	18	0	18

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment

Orange Room	Mixed Age Group	2 to 10	Head Start
			Classroom
			Arrival
Orange Room	Mixed Age Group	2 to 12	Breakfast

Summary of Non-Compliances

If the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited. Ohio Administrative Code 5101: 2-12-03 details the process for submitting a request for a review if a program disagrees with a licensing finding. The request for review must be submitted within seven days from the receipt of the licensing report.

Serious Risk Non-Compliances		
Serious Hisk Heir Compliances		
No Serious Risk Non-Compliances were observed during this inspection		
Moderate Risk Non-Compliances		
No Moderate Risk Non-Compliances were observed during this inspection		
Low Risk Non-Compliances		

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

<u>Code</u>: The program staff medicals are required to include all information.

<u>Finding</u>: In review of the staff records, it was determined that the medical statements for those employees listed on the Employee Record Chart did not include the required information listed below in number(s)3b.

- 1. Date of examination;
- 2. Signature, business address, and telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination;
- 3. A statement that verifies that the employee is:
- a. Physically fit for employment in a program caring for children;
- b. Immunized against Tetanus, Diphtheria, Pertussis (Tdap);
- c. Immunized against Measles, Mumps, and Rubella (MMR);
- 4. Tuberculosis (TB) screening/test
- a. Documentation of the screening process to determine if the employee resided in a country identified by the World Health Organization as having a high burden of TB and arrived in the United States within the five years preceding the date of application for employment;
- b. Results of a TB test for employees meeting both criteria in 4a;
- c. Results of additional testing for employees with a positive TB test;
- d. Written statement, signed by a representative of the TB control unit, that the employee's TB is no longer infectious or the individual is receiving a TB treatment regimen for employees with a positive TB test.

Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, or TB results/documentation, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/16/2022

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-02 License Posted	Compliant	Documenting Statement: The license was in a location visible to parents as required.

Rule	Status	Documenting Statement(s), If applicable

5101:2-12-02 Current Information	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-03 Inspection	Compliant	
Requirements		
Dula	Ctatus	Decumenting Statement(s) If applicable
Rule 5101:2-12-04 Building Department	Status Compliant	Documenting Statement(s), If applicable
Inspection	Compliant	
more control of the c		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Fire Inspection	Compliant	Documenting Statement: Please Note:
		Documentation of a fire inspection
		without any uncorrected violations must
		be secured for the program. Secure a
		new fire inspection by August 5, 2021.
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Food Service	Compliant	Documenting Statement: The food service
Requirements		license was observed posted. Following is
		the audit number and date of expiration:
		CKNL-BYSHH5 Expires March 1, 2022.
Rule: 5101:2-12-04 Food Service	Compliant	Documenting Statement: The off-site
Requirements		food processing establishment's current
		Ohio Department of Agriculture
		registration information was observed
		during the inspection.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	
Qualifications		
	l e	
Rule 5101:2-12-07 Administrator	Status	Documenting Statement(s), If applicable
Responsibilities/Requirements	Compliant	
nesponsibilities/ nequilements	l	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Written Program	Compliant	
Policies and Procedures		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Child Care Staff Member	Compliant	
Educational Requirements		
Rule	Status	Documenting Statement(s), If applicable

F101:2 12 09 Orientation Training 9	Compliant	
5101:2-12-08 Orientation Training & Whistle Blower Protection	Compliant	
willstie Blower Protection		
Rule	Charlie	Documenting Statement(s), If applicable
Rule: 5101:2-12-09 Background Check	Status	Documenting Statement(s), if applicable Documenting Statement: During the
Requirements	Compliant	inspection, the required documentation
Requirements		regarding background checks was on file
		for all employees listed.
		Tot all employees listed.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-10 Health Training	Compliant	Documenting Statement: The program
Requirements		had at least one Child Care Staff Member
'		with currently valid training in First Aid,
		Management of Communicable Disease,
		CPR, and Child Abuse Prevention present
		and readily accessible during all hours of
		operation.
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-10 Professional	Compliant	
Development Requirements		
	Lac	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space	Compliant	
Requirements		
Rule	Status	Decumenting Statement(s) If applicable
5101:2-12-11 Outdoor Space	Compliant	Documenting Statement(s), If applicable
Requirements	Compliant	
Requirements	<u> </u>	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Equipment	Compliant	2004. Heriting ottatement(3), it applicable
Table 12 22 23 3333. Tay Equipment		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Fall Zones	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Environment	Compliant	bocumenting statement(s), if applicable
5101.2-12-12 Sale LIMITUIIIIEIIL	Complant	
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Rule	Status	Documenting Statement(s), If applicable
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5101:2-12-13 Sanitary Equipment and Environment	Compliant	
Rule	Status	Documenting Statement(s) If applicable
5101:2-12-13 Handwashing	Compliant	Documenting Statement(s), If applicable
9	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free	Compliant	bocumenting statement(s), if applicable
	Compliant	
Environment		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Child Medical and	Compliant	Documenting Statement: At the time of
Enrollment Records	Compliant	the inspection, 25% of the children's
Linoimient Records		records were reviewed, and the records
		were complete, as required by the rule.
		were complete, as required by the rule.
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Medical/Physical	Compliant	Documenting Statement: The program
Care Plans	Compliant	had current information on the medical
Care rians		status and the required treatment plan
		for the children with health conditions.
		Tor the children with health conditions.
Rule	Status	Documenting Statement(s), If applicable
Rule 5101:2-12-16 Medical, Dental, and	Status Compliant	Documenting Statement(s), If applicable
		Documenting Statement(s), If applicable
5101:2-12-16 Medical, Dental, and		Documenting Statement(s), If applicable
5101:2-12-16 Medical, Dental, and		Documenting Statement(s), If applicable Documenting Statement(s), If applicable
5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	
5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	Documenting Statement(s), If applicable
5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	Documenting Statement(s), If applicable Documenting Statement: Documentation
5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and
5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified
5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified
5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection. Documenting Statement(s), If applicable
S101:2-12-16 Medical, Dental, and General Emergency Plan Rule Rule: 5101:2-12-16 Emergency Drills Rule Rule: 5101:2-12-16 First Aid/Standard	Status Compliant	Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection. Documenting Statement(s), If applicable Documenting Statement: During the
S101:2-12-16 Medical, Dental, and General Emergency Plan Rule Rule: 5101:2-12-16 Emergency Drills Rule	Status Compliant Status Status	Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection. Documenting Statement(s), If applicable Documenting Statement: During the inspection, the program had complete
S101:2-12-16 Medical, Dental, and General Emergency Plan Rule Rule: 5101:2-12-16 Emergency Drills Rule Rule: 5101:2-12-16 First Aid/Standard	Status Compliant Status Status	Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection. Documenting Statement(s), If applicable Documenting Statement: During the
S101:2-12-16 Medical, Dental, and General Emergency Plan Rule Rule: 5101:2-12-16 Emergency Drills Rule Rule: 5101:2-12-16 First Aid/Standard	Status Compliant Status Status	Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection. Documenting Statement(s), If applicable Documenting Statement: During the inspection, the program had complete
S101:2-12-16 Medical, Dental, and General Emergency Plan Rule Rule: 5101:2-12-16 Emergency Drills Rule Rule: 5101:2-12-16 First Aid/Standard Precautions	Status Compliant Status Compliant Status Compliant	Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection. Documenting Statement(s), If applicable Documenting Statement: During the inspection, the program had complete first aid kits available as required.
Rule Rule: 5101:2-12-16 First Aid/Standard Precautions Rule Rule: S101:2-12-16 First Aid/Standard Precautions	Status Compliant Status Compliant Status Compliant	Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection. Documenting Statement(s), If applicable Documenting Statement: During the inspection, the program had complete first aid kits available as required. Documenting Statement(s), If applicable
Rule Rule: 5101:2-12-16 First Aid/Standard Precautions Rule Rule: 5101:2-12-16 First Aid/Standard Rule: 5101:2-12-16 First Aid/Standard	Status Compliant Status Compliant Status Compliant	Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection. Documenting Statement(s), If applicable Documenting Statement: During the inspection, the program had complete first aid kits available as required. Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement: The JFS 08087
Rule Rule: 5101:2-12-16 First Aid/Standard Precautions Rule Rule: 5101:2-12-16 First Aid/Standard	Status Compliant Status Compliant Status Compliant	Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection. Documenting Statement(s), If applicable Documenting Statement: During the inspection, the program had complete first aid kits available as required. Documenting Statement(s), If applicable Documenting Statement: The JFS 08087 "Communicable Disease Chart" was
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Rule Rule: 5101:2-12-16 First Aid/Standard Precautions Rule Rule: 5101:2-12-16 First Aid/Standard Precautions	Status Compliant Status Compliant Status Compliant	Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection. Documenting Statement(s), If applicable Documenting Statement: During the inspection, the program had complete first aid kits available as required. Documenting Statement(s), If applicable Documenting Statement: The JFS 08087 "Communicable Disease Chart" was
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Deglinang:		
5101:2-12-16 Incident/Injury	Compliant	
Reporting		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Written Disaster Plan	Compliant	3 (" 11
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Schedule	Compliant	(), ()
3101.2 12 17 Bully Schedule	Compilation	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Materials and	Compliant	bocumenting statement(s), it applicable
	Compilant	
Equipment		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child
		ratios observed during the inspection
		were in compliance.
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Group Size	Compliant	Documenting Statement: The group sizes
		observed on the day of the inspection
		were in compliance.
		were in compliance.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Attendance	Compliant	Documenting Statement: During the
Records		inspection, attendance records were
		reviewed. Child Care Staff Members were
		viewed recording the attendance for each
		child upon arrival and departure. All
		attendance records met the requirements
		of the rule and were kept with the group
		at all times.
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Supervision	Compliant	Booking statement(o), it applicable
3101.2 12 13 Supervision	Compilation	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cots and Napping	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Meal and Snack	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Fluid Milk Requirements	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food	Compliant	
Handling/Storage		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-25 Medication	Compliant	Documenting Statement: The program
Administration		had complete written documentation for
		administering medication or food
		supplements.