

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 Deta	ils	
Program Name	Program Number		Program Type
LANCASTER HEAD START CENTER -	000000408857		Child Care Center
SANDERSON CENTER			
Address	N.S.		County
1450 Marietta Road Lancaster			FAIRFIELD
ОН			
43130			
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
08/27/2018	E		
Fire Inspection Approval Date	Food Service Risk Level		
08/13/2024	Level III		

	Insp	ection Information		
Inspection Type Annual	Inspection Sc Full	cope	Inspection Notice Unannounced	
Inspection Date 02/18/2025	Begin Time 8:50 AM		End Time 12:50 PM	
Inspection Date 02/19/2025	Begin Time 7:10 AM		End Time 7:55 AM	
Inspection Date 02/19/2025 Reviewer:	/19/2025 3:29 PM 3:43 PM			
LISA NUTTER Reviewer:				
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N = Dule = Venified		mmary of Findings	No Madauta Diala	No. Low Piele
No. Rules Verified 58	No. Rules with Non-compliances 3	No. Serious Risk 0	No. Moderate Risk 1	No. Low Risk 2

License Capacity and Enrollment at the Time of Inspection				
Age Group	License Capacity	License Capacity Enrollment		
00002 W	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		131	16	147
School Age		0	0	0
Total Capacity/Enrollment	200	131	16	147

	Staff-Child Ratios at the Time of Inspection					
Group	Age Group/Range	Ratio Observed	Comment			
room 9	3 years to < 4 years	2 to 14				
room 9	3 years to < 4 years	2 to 14				
Room 18	3 years to < 4 years	2 to 12				
Room 18	3 years to < 4 years	2 to 12				
room 16	3 years to < 4 years	2 to 16				
room 16	3 years to < 4 years	2 to 16	leaving for field			
			trip			
room 19	3 years to < 4 years	2 to 12				
room 19	3 years to < 4 years	2 to 12				
room 13	3 years to < 4 years	2 to 13				
room 13	3 years to < 4 years	2 to 13	y.			
room 8	3 years to < 4 years	2 to 14				
room 8	3 years to < 4 years	2 to 14	gross motor room			
room 7	3 years to < 4 years	2 to 16				
room 7	3 years to < 4 years	2 to 16				
room 2	3 years to < 4 years	2 to 8				
room 2	3 years to < 4 years	2 to 8				

Summary of Non-Compliances

If a program disagrees with a licensing finding, the program may request a review of the finding(s). Ohio Administrative Code 5101:2-12-03 and 5101:2-13-03 detail the process for submitting a request for review. The request for review must be submitted within seven business days from the receipt of the licensing report. In addition, if the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited.

Serious Risk Non-Compliances		
No Serious Risk Non-Compliances were observed during this inspection		
The content that the content to the		



Moderate Risk Non-Compliances

Domain: 09 Children's Files

Rule: 5180:2-12-15 Medical/Physical Care Plans

<u>Code</u>: The program is required to have a completed JFS 01236 "Child Medical/Physical Care Plan for Child Care" on file at the program for any child having a health condition and must implement and/or follow instructions on the plan. The program is required to have staff trained to perform the procedures on the JFS 01236 "Child Medical/Physical Care Plan for Child Care" present at the program when the child requiring the procedure is onsite. Only staff who have been trained shall be permitted to perform the procedures listed on the JFS 01236.

<u>Finding</u>: In review of the children's records, it was determined the program did not meet the requirements for caring for at least one child, indicated on the Children Records Review, with a condition that requires a JFS 01236 "Child Medical/Physical Care Plan" as noted in number(s) 39 below:

1. No plan was on file.

(Page 1)

- 2. Child's name was missing.
- 3. Name of the condition was missing.
- 4. Indication if medication or medical food is required was missing.
- 5. Signs, symptoms or situations that require staff to take action were missing.
- 6. Activities, foods, environmental conditions to avoid were missing.
- 7. Training instructions for procedures for staff to follow were missing or incomplete.

(Page 2)

- 8. Child's name was missing or not attached.
- 9. Child's date of birth was missing or not attached.
- 10. Child's weight was missing or not attached.
- 11. Name of the medication/medical food was missing or not attached.
- 12. Dosage of medication/medical food to be administered was missing or not attached.
- 13. Time for medication/medical food to be administered was missing or not attached.
- 14. Expiration date for medication/medical food was missing or not attached.
- 15. Symptoms that require staff to administer medication/medical food were missing or not attached.
- 16. Specific instructions to administer the medication/medical food were missing or not attached.
- 17. Actions to be taken if the symptoms do not subside were missing or not attached.
- 18. Physician's signature was missing or not attached.
- 19. The date of the physician's signature was missing or not attached.

(Page 3)

- 20. Child's name was missing.
- 21. Instructions regarding emergency evacuation, if applicable, were missing.
- 22. Signature of parent granting permission to implement the plan and verifying training was missing.
- 23. Date of parent signature was missing.
- 24. Certified Professional Trainer information was missing.
- 25. Signature of certified professional who trained the program staff was missing, if parent was not the trainer.
- 26. Date of trainer signature was missing.
- 27. Printed name(s) of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.



- 28. Signature(s) of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
- 29. Date of staff signature was missing.
- 30. Administrator/Provider signature was missing
- 31. Date of administrator/Provider was missing. (Page 4)
- 32. Child's name was missing.
- 33. Name of medication or medical food was missing.
- 34. Date the medication/medical food was administered was missing.
- 35. Time medication/medical food was administered was missing.
- 36. Dosage of medication/medical food that was administered was missing.
- 37. Signature of person administering medication/medical food was missing.
- 38. The plan was not followed or implemented.
- 39. The plan was not able to be implemented due to conflicting information. (medication was given at a different time than was indicated on the prescription label and the JFS 1236)
- 40. None of the child care staff members trained in the procedures on the JFS 01236 were onsite when a child requiring the plan was present.
- 41. Child care staff members trained in the procedures on the JFS 01236 were not scheduled to be present the entire the time the child requiring the plan was onsite.
- 42. None of the child care staff members trained in the procedures on the JFS 01236 accompanied the child requiring the plan during a trip.
- 43. A child care staff member who had not been trained in the procedures on the JFS 01236 performed the procedure.
- 44. Medication listed in the procedures to follow was not onsite available to administer as instructed and alternate instructions for this situation were not included on the plan.

Provide staff training. Submit the program's corrective action plan, which includes a copy of the completed JFS 01236, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/21/2025

Low Risk Non-Compliances

Domain: 08 Staff Files

Rule: 5180:2-12-08 Orientation Training & Whistle Blower Protection

<u>Code</u>: The program is required to have staff complete the online staff orientation training. Additionally, the training must be completed before they are permitted to have sole responsibility of children.



<u>Finding</u>: In review of the staff records, it was determined that child care staff member(s) did not meet the requirements for completing the online orientation training as noted in number(s) 1 below:

- 1. The training was not completed within 30 days of starting employment at the program as a child care staff member.
- 2. Documentation of completing the training after December 31, 2016 was not on file.
- 3. Completion of the training was not verified in the OPR.
- 4. A child care staff member had sole responsibility of children and had not completed the online orientation.

Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/21/2025

Domain: 09 Children's Files

Rule: 5180:2-12-15 Child Medical and Enrollment Records

<u>Code</u>: The program is required to have a completed medical on file at the program for each child enrolled.

<u>Finding</u>: In review of 25% of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in number(s) 7 and 9 below:

- 1. No medical was on file for at least one child
- 2. Medical(s) on file was not updated every 13 months
- 3. Medical(s) were missing child's name and date of birth
- 4. Medical(s) were missing the date of the medical examination
- 5. The date of the exam was more than 13 months prior to the date the form was signed.
- 6. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care
- 7. Medical(s) were missing the signature, business address and telephone number of the physician, physician's assistant(PA), advance practice nurse (APN) or certified
- nurse practitioner (CNP) who examined the child
- 8. Medical(s) were missing a record of immunizations the child has had specifying month, day and year
- 9. Medical(s) were missing a statement from the physician, PA, APN, or CNP that the child has been immunized or is in the process of being immunized against the diseases
- required by division 5104.014 of the Revised Code and found in appendix A to this rule
- 10. Medical(s) were missing a statement from the child's parent or guardian that he or she has declined to have the child immunized against the disease for reasons of

conscience, including religious convictions

11. Other []

Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.



Rules In-Compliance/Not Verified

Rules In-Compliance/Not Verified		
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-16 Written Disaster	Compliant	Documenting Statement: Annual training
Plan		of the written disaster plan was
		completed by staff.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-02 License Posted	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-04 Building Department	Compliant	
Inspection		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-02 Current Information	Compliant	
L		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-03 Inspection	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-04 Fire Inspection	Compliant	Documenting Statement: Although the
		program had documentation of a current
		fire inspection without any uncorrected
		violations at the time of the licensing
		inspection, the program did not have the
		fire inspection completed within 12
		months from the date of the last fire
		inspection without any uncorrected
		violations. Please ensure that fire



		inspections are completed in accordance with the rule requirements.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-04 Food Service Requirements	Compliant	Documenting Statement: The food service license was observed posted. Following is the audit number and date of expiration: MDAYD2FMDK 3/1/25.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-07 Administrator Qualifications	Compliant	Documenting Statement(s), if applicable
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-07 Administrator Responsibilities/Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-07 Written Program Policies and Procedures	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-08 Medical Statement	Compliant	Documenting Statement: All employees had current medical statements on file.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-08 Child Care Staff Member Educational Requirements	Compliant	bocumenting statement(s), if applicable
Rule: 5180:2-12-09 Background Check	Status Compliant	Documenting Statement(s), If applicable Documenting Statement: During the
Requirements	Compilant	inspection, the required documentation regarding background checks was on file for all employees listed.
Pula	Ctatus	Decumenting State
Rule 5180:2-12-10 Health Training	Status Compliant	Documenting Statement(s), If applicable
Requirements		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-10 Professional	Compliant	Documenting Statement: At the time of
Development Requirements		the inspection, all child care staff members had completed the required amount of professional development training.



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Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Indoor Space	Compliant	Bootamenting Statement(5)) in applicable
	Compilant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Outdoor Space	Compliant	
	Compilant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-12 Safe Equipment	Compliant	Documenting Statement: Equipment was
	Compilant	observed to be in good condition.
		observed to be in good condition.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Outdoor Play Equipment	Compliant	, , , , , , , , , , , , , , , , , , ,
5155.2 12 11 Odlador Flay Equipment	Compilant	
	Laster vision	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Outdoor Play Fall Zones	Compliant	
		<u> </u>
Rule	Status	Desumenting Statement(s) If applicable
	1975 Carlot Carl	Documenting Statement(s), If applicable
Rule: 5180:2-12-12 Safe Environment	Compliant	Documenting Statement: A safe
		environment was observed during the
		inspection. Children were protected from
		items and conditions which threaten their
		CONTRACTOR DESCRIPTION OF THE PROPERTY OF THE
		health, safety and well-being.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-13 Sanitary	Compliant	Documenting Statement: On the day of
And the desired of the second	Compilant	and the second s
Equipment and Environment		the inspection, the program provided a
		clean environment in accordance with
		Appendix A of this rule, which included
		the furniture, materials and equipment.
		the furniture, materials and equipment.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-13 Handwashing	Compliant	
Requirements		
Nequirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-13 Smoke Free	Compliant	
Environment		
LEUALOUMEUT		
	No.	
Rule	Status	Documenting Statement(s), If applicable



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5180:2-12-13 Toothbrushing	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-14 Transportation and Field	Compliant	Decamenting Seatorness (s), it approaches
Trip Procedures	Compilant	
Trip Procedures	r.	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-14 Transportation - Driver	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-14 Transportation - Vehicle	Compliant	
Requirements		
nequirements	1	
Pulo	Status	Desumenting Statement/s\ If and its la
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-16 Medical, Dental,	Compliant	Documenting Statement: On the day of
and General Emergency Plan		the inspection, the complete prescribed
		JFS 01242 "Medical, Dental, and General
		Emergency Plan For Child Care" were
		posted in the program as required.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-16 Emergency Drills	Compliant	Documenting Statement: Documentation
Hale: 5100.2 12 10 Emergency Drins	Compilant	for completed fire, weather, and
		·
		emergency/lockdown drills was verified
		during this inspection.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-16 First Aid/Standard	Compliant	Documenting Statement: During the
Precautions		inspection, the program had complete
And the state of t		first aid kits available as required.
	1	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Management of		Bodumenting statement(s), if applicable
	Compliant	
Communicable Disease	1	
	18	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Incident/Injury	Compliant	
Reporting		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-17 Materials and	Compliant	,
Equipment	- Simplication	
Lydipinent	L	
D. I.	Charles	D
Rule	Status	Documenting Statement(s), If applicable



5180:2-12-17 Daily Schedule	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-18 Attendance Records	Compliant	Documenting Statement: During the 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.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 Group Size	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-17 Daily Outdoor Play	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 License Capacity	Compliant	(-),
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 Ratio	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-20 Cots and Napping	Compliant	Bocamenting statement(s), it applicable
Rule 5180:2-12-19 Supervision	Status Compliant	Documenting Statement(s), If applicable
Dula	Chatura	Declinearing State or sut/a) If a wall-all-
Rule 5180:2-12-19 Child Guidance	Status Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Meal and Snack	Compliant	Documenting statement(s), it applicable
Requirements	Соттриать	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Safe Food Handling/Storage	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Fluid Milk Requirements	Compliant	
Dulo	Chatus	Decumenting Statement(s) If applicable

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-25 Medication	Compliant	
Administration		