

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 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 Deta | ails | | |
|-------------------------------|---------------------|-------------------------|-------------------|--|
| Program Name | Program Number | | Program Type | |
| Little Tikes Daycare LLC | 2210024655 | | Child Care Center | |
| Address | I | | County | |
| 1766 Canton Rd Akron OH 44312 | | | SUMMIT | |
| | | | | |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ | |
| 05/19/2021 | E | 100 | 19 | |
| Fire Inspection Approval Date | Food Service Risk L | Food Service Risk Level | | |
| 05/13/2021 | Exempt | | | |

| Inspection Information | | | | | |
|----------------------------|--------------------------------|--------------------|-------------------|--------------|--|
| Inspection Type | Inspection So | cope | Inspection Notice | | |
| Provisional | Full | | Unannounced | | |
| Inspection Date 09/13/2021 | Begin Time 8 | Begin Time 8:00 AM | | | |
| Reviewer: | | | | | |
| AQILA BROWN | | | | | |
| | Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk | |
| 57 | 6 | 0 | 1 | 5 | |

| License Capacity and Enrollment at the Time of Inspection | | | | |
|---|------------------|------------|-----------|-------|
| Age Group | License Capacity | Enrollment | | |
| | Totals | Full Time | Part Time | Total |
| Infant (Birth to < 18 m) | | 9 | 0 | 9 |
| Young Toddler | | 8 | 0 | 8 |
| Total Under 2 ½ Years | 19 | 17 | 0 | 17 |
| Older Toddler | | 4 | 0 | 4 |
| Preschool | | 11 | 0 | 11 |
| School Age | | 0 | 9 | 9 |
| Total Capacity/Enrollment | 81 | 15 | 9 | 41 |

| Staff-Child Ratios at the Time of Inspection | | | |
|--|------------------|----------------|---------|
| Group | Age Group/Range | Ratio Observed | Comment |
| Infants | 0 to < 12 months | 1 to 7 | Arrival |

| | | | Staff person left the group |
|------------|--------------------------|---------|--------------------------------|
| Infants | 0 to < 12 months | 2 to 4 | Table Toys |
| Infants | 0 to < 12 months | 2 to 4 | Meal |
| Preschool | 3 years to < 4 years | 1 to 6 | Arrival |
| | | | Restroom |
| Preschool | 3 years to < 4 years | 1 to 9 | Nap |
| Preschool | 3 years to < 4 years | 1 to 8 | Nap |
| School Age | School-Age to < 11 years | 1 to 1 | Transported to School |
| Toddlers | 18 months to < 30 months | 2 to 9 | Diaper Change |
| Toddlers | 18 months to < 30 months | 2 to 10 | Lunch |
| Toddlers | 18 months to < 30 months | 2 to 10 | Nap |

Summary of Non-Compliances

If the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited. Ohio Administrative Code 5101: 2-12-03 details the process for submitting a request for a review if a program disagrees with a licensing finding. The request for review must be submitted within seven days from the receipt of the licensing report.

| Serious Risk Non-Compliances | | |
|--|--|--|
| No Serious Risk Non-Compliances were observed during this inspection | | |
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| | | |
| | | |

Moderate Risk Non-Compliances

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Ratio

<u>Code</u>: The program is required to maintain the appropriate staff to child ratio for each group served.

<u>Finding</u>: During the inspection, a ratio of 1 child care staff member for 7 children was determined to have occurred for the infant / toddler group when the situation in number 1 below occurred:

- 1. A child care staff member stepped out of the room.
- 2. A child care staff member had not arrived at work on time.
- 3. Children were present who were not scheduled to be there.

- 4. A child care staff member was unable to work.
- 5. A child was injured in that group.
- 6. A child arrived in the group before a second staff member was scheduled to arrive with the group.
- 7. Two groups were combined, and the program did not follow the ratio for the youngest child in the group.
- 8. A child was transitioning to the next older age group, and the program did not follow the ratio for the youngest child in the group.
- 9. Ratio was doubled for more than two hours while children were napping.
- 10. Ratio was doubled while children were napping for a group that included at least one infant.
- 11. Ratio was doubled while children were napping and there were not enough staff members in the building to meet staff/child ratio.
- 12. Ratio was doubled in the school age group to allow access to the program, however, the program does not serve only school age children.
- 13. Both child care staff members did not have a working communication device when one staff member left the group to allow access to the school age only program.
- 14. The child care staff member did not return to the group after allowing access to the school age only program.
- 15. Other [].

Additional child care staff members must be hired or current child care staff members must be rescheduled to maintain compliance. 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: 10/13/2021

Low Risk Non-Compliances

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

Code: The program is required to have the information listed in rule on all attendance records.

<u>Finding</u>: During the inspection, it was determined that the attendance records did not include the required information listed in numbers 2 and 4 below:

- 1. The name of the child.
- 2. The birth date of the child.
- 3. The assigned group.
- 4. The child's weekly schedule.
- 5. The time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.

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

Corrective Action Plan Due: 10/13/2021

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

<u>Code</u>: 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.

<u>Finding</u>: Children in care shall be protected from any items and conditions which threaten their health, safety, and well-being. During the inspection, it was determined that children were not protected from the following item or condition which may threaten their health, safety, or well-being as noted in number 1 and 4 below:

- 1. Open pull cords that are not closed loop. Preschool / Multimedia area
- 2. Telephone cords.
- 3. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
- 4. Stacked chairs. Toddler nd Preschool Room
- 5. Employee(s) purse(s).
- 6. Diaper bags.
- 7. Television not securely anchored.
- 8. Small or lightweight pieces of shelving units are not securely anchored to the wall.
- 9. Smoke detector needing batteries replaced.
- 10. Staff member stepped over a barrier/gate while holding a child.
- 11. Emergency exits were blocked by the following classroom furniture: [].
- 12. 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: 10/13/2021

Domain: 05 Health & Safety

Rule: 5101:2-12-16 Emergency Drills

Code: The program is required to complete fire drills, weather drills, and emergency/lockdown drills

appropriately.

<u>Finding</u>: During the inspection, it was determined that the required drills were not completed for item numbers 1 and 2 below:

- 1. Monthly fire drills;
- 2. Monthly weather emergency drills (March through September);
- 3. Quarterly emergency/lockdown drills.

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

Corrective Action Plan Due: 10/13/2021

Domain: 06 Program Information

Rule: 5101:2-12-14 Transportation and Field Trip Procedures

<u>Code</u>: The program is required to have the parent for each child complete the required information on the trip permission form.

<u>Finding</u>: In review of the program's records, it was determined that the form used to secure the written permission of the parent/guardian for a field trip or routine trip was missing the required information listed in number 3 below:

- 1. The child's name.
- The date(s) of the trip(s) (field trips only).
- 3. The destination of the trip.
- 4. The departure and return time(s) of the trip(s) (field trips only).
- 5. The signature of the parent.
- 6. The date on which the permission was signed.
- 7. A statement notifying parents how their child will be transported.
- 8. 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. Please submit a written, corrective action plan verifying compliance with this rule.

Corrective Action Plan Due: 10/13/2021

Domain: 09 Children's Files

Rule: 5101:2-12-15 Child Medical and Enrollment Records

<u>Code</u>: The program is required to use the updated JFS 01234 "Child Enrollment and Health Information For Child Care" .

<u>Finding</u>: In review of 25% of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in numbers 5 and 9 below.

- 1. No enrollment form was completed for at least one child
- 2. The current JFS 01234 was not completed for at least one child
- 3. Complete parent information
- 4. Complete emergency contact information
- 5. Complete physician information
- 6. Information regarding the parent list
- 7. Health information
- 8. Additional information for all boxes checked "yes"
- 9. Emergency transportation information
- 10. Parent/guardian's signature
- 11. Diapering Statement
- 12. Acknowledgement of Policies and Procedures
- 13. Enrollment form for at least one child was not updated by either the parent or the administrator
- 14. Enrollment form for at least one child was not signed by the administrator
- 15. 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. Please submit a written, corrective action plan verifying compliance with this rule.

Corrective Action Plan Due: 10/13/2021

Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(s), If applicable |
|---|-----------|--|
| Rule: 5101:2-12-22 Meal and Snack Requirements | Compliant | Documenting Statement: The program was providing nutritional information to parents. |

| Rule | Status | Documenting Statement(s), If applicable |
|------|--------|---|

| Rule: 5101:2-12-13 Handwashing Requirements | Compliant | Documenting Statement: Staff and children were observed washing hands as required by the rule. |
|--|---------------------|---|
| | | |
| Rule: 5101:2-12-04 Fire Approval | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: Please Note: An annual fire inspection approval must be secured for the program. Secure a new approval by 5/13/22. |
| Rule | Status | Decumenting Statement(s) If applicable |
| Rule: 5101:2-12-16 Management of Communicable Disease | Compliant | Documenting Statement(s), If applicable Documenting Statement: The JFS 08087 "Communicable Disease Chart" was posted and was readily available to staff and parents. |
| | 1 | |
| Rule: 5101:2-12-13 Smoke Free Environment | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: No smoking was allowed on the premises, and the notice stating that smoking is prohibited was observed posted in a conspicuous place. |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator Qualifications | Compliant | bocumenting statement(s), if applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements | Compliant | Documenting Statement: All Child Care Staff Members had verification of educational requirements on file at the program. |
| Duta | Chahara | Decree while Chaterer and a life and inchin |
| Rule: 5101:2-12-14 Transportation - Driver Requirements | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: The drivers had completed the required ODJFS driver training. |
| Dula | Ctatus | Decumenting Chatement (a) If a will also |
| Rule 5101:2-12-16 Written Disaster Plan | Status Compliant | Documenting Statement(s), If applicable |
| Doda | Chahara | Decomposition Charles (1) If It It |
| Rule 5101:2-12-04 Food License | Status Compliant | Documenting Statement(s), If applicable |

| Rule | Status | Documenting Statement(s), If applicable |
|---------------------------------------|-----------|--|
| Rule: 5101:2-12-13 Sanitary | Compliant | Documenting Statement: On the day of |
| Equipment and Environment | | the inspection, the program provided a |
| | | clean environment in accordance with |
| | | Appendix A of this rule, which included |
| | | the furniture, materials and equipment. |
| | | , |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Child Guidance | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 111110 | | Documenting Statement(s), if applicable |
| 5101:2-12-22 Fluid Milk Requirements | Compliant | |
| | 1 | 1 |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 First Aid/Standard | Compliant | Documenting Statement: During the |
| Precautions | | inspection, 2 first aid kits were reviewed |
| | | and available as required. |
| | | · · |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Play Fall | Compliant | Documenting Statement: During the |
| Zones | | inspection, the requirements of the rule |
| | | regarding outdoor play fall zones were |
| | | discussed. There is no equipment |
| | | requiring a fall surface at this time. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| | | Documenting Statement(s), if applicable |
| 5101:2-12-18 License Capacity | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-22 Safe Food | Compliant | Documenting Statement: Sack lunches |
| Handling/Storage | | were stored individually with cold packs |
| | | as needed. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-07 Written Program | Compliant | Documenting Statement: No changes |
| Policies and Procedures | | have been made to the written policies |
| | | and procedures since it was last approved |
| | | by this Department. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |

| 5101:2-12-11 Indoor Space | Compliant | |
|--------------------------------------|-----------|---|
| Requirements | Compliant | |
| Requirements | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-17 Materials and | Compliant | Documenting Statement: Sufficient |
| Equipment | | equipment was observed in all categories. |
| | | equipment and entered |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Play | Compliant | Documenting Statement: Outdoor |
| Equipment | | equipment was viewed to be safe and |
| | | free of rust, sharp points, and other |
| | | hazards. Program provides outdoor |
| | | activities. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Outdoor Play | Compliant | bookinenting statement(s), it applicable |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Building Approval | Compliant | Documenting Statement: On the day of |
| | | the inspection, the program was |
| | | operating in compliance with the current |
| | | building approval. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-02 License Posted | Compliant | Documenting Statement: The license was |
| | • | posted in a visible location as required. |
| | | · · |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Space | Compliant | Documenting Statement: The outdoor |
| Requirements | | play area is separated from traffic and |
| | | other hazards by a fence. |
| Rule: 5101:2-12-11 Outdoor Space | Compliant | Documenting Statement: The quarterly |
| Requirements | Compilant | playground inspections were completed |
| | | and documented, as required. The most |
| | | recent inspection report form was dated |
| | | 6/9/21. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Supervision | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-02 Current Information | Compliant | Documenting Statement(3), it applicable |
| STOTIZ TZ OZ CANCIN IIIOMINACION | Compliant | |

| Rule | Status | Documenting Statement(s), If applicable |
|---|-----------|--|
| Rule: 5101:2-12-23 Infant Bottle and | Compliant | Documenting Statement: All bottles were |
| Food Preparation | Compilant | labeled as required. |
| 1 ood i reparation | | labeled as required. |
| Rule: 5101:2-12-23 Infant Bottle and | Compliant | Documenting Statement: Bottles and |
| Food Preparation | | opened food were stored in a refrigerator |
| - Courteparation | | located in the infant space. |
| | | in the second se |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Schedule | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s) If applicable |
| Rule: 5101:2-12-20 Cots and Napping | Compliant | Documenting Statement(s), If applicable Documenting Statement: Cots/mats were |
| Nule: 3101.2-12-20 Cots and Napping | Compliant | assigned individually by a child's name. |
| | | assigned individually by a clind's flattie. |
| Rule: 5101:2-12-20 Cots and Napping | Compliant | Documenting Statement: The rest area |
| marer o zoz. z z z zo oo to ama mapping | | had adequate lighting, which allowed for |
| | | the visual supervision of children. |
| | | 0.10 1.00.00 0.00 0.00 0.00 0.00 0.00 0 |
| Rule: 5101:2-12-20 Cots and Napping | Compliant | Documenting Statement: Cots were |
| | ' | placed appropriately and safely during |
| | | nap time. |
| | | ' |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-23 Infant Daily Care | Compliant | Documenting Statement: Appropriate |
| | | daily written records for all infants were |
| | | viewed. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Equipment | Compliant | bocumenting statement(s), it applicable |
| 3101.2 12 12 3are Equipment | Compliant | |
| | • | <u> </u> |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-15 Medical/Physical | Compliant | Documenting Statement: The program |
| Care Plans | | had current information on the medical |
| | | status and the required treatment plan |
| | | for the children with health conditions. |
| | | |
| Dula | Chahua | December City Control of the Control |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-20 Cribs | Compliant | Documenting Statement: All cribs were |
| | | placed 2 feet apart. |
| | | |

| beginning: | | 1- 1 |
|--|-----------|---|
| Rule: 5101:2-12-20 Cribs | Compliant | Documenting Statement: All cribs were |
| | | labeled with the assigned infant's name. |
| | | |
| | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Separation of Children | Compliant | |
| Under 2 1/2 Years | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Orientation and Staff | Compliant | |
| Records | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-10 Health Training | Compliant | Documenting Statement: The program |
| Requirements | | had at least one Child Care Staff Member |
| · | | with currently valid training in First Aid, |
| | | Management of Communicable Disease, |
| | | CPR, and Child Abuse Prevention present |
| | | and readily accessible during all hours of |
| | | operation. |
| | | operation. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-10 Professional | Compliant | Documenting Statement(s), if applicable |
| | Compliant | |
| Development Requirements | | |
| Distr | Chatana | December 1 Chatana and 1 If a malicable |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-14 Transportation - | Compliant | Documenting Statement: The vehicle |
| Vehicle Requirements | | used by the program to transport children |
| | | is inspected and licensed by the Ohio |
| | | State Highway Patrol. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Incident/Injury Reporting | Compliant | Documenting Statement: The JFS 01299 |
| | | "Incident/Injury Report For Child Care" |
| | | forms reviewed during this inspection |
| | | were complete as required. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Medical, Dental, | Compliant | Documenting Statement: On the day of |
| and General Emergency Plan | | the inspection, the complete prescribed |
| , | | JFS 01242 "Medical, Dental, and General |
| | | Emergency Plan For Child Care" were |
| | | posted in the program as required. |
| | | F 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 |
| | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 Group Size | Compliant | |
| 1 2101.2 12 10 010up 3126 | Compilant | 1 |

| Rule | Status | Documenting Statement(s), If applicable |
|-------------------------------------|------------------|---|
| Rule: 5101:2-12-23 Diapering and | Compliant | Documenting Statement: Appropriate |
| | Compliant | • |
| Toilet Training | | diaper changing procedures were |
| | | observed during the inspection in the |
| | | infant room. |
| | . | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-25 Medication | Compliant | Documenting Statement: The program |
| Administration and Food Supplements | | had complete written documentation for |
| | | administering medication or food |
| | | supplements. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-09 Background Check | Compliant | Documenting Statement: During the |
| Requirements | - Compilation | inspection, the required documentation |
| Requirements | | regarding background checks was on file |
| | | for all employees listed. |
| | | Tot all employees listed. |
| P. J. | Chahara | Decomposition Chatagography of a continuing |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-03 Inspection | Compliant | |
| Requirements | | |
| | Status | Documenting Statement(s), If applicable |
| Rule | | |
| Rule 5101:2-12-07 Administrator | Compliant | |
| 5101:2-12-07 Administrator | Compliant | |
| | Compliant | |
| 5101:2-12-07 Administrator | Status Compliant | Documenting Statement(s), If applicable |