



## Family Child Care 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 Tamika Washington	Program Number 000000965969362	Program Type FCC - Type B Home
Address 1630 Meadowbrook Ave Youngstown OH 44514		County MAHONING

Inspection Information			
Inspection Type Complaint		Inspection Scope Partial	Inspection Notice Unannounced
Reviewer(s) Taylor Dinh	Inspection Day 04/06/2026	Begin Time 2:30 PM	End Time 3:00 PM

Summary of Findings				
No. Rules Verified 8	No. Rules with Non-compliances 6	No. Serious Risk 2	No. Moderate Risk 1	No. Low Risk 3

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Aunt T's Child Care and Development	Mixed Age Group	1 to 4	2:35pm

### 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: 00 License & Approvals**

Rule: 5180:2-13-03 Inspection Requirements

Code: The provider is required to refrain from falsifying information.

**Allegation:** The provider has previously stated to county agency staff that there are no residents at her home and that her program has no staff members.

**Determination:** Substantiated

**Findings:** During the inspection, it was determined that the provider provided false information, as she had stated at the previous inspection (3-20-26) that there were no other residents at her home and that her program had no other staff. Rule 5180:2-13-03 requires the program to notify parents when a serious risk non-compliance is cited. The notification must inform parents of the serious risk non-compliance and include the Department of Children and Youth website and location of further information regarding the determination. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

**Risk Level:** Serious

**Corrective Action Plan Due:** 04/12/2026

**Domain: 08 Staff Files**

Rule: 5180:2-13-09 Background Checks

Code: Individuals associated to the program are required to request background checks.

**Allegation:** Montrail Mitchel and his girlfriend Keisha reside at the home but have never requested or gotten background checks done.

**Determination:** Substantiated

**Findings:** In review of the staff records, it was determined that a resident of the home turned 18 years of age moved into the home and background checks were not requested within 10 business days. Submit the program's corrective action plan, which includes a copy of the resident's JFS 01176, to verify compliance with the requirements of this rule.

**Risk Level:** Moderate

**Corrective Action Plan Due:** 05/07/2026

**Domain: 08 Staff Files**

Rule: 5180:2-13-09 Background Checks

Code: Individuals listed on the Employee Record Chart are required to submit background checks.

Allegation: Keisha, Brandon Reid, and Terrance Lawrence are being paid/compensated to take care of children at Tamika's program but have no background checks or any record of employment.

The provider stated that Brandon Reid and Terrance Lawrence do not reside at the residence or work at her program in anyway. The provider stated that Montrail Mitchell and Archesia Nettles do reside at her home and help in her program.

Determination: Substantiated

Findings: In review of the staff records, it was determined that background checks were not requested for Montrail Mitchell and Archesia Nettles. The program must request background checks for each individual or release the individual from employment.

Rule 5180:2-13-03 requires the program to notify parents when a serious risk non-compliance is cited. The notification must inform parents of the serious risk non-compliance and include the Department of Children and Youth website and location of further information regarding the determination. Submit the program's corrective action plan, which includes a statement that background checks have been submitted or the individual is no longer employed at the program, to verify compliance with the requirements of this rule.

Risk Level: Serious

Corrective Action Plan Due: 04/12/2026

### Summary of Additional Non-Compliances

#### Serious Risk Non-Compliances

**No Additional Serious Risk Non-Compliances were observed during this inspection**

#### Moderate Risk Non-Compliances

**No Additional Moderate Risk Non-Compliances were observed during this inspection**


**Low Risk Non-Compliances**

**Domain: 08 Staff Files**

Rule: 5180:2-13-07 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) 3, 4, and 9 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.

11. Other: []

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

Corrective Action Plan Due: 05/07/2026

**Domain: 08 Staff Files**

Rule: 5180:2-13-07 Provider Responsibilities

Code: The program is required to notify the county agency of any change in the household composition.

Findings: During the inspection, it was determined the provider did not update OCLQS as noted in the following number 1 and 2 below:

1. A change in household composition including someone joining the household or leaving the household within five calendar days.
2. An individual staying in the home for more than ten consecutive calendar days.

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

Corrective Action Plan Due: 05/07/2026

**Domain: 08 Staff Files**

Rule: 5180:2-13-10 Health Training

Code: Child care staff members and substitute child care staff members are required to complete health trainings within the first ninety days of hire and prior to being left alone with children.

Findings: In review of records, it was determined the CCSM or Substitute CCSM did not meet health training requirements listed in number (s) 2, 3, 4, and 5 below:

1. All health trainings were not completed prior to being left alone with children.
2. First Aid training was not completed within the first ninety days of hire.
3. CPR training was not completed within the first ninety days of hire.
4. Communicable Disease training was not completed within the first ninety days of hire.
5. Child Abuse training was not completed within the first ninety days of hire.

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: 05/07/2026