

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	Program Number	Program Type			
Little Lambs Childcare Center	2210024948	Child Care Center			
Address		County			
164 North Washington Street Millersburg OH 44654		HOLMES			

Inspection Information						
Inspection Type			Inspection Scope		Inspection Notice	
Complaint		Partial		Unannounced		
Reviewer(s) MICH	ELE FAKAN	Inspection	n Day	Begii	n Time	End Time
		11/16/20	23	8:50	AM	10:00 AM
Summary of Findings						
No. Rules Verified	No. Rules with Non-cor	mpliances	No. Serious Risk	(No. Moderate Risk	No. Low Risk
5	3		0		0	3

Staff-Child Ratios at the Time of Inspection					
Group	Age Group/Range	Ratio Observed	Comment		
Infant/toddler	Mixed Age Group	1 to 4			
preschool	Mixed Age Group	1 to 13			



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: 5101:2-12-19 Supervision

Code: The program staff is required to protect or remove a child from a situation and/or person that are determined to be unsafe or inappropriate.

Allegation: Children were not being properly supervised as staff were not physically present in the space and near enough to respond and reach the child(ren) immediately.

Determination: Substantiated

Findings: During the inspection, it was determined the administrator, child care staff, and/or employees of the program did not protect or remove children from a situation and/or person determined to be unsafe or inappropriate as noted in number 4 below:

- 1. Verbal argument involving adults.
- 2. Staff member(s) allowed child(ren) to do something unsafe.
- 3. Staff member(s) did something unsafe.
- 4. Children were exposed to inappropriate behavior by a child.
- 5. Other [].

While the program did not protect the child(ren) from an unsafe or inappropriate situation and/or person, it was determined the situation would not or did not result in a serious incident or injury to a child. All program employees must take actions to protect children in care. 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: Low

Corrective Action Plan Due: 12/21/2023

Domain:05 Health & Safety

Rule: 5101:2-12-16 Incident/Injury Reporting

Code: The program is required to complete the JFS 01299 "Incident/Injury Report" for injuries and incidents at the program, provide a copy to the person who picks the child up on the day of the incident, and retain a copy of the form onsite at the program for one year.

Allegation: Incident report was not completed as required.

<u>Determination</u>: Substantiated

Findings: In review of the records, it was determined the program did not meet the requirements for completing a JFS 01299 "Incident/Injury Report" as noted in number 5 below:

- 1. The JFS 01299 was not completed when a child became ill or received an injury which required first aid treatment.
- 2. The JFS 01299 was not completed when a child was transported to a source for emergency assistance.
- 3. The JFS 01299 was not completed when a child received a bump or blow to the head.

- 4. The JFS 01299 was not completed when an unusual or unexpected incident which jeopardized the safety of a child or employee of a program.
- 5. The parent or a person picking up the child did not receive the JFS 01299 on the day of the incident.
- 6. The program information (program name, number, address) was incomplete on the JFS 01299.
- 7. Child's name was incomplete on the JFS 01299.
- 8. Child's birthdate was incomplete on the JFS 01299.
- 9. Name of person(s) responsible for the child at the time of the incident was incomplete on the JFS 01299.
- 10. Number of children present in the group at the time of the incident was incomplete on the JFS 01299.
- 11. Date and/or time of the incident was incomplete on the JFS 01299.
- 12. Whether or not parents were contacted was incomplete on the JFS 01299.
- 13. Complete summary of the incident was incomplete on the JFS 01299.
- 14. Accurate summary of the incident was incomplete on the JFS 01299.
- 15. Name and/or signature of the person completing the form was incomplete on the JFS 01299.
- 16. The JFS 01299 was not kept on file at the program for at least one year.
- 17. 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 not required at this time.

Risk Level: Low

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:10 Written Policies & Procedures

Rule: 5101:2-12-07 Written Program Policies and Procedures

Code: The program administrator is required to maintain and implement the parent handbook.

Findings: During the inspection, it was determined the administrator was not responsible for creating or maintaining or did not implement the policies and procedures detailed in Appendix B of this rule. 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: 12/21/2023