

Family Child Care 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
Foot Steps Child Care II	2230027881		FCC - Type A Home
Address			County
1172 Summit Street North West			TRUMBULL
Warren			
OH 44485			
Building and Fire Approvals apply to Type A Family Child Care Homes only			
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
02/08/2023	5499	ş	
Fire Inspection Approval Date			
09/19/2022			

Inspection Information				
Inspection Type	Inspection So	cope	Inspection Notice	
Compliance	Full	7394	Unannounced	
Inspection Date	Begin Time		End Time	
05/28/2025	8:20 PM		11:00 PM	
Reviewer:	•			
Jamie Kolacz				
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
66	12	0	1	11

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)		0	0	0
Young Toddler		0	0	0
Total Under 2 Years	6	0	0	0
Older Toddler		0	0	0
Preschool		1	0	1
School Age		2	0	2
Total Capacity/Enrollment	12	3	0	3

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Foot Steps Child Care II	Mixed Age Group	1 to 0	





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: 04 Indoor/Outdoor Space

Rule: 5180:2-13-11 Outdoor Space

Code: The program is required to have an outdoor play space free from immediate risk.

Findings: During the inspection, it was determined that an area was used which was not protected from traffic and other hazards by a continuous fence in good condition, or natural barrier, that ensured children were not able to leave the playground area. The fence or natural barrier was determined to present an immediate risk for a child to be able to leave the playground as noted in number 6 below:

- 1. The fence, natural barrier, or combination of fence and natural barrier was not continuous.
- 2. The fencing had missing slat boards through which children could leave the playground.
- 3. The gate was broken and did not close.
- 4. The latch on the gate was broken.
- 5. The gate had no latch.
- 6. The fencing was broken.
- 7. The latch was easily opened by children on the playground.
- 8. The latch was not engaged to prevent children from opening the gate.
- 9. The portable fencing approved for use by the Department was not being used.
- 10. Other [].

Discontinue use of the playground and provide a space for outdoor play which is well defined by a continuous fence or natural barrier and protected from other hazards. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.



Corrective Action Plan Due: 06/27/2025

Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5180:2-13-03 Inspection Requirements

Code: The program is required to respond to all non-compliances by the date noted in the inspection report.

Findings: During the inspection, it was determined the program had not responded to the non-compliances addressed in the inspection report dated 7/22/24. The rule requires the program complete and submit a corrective action plan in OCLQS to address non-compliances detailed in written inspection reports within the timeframe outlined in the report. Submit the program's corrective action plan, which includes a statement that current and future corrective action plans will be submitted timely, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/27/2025

Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-13-13 Clean environment and equipment

Code: The program is required to have all required items in the restroom(s) and keep them sanitary.

Findings: During the inspection, it was determined that unsanitary conditions, as noted in the following number(s) 3 below, were in the daycare restroom:

- 1. There was no liquid soap.
- 2. There was no toilet tissue.
- 3. There were no individually assigned towels or disposable towels.
- 4. The toilet cleaning brush was accessible to the children.
- 5. The plunger was accessible to the children.
- 6. The toilet was not flushed.
- 7. The trash was not emptied from the day before.
- 8. There was a strong urine odor.
- 9. Other [].

The restroom(s) must be kept sanitary at all times. Submit the program's corrective action plan to verify compliance with the requirement of the rule.



Corrective Action Plan Due: 06/27/2025

Domain: 03 Postings & Equipment

Rule: 5180:2-13-17 Programming

Code: The program is required to have a daily schedule posted in a visible place.

Findings: During the inspection, it was determined the daily schedule was not posted in the program. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 06/27/2025

Domain: 05 Health & Safety

Rule: 5180:2-13-22 Fluid Milk

Code: The program is to ensure that children are served age-appropriate fluid milk.

Findings: During the inspection, it was determined that the program did not have the type of milk on-site to ensure that all children were served age-appropriate fluid milk requirements. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/27/2025

Domain: 05 Health & Safety

Rule: 5180:2-13-22 Meals and Snacks

Code: The program is required to post the current menu in a noticeable location that is accessible to parents and note any substitutions at the time of the change.

Findings: During the inspection, it was determined that the program's weekly menu did not meet the requirement as noted in number(s) 1 below.

- 1. The menu was not posted.
- 2. The posted menu was not in a visible place readily accessible to parents.
- 3. The menu was not currently dated.
- 4. The entire menu was substituted.
- 5. At least one item on menu did not match what was served.
- 6. The meal or snack served did not match the posted menu.



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

Corrective Action Plan Due: 06/27/2025

Domain: 08 Staff Files

Rule: 5180:2-13-10 Health Training

Code: The program is required to meet the health training requirements.

Findings: In review of records, it was determined the provider did not have current valid documentation for training(s) listed in number(s) 2 and 5 below:

- 1. First Aid expired training
- 2. First Aid did not have verification of the completion of First Aid training
- 3. First Aid documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
- 4. CPR expired training
- 5. CPR had not taken CPR training
- 6. CPR did not have verification of the completion of CPR training
- 7. CPR training taken did not include all age groups and developmental levels of all children in care
- 8. CPR documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
- 9. CPR- audiovisual or electronic media training taken did not include an in-person component of the training
- 10. Communicable Disease expired training
- 11. Communicable Disease had not taken CD training
- 12. Communicable Disease did not have verification of the completion of CD training
- 13. Communicable Disease documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
- 14. Child Abuse expired training
- 15. Child Abuse had not taken Child Abuse training
- 16. Child Abuse documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule

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: 06/27/2025

Domain: 08 Staff Files

Rule: 5180:2-13-08 Child Care Staff Requirements

Code: The program staff is required to have educational verification on file at the program.



Findings: In review of the staff records, it was determined that verification of a high school education for the child care staff member(s) listed on the Employee Record Chart, did not meet the requirements as listed in number(s) 1 below:

- 1. Verification of completion of a high school education was not on file.
- 2. Documentation was not on file to verify that that a high school graduate was at least 16 years of age.
- 3. Documentation of a high school education was not on file for a person, counted in the staff/child ratio, and therefore was used as a Child Care Staff Member.

Submit the program's corrective action plan, which includes a copy of the education verification, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/27/2025

Domain: 08 Staff Files

Rule: 5180:2-13-08 Employee Requirements

Code: The program is required to obtain completed medical statements for all program staff.

Findings: In review of the staff records, it was determined that the medical statements for those individuals listed on the Employee Record Chart did not include the required information listed below in number(s) 1.

- 1. A medical statement was not on file;
- 2. The medical statement(s) on file were not dated within 12 months of the individual'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 individual 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);

Submit the program's corrective action plan, which includes a copy of the completed medical statement, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/27/2025

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) 1 and 3 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.

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

Corrective Action Plan Due: 06/27/2025

Domain: 08 Staff Files

Rule: 5180:2-13-09 Background Checks

Code: The program is required to have the applicable JFS 01176 "Program Notification of Background Check

Review for Child Care" on file.

Findings: In review of the staff records, it was determined that background check requirements had not been followed, for the individual(s) listed on the Employee Record Chart, as noted in number(s) 1 below:

- 1. The JFS 01176 "Program Notification of Background Check Review for Child Care" the program received from the Department was not on file and the individual was not left alone with children.
- 2. The JFS 01177 "Individual Notification of Background Check Review for Child Care" was on file instead of the JFS 01176.
- 3. The JFS 01176 on file was for a different program.

Submit the program's corrective action plan, which includes a statement that the correct form is now on file, to verify compliance with the requirements of this rule.



Corrective Action Plan Due: 06/27/2025

Domain: 09 Children's Files

Rule: 5180:2-13-15 Child Medical and Enrollment Records

Code: The program is required to have a completed JFS 01234 "Child Enrollment and Health Information for Child Care" on file on the premises for each child.

Findings: In review 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 number(s) 4, 11 and 15 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 child information
- 4. Complete parent information
- 5. Complete emergency contact information
- 6. Complete physician information
- 7. Information regarding the parent list
- 8. Health information
- 9. Additional information for all boxes checked "yes"
- 10. Emergency transportation information
- 11. Parent/guardian's signature
- 12. Diapering Statement
- 13. Acknowledgement of Policies and Procedures
- 14. Enrollment form for at least one child was not updated by either the parent or the administrator
- 15. Enrollment form for at least one child was not signed by the administrator
- 16. Other []

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

Corrective Action Plan Due: 06/27/2025

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Voluntary Temporary	Compliant	
Closure		



Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 License Visible	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Change of Location	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Information in OCLQS	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Provider Medical	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Type A Ownership	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Building Inspections for	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
Rule		Documenting Statement(s), If applicable
Rule 5180:2-13-04 Fire Inspections for Type	Status Compliant	Documenting Statement(s), If applicable
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Rule 5180:2-13-04 Fire Inspections for Type		Documenting Statement(s), If applicable
Rule 5180:2-13-04 Fire Inspections for Type		
Rule 5180:2-13-04 Fire Inspections for Type A Homes Rule	Compliant	Documenting Statement(s), If applicable Documenting Statement(s), If applicable
Rule 5180:2-13-04 Fire Inspections for Type A Homes	Compliant	
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Rule 5180:2-13-04 Fire Inspections for Type A Homes Rule	Compliant	
Rule 5180:2-13-04 Fire Inspections for Type A Homes Rule	Compliant	Documenting Statement(s), If applicable
Rule 5180:2-13-04 Fire Inspections for Type A Homes Rule 5180:2-13-07 Provider Responsibilities	Status Compliant Status Status	
Rule 5180:2-13-04 Fire Inspections for Type A Homes Rule 5180:2-13-07 Provider Responsibilities Rule 5180:2-13 Written Policies and	Status Compliant	Documenting Statement(s), If applicable
Rule 5180:2-13-04 Fire Inspections for Type A Homes Rule 5180:2-13-07 Provider Responsibilities	Status Compliant Status Status	Documenting Statement(s), If applicable
Rule 5180:2-13-04 Fire Inspections for Type A Homes Rule 5180:2-13-07 Provider Responsibilities Rule 5180:2-13 Written Policies and	Status Compliant Status Status	Documenting Statement(s), If applicable
Rule 5180:2-13-04 Fire Inspections for Type A Homes Rule 5180:2-13-07 Provider Responsibilities Rule 5180:2-13 Written Policies and Procedures	Status Compliant Status Compliant Status Compliant	Documenting Statement(s), If applicable Documenting Statement(s), If applicable
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Rule 5180:2-13-04 Fire Inspections for Type A Homes Rule 5180:2-13-07 Provider Responsibilities Rule 5180:2-13 Written Policies and Procedures Rule	Status Compliant Status Compliant Status Compliant	Documenting Statement(s), If applicable Documenting Statement(s), If applicable



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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-10 Professional	Compliant	
Development		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Outdoor Equipment	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Fall Zone	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Safe Equipment	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Safe Environment	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Pets	Compliant	
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5180:2-13-13 Handwashing	Compliant	bocamenting statement(s), it applicable
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Toothbrushing	Compliant	, , , , , , , , , , , , , , , , , , ,
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5180:2-13-14 Driver Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Requirements for Field	Compliant	
and Routine Trips		
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Rule	Status	Documenting Statement(s), If applicable



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5180:2-13-14 Ratio and Supervision	Compliant	
for Field and Routine Trips		
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5180:2-13-13 Smoke Free	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Vehicle Inspections	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Vehicle Requirements	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-15 Health Conditions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-15 Child Records Retention		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
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and Confidentiality		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Medical, Dental, and	Compliant	
General Emergency Plan		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Emergency Drills	Compliant	
Rule	Status	Documenting Statement(s), If applicable
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5180:2-13-16 First Aid Kit/Standard	Compliant	
Precautions		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Communicable Diseases	Compliant	
22312 13 13 Committee Discuses	- Compilation	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Incident/Injury	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Emergency	Compliant	
Preparedness and Response Plan		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-17 Materials and	Compliant	
Equipment		
Equipment		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-18 Group Size and Ratios	Compliant	Documenting Statement(S), it approaches
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5180:2-13-18 Attendance	2020000	Documenting Statement(s), If applicable
5180:2-13-18 Attendance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 Supervision	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 School Age Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 Child Guidance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-20 Sleep and Nap	Compliant	<i>(-1)</i>
Requirements	- Compilation	
Requirements		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-20 Crib and Playpen	Compliant	Booding Statement(5), it applicable
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-21 Evening and Overnight	Compliant	
Care		



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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-21 Sanitary Environment	Compliant	
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5180:2-13-23 Infant Daily Care	Compliant	
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Rule	Status	Decumenting Statement(s) If applicable
		Documenting Statement(s), If applicable
5180:2-13-22 Food Handling	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Infant Bottle and Food	Compliant	
Preparation		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Diapering	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-25 Medication	Compliant	
Requirements	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
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5180:2-13-11 Indoor Space	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 On-site Pools	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 Swimming Sites	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 Parent Permission for	Compliant	
Swimming	- Compilation	
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Rule	Status	Documenting Statement(s), If applicable
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5101:2-13-08 Review Policies and Procedures	Compliant	