



## 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 Details   |                                   |                                   |                        |
|---|-----------------------------------|-----------------------------------|------------------------|
| Program Name<br>Massillon Family YMCA @ West Elementary | Program Number<br>2250032407      | Program Type<br>Child Care Center |                        |
| Address<br>282 29th Street NW Massillon<br>OH<br>44647  |                                   | County<br>STARK                   |                        |
| Inspection Information                                  |                                   |                                   |                        |
| Building Approval Date<br>08/04/2025                    | Use Group/Code<br>E               | Occupancy Limit<br>82             | Maximum Under 2 ½<br>0 |
| Fire Inspection Approval Date<br>08/04/2025             | Food Service Risk Level<br>Exempt |                                   |                        |

| Inspection Information         |                          |                                  |
|--------------------------------|--------------------------|----------------------------------|
| Inspection Type<br>Provisional | Inspection Scope<br>Full | Inspection Notice<br>Unannounced |
| Inspection Date<br>04/09/2026  | Begin Time<br>4:15 PM    | End Time<br>6:39 PM              |
| Reviewer:<br>MICHELE FAKAN     |                          |                                  |

| Summary of Findings      |                                     |                       |                        |                   |
|--------------------------|-------------------------------------|-----------------------|------------------------|-------------------|
| No. Rules Verified<br>58 | No. Rules with Non-compliances<br>2 | No. Serious Risk<br>0 | No. Moderate Risk<br>1 | No. Low Risk<br>1 |

| 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     |
| <b>Total Under 2 ½ Years</b>                              | 0                | 0          | 0         | 0     |
| Older Toddler   |                  | 0          | 0         | 0     |
| Preschool   |                  | 0          | 0         | 0     |
| School Age  |                  | 0          | 69        | 69    |
| <b>Total Capacity/Enrollment</b>                          | 60               | 0          | 69        | 69    |

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

|               |                          |         |               |
|---------------|--------------------------|---------|---------------|
| school age pm | School-Age to < 11 years | 3 to 19 | ratio 4:30 pm |
| school age pm | School-Age to < 11 years | 3 to 4  | ratio 5:30 pm |

### 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 5180:2-12-03 and 5180:2-13-03 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**

### Moderate Risk Non-Compliances

**Domain: 08 Staff Files**

Rule: 5180:2-12-09 Background Check Requirements

Code: The program is required to have all staff request background checks as required and receive a JFS 01176 or preliminary approval from ODJFS prior to allowing an individual to engage in assigned duties or be near children.

Finding: In review of the staff records, it was determined that background checks did not meet the requirements of the rule for the person(s) listed on the Employee Record Chart as noted in number 2 below:

1. The request for a background check for child care was not submitted in the OPR.
2. The fingerprints were not submitted electronically according to the process established by BCI.
3. The individual(s) had engaged in assigned duties or were near children and preliminary approval from ODJFS was not on file.
4. Background checks were not updated every five years.

Submit the program's corrective action plan, which includes a copy of the JFS 01176, or a copy of the preliminary approval or a statement that the individual(s) are no longer engaged in assigned duties and are not near children until the preliminary approval has been received, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/10/2026

**Low Risk Non-Compliances**

**Domain: 09 Children's Files**

Rule: 5180:2-12-25 Medication Administration

Code: The program is required to remove all medication, medical foods and topical products that are no longer being administered or have expired. The program is also required to maintain current documentation to administer medications, medical foods and topical products.

Finding: During the inspection, it was determined that medication, medical foods and/or topical products did not meet the requirement(s) for administering medication, medical foods, and/or medical products as noted in number 2 below:

1. The medication, medical food, or topical product was no longer needed and had not been removed from the program.
2. The medication, medical food, or topical product had expired and had not been removed from the program.
3. The prescription label had expired.

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

Corrective Action Plan Due: 05/09/2026

**Rules In-Compliance/Not Verified**

| Rule | Status | Documenting Statement(s), If applicable |
|------|--------|---|
|------|--------|---|

|   |               |  |
|---|---------------|--|
| Rule: 5180:2-12-16 Written Disaster Plan                      | Compliant     | Documenting Statement: The program's written disaster plan was reviewed during the inspection and met the requirements.                |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5180:2-12-02 License Posted                                   | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5180:2-12-02 Current Information                              | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5180:2-12-03 Inspection Requirements                          | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5180:2-12-04 Fire Inspection                                  | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5180:2-12-04 Food Service Requirements                        | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5180:2-12-07 Administrator Qualifications                     | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5180:2-12-07 Administrator Responsibilities/Requirements      | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| Rule: 5180:2-12-07 Written Program Policies and Procedures    | Compliant     | Documenting Statement: No changes have been made to the written policies and procedures since it was last approved by this Department. |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5180:2-12-08 Medical Statement                                | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5180:2-12-08 Child Care Staff Member Educational Requirements | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |

|   |               |  |
|---|---------------|--|
| 5180:2-12-08 Orientation Training & Whistle Blower Protection | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5180:2-12-10 Health Training Requirements                     | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5180:2-12-10 Professional Development Requirements            | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5180:2-12-11 Outdoor Space Requirements                       | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5180:2-12-11 Indoor Space Requirements                        | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5180:2-12-11 Outdoor Play Equipment                           | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5180:2-12-11 Outdoor Play Fall Zones                          | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5180:2-12-12 Safe Equipment                                   | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5180:2-12-12 Safe Environment                                 | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5180:2-12-13 Sanitary Equipment and Environment               | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5180:2-12-13 Handwashing Requirements                         | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| Rule: 5180:2-12-13 Smoke Free Environment                     | Compliant     | Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program. |

| Rule   | Status    | Documenting Statement(s), If applicable   |
|--|-----------|---|
| Rule: 5180:2-12-15 Child Medical and Enrollment Records        | Compliant | Documenting Statement: At the time of the inspection, medical statements for the children were not needed as all children enrolled attended a grade of kindergarten or above in an elementary school. |
| Rule: 5180:2-12-15 Medical/Physical Care Plans                 | Compliant | Documenting Statement: The program had current information on the medical status and the required treatment plan for the children with health conditions.   |
| Rule: 5180:2-12-16 Medical, Dental, and General Emergency Plan | Compliant |   |
| Rule: 5180:2-12-16 Emergency Drills                            | Compliant |   |
| Rule: 5180:2-12-16 First Aid/Standard Precautions              | Compliant |   |
| Rule: 5180:2-12-16 Management of Communicable Disease          | Compliant |   |
| Rule: 5180:2-12-16 Incident/Injury Reporting                   | Compliant |   |
| Rule: 5180:2-12-18 Attendance Records                          | Compliant |   |
| Rule: 5180:2-12-18 Group Size                                  | Compliant |   |
| Rule: 5180:2-12-17 Daily Schedule                              | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |

| 5180:2-12-17 Materials and Equipment              | 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   |
| Rule: 5180:2-12-18 Ratio                          | Compliant | Documenting Statement: The Appendix A "Staff/Child Ratios, Age Grouping and Maximum Group Size" was posted in a noticeable area at the program as required. |
| Rule: 5180:2-12-18 Ratio                          | Compliant | Documenting Statement: Staff/child ratios observed during the inspection were in compliance.  |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5180:2-12-19 Supervision                          | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5180:2-12-19 Child Guidance                       | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5180:2-12-22 Meal and Snack Requirements          | Compliant |   |
| 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 |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5180:2-12-04 Building Department Inspection | Compliant | Documenting Statement: This program serves only school age children in a public or chartered non-public school building.                                    |



**Department of  
Children & Youth**