

Department of Human Services
Office of Children, Youth and Families
Licensing Inspection Summary - Public
55 PA.CODE CHAPTER 3800

May 6, 2026

[REDACTED], PRESIDENT/CEO
SARAH A. REED CHILDRENS CENTER, INC.
2445 WEST 34TH STREET
ERIE, PA, 16506

RE: SARAH A. REED CHILDREN'S
CENTER (NORTH HALL)
2445 WEST 34TH STREET
ERIE, PA, 16506
LICENSE/COC#: 41075

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Office of Children, Youth and Families review on of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[REDACTED]
Western Region Director

cc: Pennsylvania Office of Children, Youth and Families

Agency/Facility Information

Name: SARAH A. REED CHILDREN'S CENTER (NORTH HALL)
Address: 2445 WEST 34TH STREET, ERIE, PA 16506
County: ERIE

License Number: 41075
License Expiration: 07/31/2026

Administrator

Name: [REDACTED] **Phone:** [REDACTED] **Email:** [REDACTED]

Legal Entity

Name: SARAH A. REED CHILDRENS CENTER, INC.
Address: 2445 WEST 34TH STREET, ERIE, PA, 16506
Phone: [REDACTED] **Email:** [REDACTED]

Inspection Information

Start Date: 03/03/2026 **End Date:** 03/04/2026 **Type:** Renewal **Notice:** Announced Visit
Inspector(s): [REDACTED]

Inspection Narrative

The Department of Human Services, Western Region Office of Children, Youth and Families conducted the annual licensing inspection of Sarah A. Reed Children's Center, North Hall on 03/03/2026 through 03/04/2026. The inspection was for the renewal licensing year of 07/31/2026 to 07/31/2027. A random youth sample of 10% was selected pulling 2 of 20 youth files and 17 staff files were pulled for that unit, along with medical and administrative staff. Fire drill logs were reviewed, and a tour was conducted of North Hall. There were three citations found, outlined in the below summary.

Inspections / Reviews

03/03/2026 Renewal

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 03/20/2026

03/17/2026 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 03/20/2026
Reviewer: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 03/23/2026

03/23/2026 - POC Submission

Reviewer: [REDACTED] **Follow Up Type:** On site Verification **Follow Up Date:** 04/23/2026

03/23/2026 On site Verification

Submitted By: [REDACTED] **Date Submitted:** 03/20/2026
Reviewer: [REDACTED] **Follow Up Type:** Not Required

3800.55 Child Care Worker

1. Requirements

3800.55.g. The child care worker shall have a high school diploma or general education development certificate.

Description of Violation

Staff person B does not have the minimum childcare educational qualifications. Staff person lacks a high school diploma or general education equivalency within the file. Hire date was [REDACTED]

Plan of Correction

Accept ([REDACTED] - 03/23/2026)

HR personnel have been retrained to only accept official transcripts as proof of level of education.

Licensee's Proposed Overall Completion Date: 03/20/2026

On-site Verification

Implemented ([REDACTED] - 05/05/2026)

A meeting was held on 04/29/2026 at Sarah Reed with the residential director and AVP of compliance. The plan of correction was reviewed and discussed with moving forward. An attestation was provided stating that any employee without academic credentials, cannot be hired.

3800.132 Fire Drills

2. Requirements

3800.132.f. Alternate exit routes shall be used during fire drills.

Description of Violation

The fire drills throughout the facility did not utilize alternate exit routes.

Plan of Correction

Accept ([REDACTED] - 03/17/2026)

The AVP of Compliance will meet with Director of Facilities and Maintenance to write a new fire drill protocol. At least once a quarter, maintenance will designate an exit in each living unit as unusable to simulate the varied positions of actual fires. Fire drill documentation templates will be revised this new protocol. The AVP of Compliance will forward the protocol to OCY upon completion.

Licensee's Proposed Overall Completion Date: 03/31/2026

On-site Verification

Implemented ([REDACTED] - 05/05/2026)

A meeting was held on 04/29/2026 at Sarah Reed with the residential director and AVP of compliance. The plan of correction was reviewed and discussed in moving forward. A Fire Drill policy was enacted immediately, and alternative routes must be utilized. Since the policy was just developed in April, May will consist of fire drills with alternative routes. OCYF will check during the May contact.

3800.151 Staff Health Statement

3. Requirements

3800.151. A staff person or volunteer who comes into direct contact with the children or who prepares or serves food, shall have a statement signed and dated by a licensed physician, certified registered nurse practitioner or licensed physician's assistant, within 12 months prior to working with children or food service and every 2 years thereafter, stating that the person is free of serious communicable disease that may be spread through casual contact or that the staff person has a serious communicable disease that may be spread through casual contact but is able to work in the facility if specific precautions are taken that will prevent the spread of the disease to children.

Description of Violation

Staff person A did not have the required statement signed and dated by a licensed physician, certified registered nurse practitioner or licensed physician's assistant, within 12 months prior to working with children or food service and

3800.151 Staff Health Statement (continued)

every 2 years thereafter. Staff A had a physical dated [REDACTED] and had no updated statement at the time of on-site review.

Plan of Correction**Accepted ([REDACTED] - 03/23/2026)**

The error was caused by a data entry error by the HR person inputting the wrong old physical date into the HR platform, causing the notification for getting the physical to be sent too late. The HR staff was retrained to double-check data entries before inputting them.

Licensee's Proposed Overall Completion Date: 03/20/2026

On-site Verification**Implemented ([REDACTED] - 05/05/2026)**

A meeting was held on 04/29/2026 at Sarah Reed with the residential director and AVP of compliance. The plan of correction was reviewed and discussed in moving forward. An attestation was provided stating that any employee who does not meet the required health assessment requirements will not be on shift. HR Administrator was also cautioned in her entries. There was one new staff health statement completed since POC implementation, which was completed timely.