

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	Program Number		Program Type	
LA LA'S LIL ONE'S LEARN AND PLAY	000000200506		FCC - Type A Home	
Address	**		County	
1138 CALIFORNIA AVE.			HAMILTON	
CINCINNATI				
OH 45237				
Building and Fire Approvals apply to Type A Family Chi	d Care Homes only		·	
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½	
01/02/2014	NA	12	6	
Fire Inspection Approval Date				
05/13/2022				

Inspection Information				
Inspection Type	Inspection So	cope	Inspection Notice	
Compliance	Full		Unannounced	
Inspection Date	Begin Time		End Time	
10/12/2022	1:37 PM		3:45 PM	
Reviewer:				
Lisa Johnson-Garrett				
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
66	10	0	2	9

License Capacity and Enrollment at the Time of Inspection				
Age Group	License Capacity	Enrollment		
0.000	Totals	Full Time	Part Time	Total
Infant (Birth to < 18 m)		2	2	4
Young Toddler		4	3	7
Total Under 2 Years	12	6	5	11
Older Toddler		0	0	0
Preschool		3	3	6
School Age		15	16	31
Total Capacity/Enrollment	12	18	19	48

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Inspection 10/12/22	Mixed Age Group	3 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		
Moderate Risk Non-Compliances		
Domain: 04 Indoor/Outdoor Space		
Rule: 5101:2-13-11 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(s) 1,2 below:		
No fall surface Adequate fall surface to soften the impact of a fall 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: 11/12/2022		

Domain: 08 Staff Files

Rule: 5101:2-13-09 Background Checks

Code: The program is required to have background checks for all staff and residents over 18 years of age.

Findings: In review of staff records, it was determined that background checks were not requested for the person(s) listed on the Employee Record Chart as noted in number(s) 1 below:

- 1. Submitting the request for a background check for child care in the OPR;
- 2. Submitting fingerprints electronically according to the process established by the BCI.

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

Corrective Action Plan Due: 11/12/2022

Low Risk Non-Compliances

Domain: 01 Ratio & Supervision

Rule: 5101:2-13-18 Attendance

Code: The program is required to maintain attendance records.

Findings: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number(s) 2,3 below:

- 1. No attendance record was being maintained.
- 2. The attendance record was not being consistently completed.
- 3. The original attendance documentation was not kept at the program for a period of one year.

Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/12/2022

Domain: 05 Health & Safety

Rule: 5101:2-13-16 Disaster Plan

Code: The program is required to have a completed written disaster plan.

Findings: During the inspection, it was determined the program's written disaster plan did not meet the requirement or was missing the information in number(s) 1 below:

Procedures:

- 1. The written disaster 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
- 5. Emergency or disaster evacuations due to hazardous materials and spills, gas leaks or bomb threats.
- 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 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

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

Corrective Action Plan Due: 11/12/2022

Domain: 05 Health & Safety

Rule: 5101:2-13-16 Emergency Drills

Code: The program is required to complete and document the required drills.

Findings: During the inspection, it was determined that the required drills were not completed for item number(s) 2 below:

- 1. Monthly fire drills
- 2. Monthly weather emergency drills (March through September)
- 3. Emergency/lockdown drills in each quarter of the calendar year

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

Corrective Action Plan Due: 11/12/2022

Domain: 08 Staff Files

Rule: 5101:2-13-10 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(s) listed in number(s) 10, 14 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.

Corrective Action Plan Due: 11/12/2022

Domain: 08 Staff Files

Rule: 5101:2-13-08 Child Care Staff Requirements



Code: The program staff is required to complete the prescribed orientation within 30 days of starting employment.

Findings: In review of the staff records, it was determined that the child care staff member(s) or substitute child care staff member had not completed the online orientation training as noted in number (s) 1,2,3 below:

- 1. The training was not completed within thirty days of the starting employment.
- 2. There was no documentation of completing the training after December 31, 2016.
- 3. Completion of training is not documented with verification from the OPR for the Child Care Staff Member(s) and/or Substitute Child Care Staff Member(s) listed on the Employee Record Chart, as required.

Submit the program's corrective action plan, which includes copies of verification of training, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/12/2022

Domain: 08 Staff Files

Rule: 5101:2-13-08 Child Care Staff Requirements

Code: The program staff is required to have verification of a high school education in the OPR or on file at the

program.

Findings: In review of the staff records, it was determined that verification of a high school education was not on file at the program nor verified in the Ohio Professional Registry for the child care staff member(s) listed on the Employee Record Chart, as required. Submit the program's corrective action plan, which includes a copy of the verification of a high school education, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/12/2022

Domain: 08 Staff Files

Rule: 5101:2-13-07 Staff Records

Code: The provider is required to maintain current employee, child care staff members and resident records in the Ohio Professional Registry.

Findings: During the inspection, it was determined that employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 5,6 below:

- 1. The provider had not created or updated their individual profile in the OPR.
- 2. The provider had not created or updated the program's organizational dashboard in the OPR.
- 3. At least one employee, child care staff member, or substitute child care staff member had not created or updated their individual profile in the OPR.

- 4. At least one employee, child care staff member, or substitute child care staff member had not created an employment record in the OPR for the program on or before the first day of employment, including date of hire.
- 5. At least one employee, child care staff member, or substitute child care staff member had not updated changes to positions or roles in the OPR within five calendar days of the change.
- 6. The program's organizational dashboard in the OPR was not updated within five business days when at least one employee, child care staff member, or substitute child care staff member's scheduled days and hours changed.
- 7. The program's organizational dashboard in the OPR was not updated within five business days when at least one employee, child care staff member, or substitute child care staff member's group assignments changed, if applicable.
- 8. The program's organizational dashboard in the OPR was not updated with the employment end date within five business days when at least one employee, child care staff member, or substitute child care staff member ended employment.
- 9. At least one resident over the age of eighteen had not created a profile and employment record for the family child care provider within five days of becoming a resident or turning eighteen.
- 10. The program's organizational dashboard in the OPR was not updated within five calendar days of a change in residency for at least one resident over the age of eighteen.
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Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/12/2022

Domain: 08 Staff Files

Rule: 5101:2-13-10 Professional Development

Code: The program staff is required to complete at least six clock hours of training annually.

Findings: In review of records, it was determined the Child Care Staff Member(s) indicated on the Employee Record Chart did not meet the annual professional development requirement as noted in number(s) 1.

- 1. The child care staff member(s) had not completed at least six hours of professional development.
- 2. Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.
- 3. Training topic did not meet the requirements listed in appendix A of this rule.
- 4. Documentation of training did not meet the requirements of this rule.
- 5. The substitute(s) had been used more than ninety days annually between July first and June thirtieth and had not completed at least six hours of professional development.
- 6. Other [].

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

Corrective Action Plan Due: 11/12/2022

Domain: 10 Written Policies & Procedures

Rule: 5101:2-13 Written Policies and Procedures

Code: The program's written policies and procedures are to be given to all parents and employees and be

available at the program.

Findings: During the inspection, it was determined the written policies and procedures were not available at the program as required. A copy must be made available onsite for review. Submit the program's corrective action plan to verify compliance with this rule.

Corrective Action Plan Due: 11/12/2022

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 License Visible	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Voluntary Temporary	Compliant	
Closure		
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Change of Location	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
		bocumenting statement(s), if applicable
5101:2-13-02 Information in OCLQS	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Provider Medical	Compliant	
Rule	Status	Documenting Statement(s), If applicable

5101:2-13-02 Type A Ownership	Compliant	
Rule 5101:2-13-03 Inspection	Status Compliant	Documenting Statement(s), If applicable
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Building Inspections for Type A Homes	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Fire Inspections for Type A Homes	Compliant	bocumenting statement(s), ii applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Whistle Blower	Compliant	Bocamenting statement(s), it applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Outdoor Space	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Outdoor Equipment	Compliant	Jean-control of the second
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Safe Equipment	Compliant	Decimentary and the second of
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Safe Environment	Compliant	2 Tourisman Statement (5), it applicable
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Clean environment and equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Handwashing	Compliant	

Designates:		1
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Smoke Free	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Toothbrushing	Compliant	Bocamenting statement(s), it applicable
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Requirements for Field	Compliant	
and Routine Trips		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Ratio and Supervision	Compliant	
for Field and Routine Trips		
Section 10 to the contract of		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Child Medical and	Compliant	U
Enrollment Records		
Emonificite Records		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Health Conditions	Les Marines Res	Bocumenting Statement(3), if applicable
3101:2-13-13 Health Conditions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Child Records Retention	Compliant	
and Confidentiality		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Medical, Dental, and	Compliant	
General Emergency Plan		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 First Aid Kit/Standard	Compliant	
Precautions	and the second of	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Communicable Diseases		bocamenting statement(s), it applicable
2101:5-12-10 COMMunicable Diseases	Compliant	

	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-22 Food Handling	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Infant Daily Care	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Infant Bottle and Food	Compliant	
Preparation		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Diapering	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-25 Medication	Compliant	Documenting Statement(3), if applicable
Requirements	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-07 Provider Responsibilities	Compliant	
ACCIDENTAL PROJECT FOR STANDARD OF CONTROL CON	School-Country Co. The Proceedings of Co. The Control of Co. T	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-18 Group Size and Ratios	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Indoor Space	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
Rule 5101:2-13-17 Programming	Status Compliant	Documenting Statement(s), If applicable
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		Documenting Statement(s), If applicable
5101:2-13-17 Programming	Compliant	
5101:2-13-17 Programming Rule	Compliant	Documenting Statement(s), If applicable Documenting Statement(s), If applicable
S101:2-13-17 Programming Rule 5101:2-13-08 Review Policies and	Compliant	
5101:2-13-17 Programming Rule	Compliant	
S101:2-13-17 Programming Rule 5101:2-13-08 Review Policies and	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-17 Materials and	Compliant	
Equipment		
(3) E		