

## **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 <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. 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            | nils            |                   |
|--------------------------------|-------------------------|-----------------|-------------------|
| Program Name                   | Program Number          |                 | Program Type      |
| LITTLE LEARNERS ACADEMY "LLC". | 000000107028            |                 | Child Care Center |
| 1831908                        |                         |                 |                   |
| Address                        |                         |                 | County            |
| 1951 MATHEWS RD YOUNGSTOWN     | MAHONING                |                 |                   |
| OH 44514                       |                         |                 |                   |
|                                |                         |                 |                   |
|                                |                         |                 |                   |
| Building Approval Date         | Use Group/Code          | Occupancy Limit | Maximum Under 2 ½ |
| 08/03/2012                     | E                       | 57              | 0                 |
| Fire Inspection Approval Date  | Food Service Risk Level |                 |                   |
| 01/26/2021                     | Exempt                  |                 |                   |

| Inspection Information      |                                |                                       |                   |              |
|-----------------------------|--------------------------------|---------------------------------------|-------------------|--------------|
| Inspection Type             | Inspection So                  | cope                                  | Inspection Notice |              |
| Annual                      | Full                           |                                       | Unannounced       |              |
| Inspection Date 02/09/2022  | Begin Time 9                   | Begin Time 9:30 AM                    |                   |              |
| Reviewer:<br>KATHLEEN BONAG | Reviewer:<br>KATHLEEN BONACCI  |                                       |                   |              |
| Summary of Findings         |                                |                                       |                   |              |
| No. Rules Verified          | No. Rules with Non-compliances | vith Non-compliances No. Serious Risk |                   | No. Low Risk |
| 58                          | 0                              | 0                                     | 0                 | 0            |

| 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   |                  | 5          | 12        | 17    |
| School Age  |                  | 0          | 0         | 0     |
| Total Capacity/Enrollment                                 | 17               | 5          | 12        | 17    |

| Staff-Child Ratios at the Time of Inspection |                      |                |           |
|--|----------------------|----------------|-----------|
| Group  | Age Group/Range      | Ratio Observed | Comment   |
| MWF  | 3 years to < 4 years | 2 to 14        | Free Play |

| MWF | 3 years to < 4 years | 2 to 14 | Hand washing   |
|-----|----------------------|---------|----------------|
|     |                      |         | Snack ( parent |
|     |                      |         | provided )     |
| MWF | 3 years to < 4 years | 2 to 5  | Lunch ( parent |
|     |                      |         | provided)      |

## **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  |
|---|
|   |
| No Serious Risk Non-Compliances were observed during this inspection  |
|   |
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|   |
|   |
| Moderate Risk Non-Compliances   |
| No Moderate Risk Non-Compliances were observed during this inspection |
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|   |
| Low Risk Non-Compliances  |

| No Low Risk Non-C | ompliances were obse | rved during this i | nspection |  |
|-------------------|----------------------|--------------------|-----------|--|
|                   |                      |                    |           |  |
|                   |                      |                    |           |  |
|                   |                      |                    |           |  |
|                   |                      |                    |           |  |
|                   |                      |                    |           |  |

## Rules In-Compliance/Not Verified

| Rule                             | Status    | Documenting Statement(s), If applicable   |
|----------------------------------|-----------|---|
| 5101:2-12-02 License Posted      | Compliant |   |
|                                  |           |   |
| D. J.                            | Ct-t      |   |
| 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                     |           |   |
| ·                                |           | <u>'</u>                                  |
| Rule                             | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-04 Building      | Compliant | Documenting Statement: The building       |
| Department Inspection            |           | approval listed the following             |
|                                  |           | stipulations/limitations: County of       |
|                                  |           | Mahoning, E, Room 1, over 2.5 years of    |
|                                  |           | age , occupancy 6, Room 2 ,over 2.5 years |
|                                  |           | of age ,occupancy 11, dated 1-12-2009.    |
|                                  |           | County of Mahoning , E, dated 8-3-2012,   |
|                                  |           | Fellowship Hall , Over 2.5 years of age,  |
|                                  |           |   |
|                                  |           | occupant 40, Room 1, Over 2.5 years of    |
|                                  |           | age, occupant 17.                         |
|                                  |           |   |
| Rule                             | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-04 Fire Inspection     | Compliant |   |

| Beginning!                           |           |  |
|--------------------------------------|-----------|--|
|                                      |           |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-04 Food Service            | Compliant |  |
|                                      | Compilant |  |
| Requirements                         |           |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-07 Administrator           | Compliant |  |
| Qualifications                       |           |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
|                                      |           |  |
| Rule: 5101:2-12-07 Administrator     | Compliant | Documenting Statement: The               |
| Responsibilities/Requirements        |           | administrator's hours of availability to |
|                                      |           | meet with parents were posted in a       |
|                                      |           | noticeable location.                     |
|                                      |           |  |
|                                      | L         |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
|                                      |           |  |
| Rule: 5101:2-12-07 Written Program   | Compliant | Documenting Statement: During the        |
| Policies and Procedures              |           | inspection, the requirements of the rule |
|                                      |           | regarding the program's written policies |
|                                      |           | and procedures were discussed.           |
|                                      |           | ·  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-08 Medical Statement       |           | bocumenting statement(s), it applicable  |
| 3101.2-12-08 Medical Statement       | Compliant |  |
|                                      |           |  |
| ·                                    |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-08 Child Care Staff  | Compliant | Documenting Statement: All Child Care    |
| Member Educational Requirements      |           | Staff Members had verification of        |
|                                      |           | educational requirements on file at the  |
|                                      |           | program.                                 |
|                                      |           | program.                                 |
|                                      |           |  |
| - 1                                  | I         |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-08 Orientation       | Compliant | Documenting Statement: On the day of     |
| Training & Whistle Blower Protection |           | the inspection, all child care staff     |
|                                      |           | members had met orientation training     |
|                                      |           | requirements.                            |
|                                      |           | 1 - 3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -  |
|                                      | 1         |  |
| Dula                                 | Chahua    | Decree outing Chatagorist(a) (f. 11.11   |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-09 Background Check  | Compliant | Documenting Statement: During the        |
| Requirements                         |           | inspection, the required documentation   |
|                                      |           | regarding background checks was on file  |
|                                      |           | for all employees listed.                |
|                                      |           | 101 011 011 011 010 000                  |
|                                      |           |  |
| D. I.                                | Chahara   | Description Ct. 1. 1/2 if the little     |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |

|   | Ī                   |   |
|---|---------------------|---|
| Rule: 5101:2-12-10 Health Training Requirements     | Compliant           | Documenting Statement: The program 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.   |
|   | _                   |   |
| Rule  | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-10 Professional  Development Requirements | Compliant           |   |
| Dulo  | Ctatus              | Decumenting Statement(s) If applicable  |
| Rule  | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-11 Indoor Space<br>Requirements           | Compliant           |   |
|   | I a                 |   |
| Rule  | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-11 Outdoor Space<br>Requirements    | Compliant           | Documenting Statement: The quarterly playground inspections were completed and documented, as required. The most recent inspection report form was dated 1-5-2022.  |
| Rule: 5101:2-12-11 Outdoor Space<br>Requirements    | Compliant           | Documenting Statement: During the inspection, the requirements of the rule regarding outdoor space were discussed. center operates an extended day. For outdoor play they take walks on the property and use a large grassy area that has one side of trees for a natural border and space for other sides. |
| Dula  | Chahara             | Decree asking Chaham and a life and inchin  |
| Rule 5101:2-12-12 Safe Equipment                    | Status<br>Compliant | Documenting Statement(s), If applicable   |
| 5101.2-12-12 Sale Equipment                         | Compliant           |   |
| Rule  | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-12 Safe Environment                 | Compliant           | Documenting Statement: Cleaning supplies were viewed stored out of the reach of children.   |
| Rule: 5101:2-12-12 Safe Environment                 | Compliant           | Documenting Statement: A safe environment was observed during the inspection. Children were protected from items and conditions which threaten their health, safety and well-being.   |

| Rule   | Status    | Documenting Statement(s), If applicable  |
|--|-----------|--|
| Rule: 5101:2-12-13 Sanitary                              | Compliant | Documenting Statement: On the day of   |
| 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.  |
|  |           | ,  |
| Rule: 5101:2-12-13 Sanitary                              | Compliant | Documenting Statement: On the day of   |
| 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.  |
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-13 Handwashing                                 | Compliant |  |
| Requirements   |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-13 Smoke Free                                  | Compliant | bocumenting statement(s), it applicable  |
|  | Compliant |  |
| Environment  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-14 Transportation and Field                    | Compliant | , , , , , , , , , , , , , , , , , , ,  |
| Trip Procedures  |           |  |
| ·  | 1         |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-15 Child Medical and                     | Compliant | Documenting Statement: At the time of  |
| Enrollment Records                                       |           | the inspection, 25% of the children's  |
|  |           | records were reviewed, and the records   |
|  |           | were complete, as required by the rule.  |
|  |           | , , ,  |
| Rule: 5101:2-12-15 Child Medical and                     | Compliant | Documenting Statement: In review of  |
| Enrollment Records                                       |           | 25% of the records, at the time of the   |
|  |           |  |
|  |           | •  |
|  |           | inspection, children's medical statements  |
|  |           | •  |
|  |           | inspection, children's medical statements were complete and on file, as required by  |
| Rule: 5101:2-12-15 Child Medical and                     | Compliant | inspection, children's medical statements were complete and on file, as required by  |
| Rule: 5101:2-12-15 Child Medical and Enrollment Records  | Compliant | inspection, children's medical statements were complete and on file, as required by the rule.  |
|  | Compliant | inspection, children's medical statements were complete and on file, as required by the rule.  Documenting Statement: In review of 25% of the records, at the time of the  |
|  | Compliant | inspection, children's medical statements were complete and on file, as required by the rule.  Documenting Statement: In review of   |
|  | Compliant | inspection, children's medical statements were complete and on file, as required by the rule.  Documenting Statement: In review of 25% of the records, at the time of the inspection, children's medical statements  |
| Enrollment Records                                       | ·         | inspection, children's medical statements were complete and on file, as required by the rule.  Documenting Statement: In review of 25% of the records, at the time of the inspection, children's medical statements were complete and on file, as required by the rule.  |
| Enrollment Records  Rule: 5101:2-12-15 Child Medical and | Compliant | inspection, children's medical statements were complete and on file, as required by the rule.  Documenting Statement: In review of 25% of the records, at the time of the inspection, children's medical statements were complete and on file, as required by the rule.  Documenting Statement: At the time of                                       |
| Enrollment Records                                       | ·         | inspection, children's medical statements were complete and on file, as required by the rule.  Documenting Statement: In review of 25% of the records, at the time of the inspection, children's medical statements were complete and on file, as required by the rule.  Documenting Statement: At the time of the inspection, 25% of the children's |
| Enrollment Records  Rule: 5101:2-12-15 Child Medical and | ·         | inspection, children's medical statements were complete and on file, as required by the rule.  Documenting Statement: In review of 25% of the records, at the time of the inspection, children's medical statements were complete and on file, as required by the rule.  Documenting Statement: At the time of                                       |

| Rule                                  | Status    | Documenting Statement(s), If applicable   |
|---------------------------------------|-----------|---|
| Rule: 5101:2-12-15 Medical/Physical   | Compliant | Documenting Statement: At the time of     |
| Care Plans                            | Compilant | the inspection, there were no children    |
| Care rians                            |           | currently enrolled who had health         |
|                                       |           | conditions.                               |
|                                       |           | conditions.                               |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-16 Medical, Dental, and     | Compliant |   |
| General Emergency Plan                |           |   |
|                                       | _         |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Emergency Drills   | Compliant | Documenting Statement: Documentation      |
|                                       |           | for completed fire, weather, and          |
|                                       |           | emergency/lockdown drills was verified    |
|                                       |           | during this inspection.                   |
|                                       |           |   |
| Dula                                  | Chatura   | Decumenting Statements of annihilation    |
| Rule: 5101:2-12-16 First Aid/Standard | Status    | Documenting Statement(s), If applicable   |
| Precautions                           | Compliant | Documenting Statement: During the         |
| Precautions                           |           | inspection, the program had complete      |
|                                       |           | first aid kit available as required.      |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-16 Management of            | Compliant | -   |
| Communicable Disease                  |           |   |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Incident/Injury    | Compliant | Documenting Statement: The                |
| Reporting                             |           | requirements for completing JFS 01299     |
|                                       |           | "Incident/Injury Report For Child Care"   |
|                                       |           | reports were discussed during the         |
|                                       |           | inspection.                               |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Written Disaster   | Compliant | Documenting Statement: During the         |
| Plan                                  | Compliant | inspection, the requirements of the rule  |
| riali                                 |           | regarding the written disaster plan were  |
|                                       |           | discussed.                                |
|                                       |           | discussed.                                |
| <u> </u>                              | 1         |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-17 Daily Schedule           | Compliant |   |
|                                       |           |   |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-17 Materials and      | Compliant | Documenting Statement: Sufficient         |
| Equipment                             |           | equipment was observed in all categories. |

| Deg <u>inding</u>                       |           | <del>,</del>                               |
|---|-----------|--|
|   |           |  |
|   |           |  |
| 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 | Documenting statement(s), it approaches    |
| 3101.2 12 10 Electise capacity          | Compilant |  |
| <u> </u>                                | <u> </u>  |  |
| Dulo                                    | Ctatus    | Decumenting Statement(s) If applicable     |
| Rule                                    | Status    | Documenting Statement(s), If applicable    |
| 5101:2-12-18 Ratio                      | Compliant |  |
|   |           |  |
|   | T         |  |
| Rule                                    | Status    | Documenting Statement(s), If applicable    |
| 5101:2-12-18 Group Size                 | Compliant |  |
|   |           |  |
|   |           |  |
| Rule                                    | Status    | Documenting Statement(s), If applicable    |
| 5101:2-12-18 Attendance Records         | Compliant |  |
|   | ·         |  |
|   |           |  |
| Rule                                    | Status    | Documenting Statement(s), If applicable    |
| Rule: 5101:2-12-19 Supervision          | Compliant | Documenting Statement: Child Care Staff    |
| Naie: 5101:2-12-15 Super vision         | Compliant | Members were supervising the children      |
|   |           | . •  |
|   |           | and were able to intervene as needed.      |
|   |           |  |
| Rule: 5101:2-12-19 Supervision          | Compliant | Documenting Statement: During the          |
|   |           | inspection, child care staff were observed |
|   |           | assisting children throughout the day.     |
|   |           |  |
|   |           |  |
| Rule                                    | Status    | Documenting Statement(s), If applicable    |
| 5101:2-12-19 Child Guidance             | Compliant | 0 ("                                       |
|   |           |  |
|   |           |  |
| Rule                                    | Status    | Documenting Statement(s), If applicable    |
| Rule: 5101:2-12-22 Meal and Snack       | Compliant | Documenting Statement: Meals were          |
|   | Compilant |  |
| Requirements                            |           | provided at intervals as required by this  |
|   |           | rule.                                      |
|   |           |  |
|   |           |  |
| Rule                                    | Status    | Documenting Statement(s), If applicable    |
| 5101:2-12-22 Fluid Milk Requirements    | Compliant |  |
| · ·                                     |           |  |
|   |           |  |
| Rule                                    | Status    | Documenting Statement(s), If applicable    |
| Rule: 5101:2-12-22 Safe Food            | Compliant | Documenting Statement: Sack lunches        |
|   | Compliant | _  |
| Handling/Storage                        |           | were stored with ice packs.                |
|   |           |  |
|   |           |  |



| Rule  | Status    | Documenting Statement(s), If applicable   |
|---|-----------|---|
| Rule: 5101:2-12-25 Medication<br>Administration | Compliant | Documenting Statement: There were no children on medication at the time of the inspection; however, the method of storage and practices for the administration were reviewed. |
|   |           | •   |