

## Center Complaint Inspection Summary 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 THE GROWING PATCH	Program Number 000000100241	Program Type Child Care Center
Address 1180 SLOSSON ST. AKRON OH 44320	County SUMMIT	

Inspection Information			
Inspection Type Complaint	Inspection Scope Partial		Inspection Notice Unannounced
Reviewer(s) KATHLEEN BONACCI	Inspection Day 08/08/2025	Begin Time 11:00 AM	End Time 2:20 PM
Summary of Findings			
No. Rules Verified 22	No. Rules with Non-compliances 15	No. Serious Risk 0	No. Moderate Risk 5
		No. Low Risk 10	

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Infant/Toddlers	0 to < 12 months	1 to 9	Bouncer Infant seats Free play
Infant/Toddlers	0 to < 12 months	1 to 9	Bouncer Feeding Infant seats Diaper change Clean up
Preschool	3 years to < 4 years	1 to 4	Table activities
Preschool	3 years to < 4 years	1 to 4	Books

### Complaint Allegations

*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.*

#### Domain:01 Ratio & Supervision

Rule: 5180:2-12-19 Supervision

Code: The program staff is required to supervise children in their assigned group by sight and hearing. Supervision includes being near enough to respond and reach children immediately and protecting them from harm.

**Allegation:** There is a lack of supervision in the infant /toddler room. Children have been found in the hallway alone and have been left unsupervised in the classroom.

**Determination:** Substantiated

**Findings:** During the inspection, it was determined that children were left unattended while inside the program as noted in numbers 1& 8 below:

1. Children were left unattended once. Video evidence of children being left alone in the infant/toddler classroom.
2. Child(ren) were left unattended more than once.
3. Children left the group and were unattended.
4. Child care staff were using a baby monitor to supervise children.
5. Child care staff were using a walkie talkie to supervise children.
6. Child care staff were using mirrors to view children in another room.
7. Child care staff were using a video camera instead of physically being present in the room.
8. Other ; Video evidence of a child strapped in a booster seat alone in the hallway .

Children must be supervised and within sight and hearing of a child care staff member at all times. Provide staff training. 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.

Risk Level: Moderate

Corrective Action Plan Due: 09/28/2025

#### Domain:01 Ratio & Supervision

Rule: 5180:2-12-19 Child Guidance

Code: The program staff shall use developmentally appropriate techniques when managing children's behavior. Corporal punishment is prohibited, as well as any cruel, harsh, unusual or extreme techniques.

**Allegation:** The staff use inappropriate child guidance techniques and practices with the children.

**Determination:** Substantiated

**Findings:** During the inspection, it was determined by video evidence that a Child Care Staff Member had used the inappropriate techniques in number 1,7 below when managing unacceptable behavior in children:

1. Utilize cruel, harsh, unusual, or extreme techniques; Video evidence of a child care staff member grabbing a child by the arm and forcibly pushing the child to the floor.
2. Utilize any form of corporal punishment;

3. Delegate children to manage or discipline other children;
4. Use physical restraints on a child;
5. Restrain a child by prone restraint or any means other than holding children for a short period of time, such as in a protective hug, so that the children may regain control;
6. Place children in a locked room or confine children in any enclosed area;
7. Confine children to equipment such as cribs or highchairs; Video evidence of a child strapped to a booster seat placed on top of a metal chair and placed in the hallway.
8. Humiliate, threaten or frighten children;
9. Subject children to profane language or verbal abuse;
10. Make derogatory or sarcastic remarks about children or their families;
11. Punish children for failure to eat or sleep or for toileting accidents;
12. Withhold any food (including snacks and treats), rest or toilet use;
13. Punish an entire group of children due to the unacceptable behavior of one or a few;
14. Isolate and restrict children from all activities for an extended period of time.

Child Care Staff Members and other employees must always use appropriate guidance and management methods with children. Provide staff training. 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.

Risk Level: Moderate

Corrective Action Plan Due: 09/28/2025

#### **Domain:07 Diapering & Infant Care**

Rule: 5180:2-12-20 Cribs

Code: The program is required to place infants in cribs while sleeping.

Allegation: Infants are not placed in cribs for sleeping.

Determination: Substantiated

Findings: During the inspection, it was determined that the equipment in number 8 below had been used for sleeping infants and did not allow the infant to sleep on a firm mattress:

1. Mesh cribs;
2. Play pens;
3. Bassinets;
4. Cots;
5. Car seats;
6. Infant swing;
7. The floor;
8. Infant seats; Video evidence of infant sleeping in an infant seat.
9. An infant placed in a car seat in a crib;
10. Other [ ].

Infants must be provided with a crib, which meets requirements specified in this rule, for resting and sleeping. Provide staff training. Submit the program's corrective action plan, which includes a statement that staff training was provided, to the Department to verify compliance with the requirements of this rule.

Risk Level: Moderate



Corrective Action Plan Due: 09/28/2025

**Domain:07 Diapering & Infant Care**

Rule: 5180:2-12-20 Cribs

Code: The program is required to provide cribs that meet the standards specified by the United States Consumer Product Safety Commission for all infants in attendance. Cribs must be stable and have bars that meet the spacing and size requirements listed in rule. The program is required to refrain from stacking cribs that are used for sleeping infants.

Allegation: Infant assigned to sleep in a broken crib.

Determination: Substantiated

Findings: During the inspection, it was determined that at least one crib in the infant area did not meet the standards set forth in the rule and the United States Consumer Product Safety Commission (CPSC) safety standards as noted in number 2 below:

1. The crib was manufactured prior to June 28, 2011 and the program did not have a certificate of compliance on file.
2. The crib was broken. A screw was missing from the top side rail of a crib that was assigned to a child .
3. The crib was missing hardware.
4. The crib was leaning and/or not stable.
5. The crib had corner posts that exceeded more than one sixteenth of an inch above the top of the end panel.
6. The spaces between the bars of the crib, or between the bars and end panels of a crib, exceeded two and three-eighths inches.
7. Stacked cribs were used for a sleeping infant. Repair or replace the crib(s).

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

Risk Level: Moderate

Corrective Action Plan Due: 09/28/2025

**Domain:08 Staff Files**

Rule: 5180:2-12-07 Administrator Responsibilities/Requirements

Code: The program administrator is required to be onsite at the program for the required amount of time.

Allegation: The administrator is not meeting required on-site hours.

Determination: Substantiated

Findings: During the inspection, it was determined that the program did not have at least one administrator onsite for 50 percent of the program's operating hours or 40 hours a week, as required by this rule. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Risk Level: Low

Corrective Action Plan Due: 09/28/2025

### Serious Risk Non-Compliances

No Additional 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.

Findings: 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 1,2 3 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 individua 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: 09/28/2025

### Low Risk Non-Compliances

#### Domain:01 Ratio & Supervision

Rule: 5180:2-12-19 Supervision

Code: The program staff is required to supervise children in their assigned group by sight and hearing. Supervision includes being near enough to respond and reach children immediately including responding to the child's basic needs and protecting them from harm.

Findings: During the inspection, it was determined that children were not being properly supervised as noted in number 1 below:

1. Children were not within both sight and hearing of a child care staff member during indoor play. It was observed that the preschool children were unsupervised in the classroom doing table activities while the staff person was out of the room assisting a child in the restroom off the hallway.
2. Child(ren) were not within both sight and hearing of a child care staff member during outdoor play.
3. Child(ren) were not within both sight and hearing of a child care staff member more than once.
4. Staff were not physically present in the space and near enough to respond and reach the child(ren) immediately.
5. Other: [ ].

Children must be supervised according to rule and within both sight and hearing of a child care staff member at all times. Provide staff training. 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: 09/28/2025

#### **Domain:02 Safe & Sanitary Environment**

Rule: 5180:2-12-12 Safe Equipment

Code: The program is required to use equipment, that is safe and hazard free, according to the manufacturer's guidelines. Fans, air conditioners, heat pumps, and space heaters must be inaccessible to children. The program is required to refrain from using trampolines, ball pits and inflatable equipment intended for climbing and bouncing, including but not limited to slides and bounce houses.

Findings: During the inspection, equipment was determined to be unsafe, hazardous to children, or in need of repair as noted in number 12 below:

1. Manufacturer's guidelines for the [ ] were not followed in that [ ].
2. The straps were missing on the [ ].
3. The straps were attached, but were not used on the [ ].
4. The straps were attached and were used, but were not used in a safe manner.
5. The equipment had sharp points or corners.
6. The equipment had splinters.
7. The equipment had protruding nails.
8. The equipment had loose or rusty parts.
9. The equipment had paint which contains lead or other poisonous materials.
10. The equipment had hazardous features.
11. A fan was unstable and could easily tip over.
12. A fan had openings a finger could enter. The metal fan was located on the floor near the preschool children's cubbies outside of their classroom.
13. The pipes from the heat pump felt hot to the touch
14. A space heater felt hot to the touch
15. The position of a space heater was a tripping hazard
16. The air conditioning unit was not enclosed and was accessible to children on the playground.
17. A ball pit, trampoline, inflatable bounce house, inflatable slide, or inflatable equipment used for climbing and bouncing was used.
18. Other [ ].

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



Corrective Action Plan Due: 09/28/2025

**Domain:02 Safe & Sanitary Environment**

Rule: 5180:2-12-12 Safe Environment

Code: The program is required to provide an environment that protects the children in care from any items and conditions that may threaten their health, safety, and well-being.

Findings: During the inspection, it was determined that children were not protected from item or condition which may threaten their health, safety, or well-being as noted in number 6 below:

1. Surge protectors/outlets did not have childproof receptacle covers.
2. Open pull cords that are not closed loop.
3. Toys or other items small enough to be swallowed were present in the space where infants and/or toddlers were in care.
4. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
5. Stacked chairs.
6. Employee purse. Sitting on a low shelf in the office area . The office door was wide open.
7. Diaper bags.
8. Television not securely anchored.
9. Small or lightweight pieces of shelving units are not securely anchored to the wall.
10. Smoke detector needing batteries replaced.
11. An area rug did not have a nonskid backing.
12. An area rug presented a tripping hazard.
13. A floor surface that was unsafe in that [ ].
14. No platform was provided for the sink or toilet in the [ ] classroom.
15. The platform provided for the sink or toilet in the [ ] classroom was not sturdy.
16. The platform provided for the sink or toilet in the [ ] classroom posed a safety hazard in that [ ].
17. Telephone cords.
18. Staff member stepped over a barrier/gate while holding a child.
19. Emergency exits were blocked by the following classroom furniture: [ ].
20. A mercury thermometer was being used to take a child's temperature.
21. Methods of ventilation used did not provide protection from rodents, insects, or other hazards.
22. Other [ ].

Provide staff training. 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: 09/28/2025

**Domain:05 Health & Safety**

Rule: 5180:2-12-22 Meal and Snack Requirements

Code: The program is required to post the current weekly 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 3 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.

Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is required at this time.

Corrective Action Plan Due: 09/28/2025

**Domain:07 Diapering & Infant Care**

Rule: 5180:2-12-23 Infant Bottle and Food Preparation

Code: The program staff is required to label bottles containing formula or breast milk.

Findings: During the inspection, it was determined that bottles containing formula for a particular infant were not labeled with the child's name and date of preparation. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is required at this time.

Corrective Action Plan Due: 09/28/2025

**Domain:07 Diapering & Infant Care**

Rule: 5180:2-12-20 Cribs

Code: The program is required to provide a safe and sufficient barrier to separate the play and sleeping space.

Findings: During the inspection, it was determined that the barrier between the play and sleeping space did not meet the requirements as noted in number 1 below:

1. No barrier had been provided. There was no gate on the barrier preventing children from entering the sleeping area.
2. The barrier did not prevent the infants from entering the sleeping area.
3. The barrier was not safe.
4. The barrier was not sturdy.
5. The barrier impaired staff's ability to see and hear all sleeping infants in their cribs.
6. The barrier was inadequate.
7. Other [ ].

Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is required at this time.

Corrective Action Plan Due: 09/28/2025

**Domain:07 Diapering & Infant Care**

Rule: 5180:2-12-23 Infant Daily Care



Code: The program staff is required to hold infants or have the infant sitting up while feeding. The program staff may not place an infant in a crib with a bottle.

Findings: During the inspection, it was determined that the program did not meet the requirements for bottle feeding as noted in number 2 below:

1. A bottle was propped for an infant feeding.
2. An infant was placed in a crib with a bottle. A 10 month old infant was placed in crib with a bottle.
3. An infant was not held or fed sitting up for bottle feedings.

Provide staff training. 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: 09/28/2025

#### **Domain:08 Staff Files**

Rule: 5180:2-12-08 Medical Statement

Code: The program staff's medical statements are required to be completed and on file at the program.

Findings: In review of the staff records, it was determined that the medical statements for the employees listed on the Employee Record Chart did not meet the requirements as listed in number 1 below.

1. A medical statement was not on file for at least one employee;
2. The medical statement(s) on file did not have a date of examination within 12 months of the employee's first day of employment;
3. Date of examination was missing;
4. Signature, business address, or telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination was missing;
5. A statement was missing that verifies the employee is:
  - a. Physically fit for employment in a program caring for children;
  - b. Immunized against Tetanus, Diphtheria, Pertussis (Tdap);
  - c. Immunized against Measles, Mumps, and Rubella (MMR);
6. Tuberculosis (TB) screening/test information was missing:
  - a. Documentation of the screening process to determine if the employee resided in a country identified by the world health organization as having a high burden of TB and arrived in the United States within the five years preceding the date of application for employment.
  - b. Results of a TB test for employees meeting both criteria in 6a.
  - c. Results of additional testing for employees with a positive TB test.
  - d. Written statement, signed by a representative of the TB control unit, that the employee's TB is no longer infectious or the individual is receiving a TB treatment regimen for employees with a positive TB test.

Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, or TB results/documentation, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/28/2025

#### **Domain:08 Staff Files**

Rule: 5180:2-12-08 Child Care Staff Member Educational 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 incomplete or not on file for a high school junior or senior who is enrolled in a career-technical program.
3. Documentation was not on file for a high school junior or senior who is also enrolled in a college credit program in child development or early childhood education.
4. Documentation was not on file for a high school junior or senior who is enrolled in a Child Development Associate (CDA) training program.

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: 09/28/2025