Department of Children & Youth

Family Child Care 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 BURGAN, LAVONNE D	Program Number 000000964187390	Program Type FCC - Type B Home
Address 1003 49TH ST NW CANTON OH 44709		County STARK

Inspection Information		
Inspection Type Compliance	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 04/15/2025	Begin Time 10:30 AM	End Time 12:00 PM
Reviewer: Leah Casenhiser		

Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
69	13	0	1	15

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		1	0	1
Total Under 2 Years	3	1	0	1
Older Toddler		1	0	1
Preschool		3	0	3
School Age		2	0	2
Total Capacity/Enrollment	6	6	0	7

Staff-Child Ratios at the Time of Inspection			
Group	**Age Group/Range**	**Ratio Observed**	**Comment**
Lavonne Burgan	Mixed Age Group	2 to 5	

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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

Moderate Risk Non-Compliances

Domain: 04 Indoor/Outdoor Space

Rule: 5180:2-13-11 Fall Zone
Code: The program is required to have an adequate fall surface on the outdoor playground.

Findings: During the inspection, it was determined that the playground did not have adequate fall surface under and around equipment as noted in the following number 1 below:

1. No fall surface
2. Adequate fall surface to soften the impact of a fall
3. Other [ ]

Any equipment designed for climbing, swinging, bouncing, or sliding needs a fall zone of protective material resilient under and around the equipment in order to protect children in the event of a fall. Submit the program's corrective action plan, which includes written verification of the discontinued use of this equipment until corrections are made along with a description of the resilient material added, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/15/2025

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Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5180:2-13-03 Inspection Requirements
Code: The program is required to respond to all non-compliances by the date noted in the inspection report.

Findings: During the inspection, it was determined the program had not responded to the non-compliances addressed in the inspection report dated 09/12/2024. The rule requires the program complete and submit a corrective action plan in OCLQS to address non-compliances detailed in written inspection reports within the timeframe outlined in the report. Submit the program's corrective action plan, which includes a statement that current and future corrective action plans will be submitted timely, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/15/2025

Domain: 00 License & Approvals

Rule: 5180:2-13-04 Fire Safety for Type B Homes
Code: The program is required to maintain smoke alarms in the appropriate areas of the program building.

Findings: During the inspection, it was determined that the Type B Home did not have a working smoke alarm in the basement & upstairs in accordance with manufacturer's recommendations. A working smoke alarm must be placed, installed, tested, and maintained in accordance with manufacturer's recommendations. Submit the program's corrective action plan to verify compliance with this rule.

Corrective Action Plan Due: 05/15/2025

Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-13-12 Safe Environment
Code: The program is required to store cleaning and sanitizing supplies in a place that is inaccessible to children. Cleaning agents, aerosol cans and chemical substances must be stored in their original container or clearly labeled. School-age children may use cleaning supplies and equipment with adult supervision.

Findings: During the inspection, cleaning and sanitizing equipment and supplies were not used or stored properly as noted in number 7 below:

1. Cosmetics were accessible to children in the [ ] area.
2. Disinfecting wipes were accessible to children in the [ ] area.
3. Fish food was accessible to children in the [ ] area.
4. Hand lotion was accessible to children in the [ ] area.
5. Hand sanitizer (for children under 24 months) was accessible to children in the [ ] area.

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6. Laundry detergent was accessible to children in the [ ] area.
7. Powder dish washing soap was accessible to children in the kitchen area.
8. Paint cans were accessible to children in the [ ] area.
9. White out was accessible to children in the [ ] area.
10. Potting Soil was accessible to children in the [ ] area.
11. Other potentially hazardous substance [ ] was accessible to children in the [ ] area.
12. Cleaning/sanitizing supplies had not been clearly labeled.
13. School-age children were using cleaning supplies, agents and/or equipment without adult supervision.
14. A spray aerosol was used in the [ ] group while children were in attendance.
15. Other: [ ].

Provide staff training. Submit the program's corrective action plan, which includes a statement that the potentially hazardous substance is no longer accessible to children and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/15/2025

Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-13-12 Safe Environment
Code: The program is required to have running water below the temperature of 120 degrees Fahrenheit.

Findings: During the inspection, it was determined the water temperature was 140 degrees Fahrenheit in the restroom. This temperature exceeds the requirement of remaining below 120 degrees Fahrenheit. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 05/15/2025

Domain: 05 Health & Safety

Rule: 5180:2-13-22 Meals and Snacks
Code: The program is required to post the current menu in a noticeable location that is accessible to parents and note any substitutions at the time of the change.

Findings: During the inspection, it was determined that the program's weekly menu did not meet the requirement as noted in number 5 below.

1. The menu was not posted.
2. The posted menu was not in a visible place readily accessible to parents.
3. The menu was not currently dated.
4. The entire menu was substituted.
5. At least one item on menu did not match what was served.
6. The meal or snack served did not match the posted menu.

Submit the program's corrective action plan to verify compliance with the requirement of the rule.

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Corrective Action Plan Due: 05/15/2025

Domain: 05 Health & Safety

Rule: 5180:2-13-16 Emergency Preparedness and Response Plan
Code: The program is required to have a completed emergency preparedness and response plan.

Findings: During the inspection, it was determined the program's written emergency preparedness and response plan did not meet the requirement or was missing the information in number 18 below:
Procedures:
1. The written emergency and preparedness and response plan had not been completed
2. The plan was not provided to all child care staff and employees
3. Weather emergencies and natural disasters which include severe thunderstorms, tornadoes, flash flooding, major snowfall, blizzards, ice storms or earthquakes
4. Emergency outdoor and indoor lockdown or evacuation due to threats of violence which includes active shooter, bioterrorism or terrorism including a designated safe site where staff and children can safely remain when evacuated
5. Emergency or disaster evacuations due to hazardous materials and spills, gas leaks or bomb threats including a designated safe site where staff and children can safely remain when evacuated
6. Outbreaks, epidemics or other infectious disease emergencies
7. Loss of power, water, or heat
8. Other threatening situations that may pose a health or safety hazard to the children in the program
Details:
9. Shelter in place or evacuation, how the program will care for and account for the children until they can be reunited with the parent
10. Assisting infants, toddlers and children with special needs and/or health conditions
11. Emergency contact information for parents and the program
12. Procedures for notifying and communicating with parents regarding the location of the children if evacuated
13. Procedures for communicating with parents during loss of communications, no phone or internet service available
14. The location of supplies and procedures for gathering necessary supplies for staff and children if required to shelter in place
15. What to do if a disaster occurs during the transport of children or when on a field trip or routine trip
16. Making the plan available to all child care staff members and employees
17. Training of staff or reassignment of staff duties as appropriate
18. Updating the plan on a yearly basis
19. Contact with local emergency management officials
20. The plan was unable to be implemented in that, [ ].

Submit the program's corrective action plan, which includes the missing information, if applicable, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/15/2025

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Domain: 05 Health & Safety

Rule: 5180:2-13-16 Emergency Preparedness and Response Plan
Code: The program is required to train child care staff members and employees on the written emergency preparedness and response plan annually and keep written documentation of the training on-site.

Findings: During the inspection, it was determined the program's written emergency and preparedness and response plan did not meet the requirement for training child care staff members and employees on the plan annually as noted in number 1 below:

1. Child care staff members and employees were not trained annually.
2. Written documentation of the training was not kept on file.

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

Corrective Action Plan Due: 05/15/2025

Domain: 05 Health & Safety

Rule: 5180:2-13-22 Fluid Milk
Code: The program is to ensure that children are served age-appropriate fluid milk.

Findings: During the inspection, it was determined that the program did not have the type of milk on-site to ensure that all children were served age-appropriate fluid milk requirements. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/15/2025

Domain: 06 Program Information

Rule: 5180:2-13-14 Requirements for Field and Routine Trips
Code: The program is required to obtain written parental permission before leaving the premises and retain the forms for at least one year from the date of the trip. Routine trip permission forms must be updated annually.

Findings: In review of the program's records, it was determined that requirements for written permission from the parent/guardian for a field trip or routine trip were not met as listed in number 9 below:

1. Written parental permission was not secured for field trips and/or routine trips off the premises.
2. The written permission was missing the child's name.
3. The written permission was missing the date(s) of the trip(s) (field trips only).
4. The written permission was missing the destination(s) of the trip(s).
5. The written permission was missing the departure and return time(s) of the trip(s) (field trips only).
6. The written permission was missing the signature of the parent.
7. The written permission was missing the date on which the permission was signed.

8. The written permission was missing a statement notifying parents how their child will be transported.
9. Permission forms for routine trips were not being updated annually.
10. Written parental permission forms for field trips and/or routine trips were not being maintained on file for at least one year from the date of the trip.
11. Other: [ ].

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

Corrective Action Plan Due: 05/15/2025

Domain: 08 Staff Files

Rule: 5180:2-13-09 Background Checks
Code: Individuals are required to completed the background check process and obtain complete results.

Findings: In review of the staff records, it was determined that background check requirements were incomplete for the individuals listed on the Employee Record Chart, as noted in number 2 below:

1. The JFS 01176 "Program Notification of Background check Review for Child Care" was not on file at the program, but was on file at the county agency and the individual is eligible.
2. The JFS 01176 was not on file at the program, but the BCI and FBI results were on file at the program and the individual had no prohibitive offenses which did not meet the rehabilitation criteria.
3. The JFS 01176 was not on file at the program, but the BCI and FBI results were on file at the county agency and the individual had no prohibitive offenses which did not meet the rehabilitation criteria.

Submit the program's corrective action plan, which includes a statement that the correct form is now on file, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/15/2025

Domain: 08 Staff Files

Rule: 5180:2-13-09 Background Checks
Code: The program is required to have the applicable JFS 01176 "Program Notification of Background Check Review for Child Care" on file.

Findings: In review of the staff records, it was determined that background check requirements had not been followed, for the individual(s) listed on the Employee Record Chart, as noted in number 2 below:

1. The JFS 01176 "Program Notification of Background Check Review for Child Care" the program received from the Department was not on file and the individual was not left alone with children.
2. The JFS 01177 "Individual Notification of Background Check Review for Child Care" was on file instead of the JFS 01176.
3. The JFS 01176 on file was for a different program.

Submit the program's corrective action plan, which includes a statement that the correct form is now on file, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/15/2025

Domain: 08 Staff Files

Rule: 5180:2-13-10 Health Training
Code: The program is required to meet the health training requirements.

Findings: In review of records, it was determined the CCSM or Substitute CCSM was left alone with children and did not have current valid documentation for training listed in number 1 below:

1. First Aid - expired training
2. First Aid - did not have verification of completion of First Aid training
3. First Aid - documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
4. CPR - expired training
5. CPR - had not taken CPR training
6. CPR - did not have verification of the completion of CPR training
7. CPR - training taken did not include all age groups the program serves and developmental levels of all children in care
8. CPR - documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
9. CPR - audiovisual or electronic media training taken by staff did not include an in-person component of the training
10. Communicable Disease - expired training
11. Communicable Disease - had not taken CD training
12. Communicable Disease - did not have verification of the completion of the CD training
13. Communicable Disease - documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
14. Child Abuse - expired training
15. Child Abuse - had not taken Child Abuse training
16. Child Abuse - documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule

Correct the violation and submit the documentation of current certification with the program's corrective action plan to verify compliance with the requirement of the rule.

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Domain: 08 Staff Files

Rule: 5180:2-13-07 Provider Responsibilities
Code: The program is required to have the current licensing rules available in a noticeable area on the premises.

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Findings: During the inspection, it was determined the current licensing rules were not available on the premises. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 05/15/2025

Domain: 08 Staff Files

Rule: 5180:2-13-08 Child Care Staff Requirements
Code: The program staff is required to have educational verification on file at the program.

Findings: In review of the staff records, it was determined that verification of a high school education for the child care staff member(s) listed on the Employee Record Chart, did not meet the requirements as listed in number 1 below:

1. Verification of completion of a high school education was not on file.
2. Documentation was not on file to verify that that a high school graduate was at least 16 years of age.
3. Documentation of a high school education was not on file for a person, counted in the staff/child ratio, and therefore was used as a Child Care Staff Member.

Submit the program's corrective action plan, which includes a copy of the education verification, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/15/2025

Domain: 09 Children's Files

Rule: 5180:2-13-15 Child Medical and Enrollment Records
Code: The program is required to have a completed medical on file for each child.

Findings: In review of 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) 8 & 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.
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Corrective Action Plan Due: 05/15/2025

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Voluntary Temporary Closure	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 License Visible	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Information in OCLQS	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Provider Medical	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Building Requirements for Type B Homes	Compliant	

Rule	Status	Documenting Statement(s), If applicable

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5180:2-13-04 Flammable and Combustible Materials in a Type B Home	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Heaters in a Type B Home	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-07 Staff Records	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13 Written Policies and Procedures	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Employee Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Whistle Blower	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-10 Professional Development	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Indoor Space	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Outdoor Space	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Outdoor Equipment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Safe Equipment	Compliant	

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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Carbon Monoxide Detectors - Type B Only	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Pets	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Clean environment and equipment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Smoke Free	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Handwashing	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Toothbrushing	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Ratio and Supervision for Field and Routine Trips	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Driver Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Vehicle Inspections	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Vehicle Requirements	Compliant	

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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-15 Health Conditions	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-15 Child Records Retention and Confidentiality	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Medical, Dental, and General Emergency Plan	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Emergency Drills	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 First Aid Kit/Standard Precautions	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Communicable Diseases	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Incident/Injury	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-17 Programming	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-17 Materials and Equipment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-18 Group Size and Ratios	Compliant	

Rule	Status	Documenting Statement(s), If applicable

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5180:2-13-18 Attendance	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 Supervision	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 School Age Supervision	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-21 Evening and Overnight Care	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-20 Sleep and Nap Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 Child Guidance	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-20 Crib and Playpen Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-21 Sanitary Environment and Hygiene	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-22 Food Handling	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Infant Daily Care	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Infant Bottle and Food Preparation	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Diapering	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 On-site Pools	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 Swimming Sites	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 Parent Permission for Swimming	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-25 Medication Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-14-06 Health Conditions	Compliant	