



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 Dennie Precious Little Angels	Program Number 2190019820	Program Type FCC - Type B Home
Address 2015 23rd STREET NE CANTON OH 44705		County STARK

Inspection Information			
Inspection Type Complaint		Inspection Scope Partial	Inspection Notice Unannounced
Reviewer(s) Raquel Borsellino	Inspection Day 10/10/2023	Begin Time 2:49 PM	End Time 2:54 PM
Reviewer(s) Raquel Borsellino	Inspection Day 10/11/2023	Begin Time 9:33 AM	End Time 10:16 AM

Summary of Findings				
No. Rules Verified 5	No. Rules with Non-compliances 4	No. Serious Risk 0	No. Moderate Risk 0	No. Low Risk 4

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Dennie J	Mixed Age Group	1 to 2	



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: 02 Safe & Sanitary Environment

Rule: 5101:2-13-13 Smoke Free

Code: The program is required to provide a smoke free environment during operating hours, ensure smoking is not seen by children, post a "No Smoking Sign" by the main entrance, provide notification to parents if smoking occurs on the premises outside of operating hours, and refrain from exposing children to smoking paraphernalia.

Allegation: Provider was smoking in the home while children were in care.

Determination: Substantiated

Findings: During the inspection, it was determined that the program was not maintaining a smoke free environment, as noted in the number 1 below:

1. The program did not provide a smoke free environment for children during the hours of child care in that someone was in the home smoking in the living room with children in care.
2. An individual left the home to smoke, however, this smoking occurred in an area within view of the children.
3. A "No Smoking" sign was not displayed in a conspicuous place at the main entrance.
4. Smoking had occurred in the program or vehicle during hours the program was not in operation; however, parents had not been given written notice of this.
5. Children had access and/or were exposed to smoking paraphernalia in that [cigarettes/cigars/pipe butts/ashes/chewing or smokeless tobacco/electronic cigarettes/vaporizers] was/were observed in view of children.
6. Other [].

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

Risk Level: Low

Corrective Action Plan Due: 11/10/2023

Domain: 10 Written Policies & Procedures

Rule: 5101:2-13 Written Policies and Procedures

Code: The provider is required to create, maintain, and implement the policies and procedures outlined in appendix C and D of this rule.

Allegation: Provider did not let guardian in the home when guardian came to pick up the child.

Determination: Substantiated

Findings: It was determined, the provider was not responsible for creating, maintaining or implementing the policies and procedures detailed in appendix C and D of this rule. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Risk Level: Low



Corrective Action Plan Due: 11/10/2023

Domain: 10 Written Policies & Procedures

Rule: 5101:2-13 Written Policies and Procedures

Code: The provider is required to create, maintain, and implement the policies and procedures outlined in appendix C and D of this rule.

Allegation: Provider did not have parent sign child out of care.

Determination: Substantiated

Findings: It was determined, the provider was not responsible for creating, maintaining or implementing the policies and procedures detailed in appendix C and D of this rule. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Risk Level: Low

Corrective Action Plan Due: 11/10/2023

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: 01 Ratio & Supervision

Rule: 5101:2-13-18 Attendance

Code: The program is required to maintain a record of the arrival and departure of each child. The program is also required to retain the original attendance record at the center for a period of one year.

Findings: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number(s) 3, 4, 5, 6, & 7 below:

1. No attendance record was being maintained.
2. The attendance record was not being consistently completed.
3. The record did not include the name of at least one child.
4. The record did not include the birth date of at least one child.
5. The record did not include the assigned group.
6. The record did not include the child's weekly schedule.
7. The record did not include the time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.
8. The original attendance record was not kept at the program for a period of one year.

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

Corrective Action Plan Due: 11/10/2023