

# **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	ils	
Program Name	Program Number		Program Type
TOTS LEARNING CENTER	000000103795		Child Care Center
Address			County
263 S PROSPECT ST RAVENNA			PORTAGE
ОН			
44266			
		*	
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
04/08/2025	E	211	83
Fire Inspection Approval Date	Food Service Risk Level		
04/19/2024	Level II		

Inspection Information				
Inspection Type	Inspection So	cope	Inspection Notice	
Annual	Full		Unannounced	
Inspection Date	Begin Time		End Time	
07/21/2025	9:44 AM	9:44 AM 2:47 PM		
Reviewer:				
REBECCA KOTEWICZ				
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
58	7	0	1	6

License Capacity and Enrollment at the Time of Inspection				
Age Group	License Capacity	Enrollment		ollment
	Totals	Full Time	Part Time	Total
Infant ( Birth to < 18 m)		6	0	6
Young Toddler		2	0	2
Total Under 2 ½ Years	34	8	0	8
Older Toddler		2	0	2
Preschool		11	0	11
School Age		24	0	24
Total Capacity/Enrollment	121	37	0	45

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment



Infants	0 to < 12 months	1 to 4	Arrival 0-2yrs
Infants	0 to < 12 months	1 to 4	
Toddlers	18 months to < 30 months	1 to 4	Arrival
Toddlers	18 months to < 30 months	1 to 5	nap
PK	3 years to < 4 years	2 to 9	nap
PK	3 years to < 4 years	2 to 9	PS and PK
			combined
SA	School-Age to < 11 years	2 to 18	
SA	School-Age to < 11 years	2 to 18	Arrival

### **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 5180:2-12-03 and 5180:2-13-03 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: 09 Children's Files

Rule: 5180:2-12-15 Medical/Physical Care Plans

<u>Code</u>: The program is required to have a completed JFS 01236 "Child Medical/Physical Care Plan for Child Care" on file at the program for any child having a health condition and must implement and/or follow instructions on the plan. The program is required to have staff trained to perform the procedures on the JFS 01236 "Child Medical/Physical Care Plan for Child Care" present at the program when the child requiring the procedure is onsite. Only staff who have been trained shall be permitted to perform the procedures listed on the JFS 01236.

<u>Finding</u>: In review of the children's records, it was determined the program did not meet the requirements for caring for at least one child, indicated on the Children Records Review, with a condition that requires a JFS 01236 "Child Medical/Physical Care Plan" as noted in number(s)1, 13, 14, 17, 30, 31, 43 below:

1. No plan was on file. Form expired



### (Page 1)

- 2. Child's name was missing.
- 3. Name of the condition was missing.
- 4. Indication if medication or medical food is required was missing.
- 5. Signs, symptoms or situations that require staff to take action were missing.
- 6. Activities, foods, environmental conditions to avoid were missing.
- 7. Training instructions for procedures for staff to follow were missing or incomplete.

### (Page 2)

- 8. Child's name was missing or not attached.
- 9. Child's date of birth was missing or not attached.
- 10. Child's weight was missing or not attached.
- 11. Name of the medication/medical food was missing or not attached.
- 12. Dosage of medication/medical food to be administered was missing or not attached.
- 13. Time for medication/medical food to be administered was missing or not attached.
- 14. Expiration date for medication/medical food was missing or not attached.
- 15. Symptoms that require staff to administer medication/medical food were missing or not attached.
- 16. Specific instructions to administer the medication/medical food were missing or not attached.
- 17. Actions to be taken if the symptoms do not subside were missing or not attached.
- 18. Physician's signature was missing or not attached.
- 19. The date of the physician's signature was missing or not attached.

### (Page 3)

- 20. Child's name was missing.
- 21. Instructions regarding emergency evacuation, if applicable, were missing.
- 22. Signature of parent granting permission to implement the plan and verifying training was missing.
- 23. Date of parent signature was missing.
- 24. Certified Professional Trainer information was missing.
- 25. Signature of certified professional who trained the program staff was missing, if parent was not the trainer.
- 26. Date of trainer signature was missing.
- 27. Printed name(s) of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
- 28. Signature(s) of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
- 29. Date of staff signature was missing.
- 30. Administrator/Provider signature was missing
- 31. Date of administrator/Provider was missing.

#### (Page 4)

- 32. Child's name was missing.
- 33. Name of medication or medical food was missing.
- 34. Date the medication/medical food was administered was missing.
- 35. Time medication/medical food was administered was missing.
- 36. Dosage of medication/medical food that was administered was missing.
- 37. Signature of person administering medication/medical food was missing.
- 38. The plan was not followed or implemented.
- 39. The plan was not able to be implemented due to conflicting information.
- 40. None of the child care staff members trained in the procedures on the JFS 01236 were onsite when a child requiring the plan was present.
- 41. Child care staff members trained in the procedures on the JFS 01236 were not scheduled to be present the entire the time the child requiring the plan was onsite.



- 42. None of the child care staff members trained in the procedures on the JFS 01236 accompanied the child requiring the plan during a trip.
- 43. A child care staff member who had not been trained in the procedures on the JFS 01236 performed the procedure.
- 44. Medication listed in the procedures to follow was not onsite available to administer as instructed and alternate instructions for this situation were not included on the plan.

Provide staff training. Submit the program's corrective action plan, which includes a copy of the completed JFS 01236, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 08/20/2025

# **Low Risk Non-Compliances**

Domain: 04 Indoor/Outdoor Space

Rule: 5180:2-12-11 Outdoor Play Fall Zones

Code: The program is required to provide fall zones around equipment to prevent injury if a child were to fall.

<u>Finding</u>: During the inspection, it was determined the fall zone under and around equipment designated for climbing, swinging, balancing and sliding did not meet the requirements as noted in number(s) 1 below:

- 1. The fall surface material had not been properly distributed or raked as needed to retain proper depth under and around equipment.
- 2. A fall zone hazard was present, in that, the [ ] posed a risk of injury if a child were to fall from a piece of equipment.
- 3. The fall zone was less than 3 feet from the fence for equipment used by children 23 months of age and younger.
- 4. The fall zone was less than 6 feet from the fence for equipment used by children 24 months of age and older.
- 5. There was not a fall zone of 3 feet in all directions from the perimeter of the equipment used by children 23 months of age and younger.
- 6. There was not a fall zone of 6 feet in all directions from the perimeter of the equipment used by children 24 months of age and older.
- 7. The fall zone was less than 4 1/2 feet from each piece of applicable equipment used by children 23 months of age and younger.
- 8. The fall zone was less than 9 feet from each piece of applicable equipment used by children 24 months of age and older.
- 9. Other [ ].



The program is required to provide adequate fall zones under and around outdoor play equipment at all times. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 08/20/2025

### Domain: 05 Health & Safety

Rule: 5180:2-12-22 Fluid Milk Requirements

<u>Code</u>: The program is required to serve age-appropriate fluid milk or obtain written documentation when serving substitutions for fluid milk.

<u>Finding</u>: During the inspection, it was determined that required documentation for substitutions for fluid milk was not on file as noted in number(s) 2, 3, 4 below:

- 1. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when infants up to 12 months of age are served anything other than formula or breast milk.
- 2. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when infants and toddlers 12 months of age up to 24 months of age are served anything other than unflavored whole homogenized vitamin D fortified cow's milk, breast milk, or non-cow milk substitution that is nutritionally equivalent to milk.
- 3. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when toddlers and children 24 months of age and older are served anything other than unflavored one per cent milk that is vitamin A and D fortified, unflavored fat free or skim milk that is vitamin A and D fortified, or non-cow milk substitutions that are nutritionally equivalent to milk.
- 4. Written parental consent for non-cow milk substitutions that are nutritionally equivalent to milk for children 12 months of age and older.
- 5. The program did not have the type of milk on-site to ensure that all children were served age-appropriate fluid milk.

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 not required at this time.

**Domain: 08 Staff Files** 

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

<u>Code</u>: The program administrator is required to maintain current employee records in the Ohio Professional

Registry.



<u>Finding</u>: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 5 below:

- 1. At least one administrator, employee or child care staff member (including substitutes) had not created a profile.
- 2. At least one administrator, employee or child care staff member had not created an employment record for the program on or before their first day of employment.
- 3. At least one administrator, employee or child care staff member had not updated changes to positions or roles within five calendar days of the change.
- 4. The administrator had not assigned at least one employee or child care staff member to the program's organization dashboard.
- 5. At least one individual's schedule was not current.
- 6. At least one individual's position or role did not include an applicable group assignment.
- 7. At least one individual's employment had not been end dated.
- 8. Other: [ ]

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

Corrective Action Plan Due: 08/20/2025

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

Rule: 5180:2-12-08 Medical Statement

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

<u>Finding</u>: 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(s) 5c 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: 08/20/2025

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

Rule: 5180:2-12-10 Health Training Requirements

<u>Code</u>: The program is required to have all child care staff members complete training in child abuse and neglect recognition and prevention within sixty days of hire. Staff must complete training in first aid and CPR within the first ninety days of hire.

<u>Finding</u>: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in number(s) 4 below:

- 1. Child abuse and neglect recognition and prevention training was not completed within sixty days of hire.
- 2. First aid training was not completed within ninety days of hire.
- 3. Cardiopulmonary resuscitation (CPR) training was not completed within ninety days of hire.
- 4. The child abuse and neglect recognition and prevention training was expired.
- 5. The first aid training was expired.
- 6. The CPR training was expired.

Refer to the Employee Record Chart for the name(s) of the child care staff member(s) who must complete the required health and safety training(s). Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 08/20/2025

#### Domain: 09 Children's Files

Rule: 5180:2-12-25 Medication Administration

<u>Code</u>: The program staff is required to obtain signed written permission prior to administering topical products and lotions other than hand sanitizer to be used by children older than twenty-four months and lip balm.



<u>Finding</u>: During the inspection, it was determined the program did not obtain signed written permission from the parent prior to administering topical products and lotions, other than hand sanitizer to be used by children older than twenty-four months and lip balm. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 08/20/2025

# Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Written Disaster Plan	Compliant	
	*	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-02 License Posted	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-04 Building Department	Compliant	
Inspection		
	**	**
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-02 Current Information	Compliant	
	for the second s	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-03 Inspection	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-04 Fire Inspection	Compliant	Documenting Statement: Please Note:
		Documentation of a fire inspection
		without any uncorrected violations must
		be secured for the program. Secure a
		new fire inspection by 4/08/26.



	1	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-04 Food Service	Compliant	Documenting Statement: The food service
Requirements		license was observed posted. Following is
~		the audit number and date of expiration:
		9997254, March 1, 2026, level II.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-07 Administrator	Compliant	
Qualifications		
- Carlineanene		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-07 Written Program	Compliant	Decame Name of the Approximation of the Approximati
Policies and Procedures	Compilant	
Tollers and Frocedures		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-08 Child Care Staff Member	Compliant	bocumenting statement(s), it applicable
	Compilant	
Educational Requirements		
Pule	Chatus	Descriptions Chatamaget/-\ If
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-08 Orientation Training &	Compliant	
Whistle Blower Protection		
	F	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-09 Background Check	Compliant	Documenting Statement: During the
Requirements		inspection, the required documentation
		regarding background checks was on file
		for all employees listed.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-10 Professional	Compliant	
Development Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Indoor Space	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Separation of Children	Compliant	
Under 2 1/2 Years	_	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Outdoor Space	Compliant	5
Requirements		
and an ements	1	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-12 Safe Equipment	Compliant	bocamenting statement(s), it applicable
5100.2-12-12 Sale Equipment	Compilant	



Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Outdoor Play Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-12 Safe Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-13 Sanitary Equipment and	Compliant	
Environment		
2.1		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-13 Handwashing	Compliant	
Requirements		
P. I.	Charles	D () If I
Rule 5120 2 12 12 5 1 5	Status	Documenting Statement(s), If applicable
5180:2-12-13 Smoke Free	Compliant	
Environment		
	To-	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-14 Transportation and Field	Compliant	
Trip Procedures		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-15 Child Medical and	Compliant	
Enrollment Records		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Medical, Dental, and	Compliant	
General Emergency Plan		
	25	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-16 Emergency Drills	Compliant	Documenting Statement: Documentation
		for completed fire, weather, and
		emergency/lockdown drills was verified
		during this inspection.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-16 First Aid/Standard	Compliant	Documenting Statement: During the
Precautions		inspection, the program had complete
		first aid kits available as required.
D. (	C	D :: () ()
Rule	Status	Documenting Statement(s), If applicable
Rule Rule: 5180:2-12-16 Management of Communicable Disease	Status Compliant	Documenting Statement(s), If applicable Documenting Statement: The JFS 08087 "Communicable Disease Chart" was



		posted and was readily available to staff and parents.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Incident/Injury	Compliant	Documenting Statement(s), if applicable
Reporting		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-17 Materials and	Compliant	
Equipment		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-17 Daily Schedule	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-18 Attendance	Compliant	Documenting Statement: Child Care Staff
Records	Compilant	Members were observed recording the
, nessi us		attendance for each child upon arrival
		and documenting each child's departure.
D. Ja	Chabina	Decumenting Chatemant (a) If a mulicable
Rule 5180:2-12-18 Group Size	Status Compliant	Documenting Statement(s), If applicable
3130.2 12 13 Group 3120	Compilant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-17 Daily Outdoor Play	Compliant	Documenting Statement: Outdoor play was observed for the all group(s).
		was observed for the all group(s).
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 License Capacity	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-18 Ratio	Compliant	Documenting Statement: The Appendix A
		"Staff/Child Ratios, Age Grouping and
		Maximum Group Size" was posted in a
		noticeable area at the program as
		required.
Rule: 5180:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child
	,	ratios observed during the inspection
		were in compliance.
	<u> </u>	
Rule	Status	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable



Rule: 5180:2-12-20 Cots and Napping	Compliant	Documenting Statement: The rest area had adequate lighting, which allowed for the visual supervision of children.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-19 Supervision	Compliant	S control of the second of the
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-19 Child Guidance	Compliant	C constitution ( )
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-20 Cribs	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Meal and Snack Requirements	Compliant	,
Rule 5180:2-12-22 Safe Food Handling/Storage	Status Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-23 Infant Daily Care	Compliant	Documenting Statement: Appropriate daily written records for all infants were viewed.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-23 Infant Bottle and Food Preparation	Compliant	
Rule: 5180:2-12-23 Diapering and Toilet Training	Status Compliant	Documenting Statement(s), If applicable  Documenting Statement: Appropriate diaper changing procedures were observed during the inspection in the infant room(s).