

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 ICMS Sycamore Stars	Program Number 2230028773	Program Type Child Care Center
Address Indian Creek Middle School 2379 Wilson Avenue Mingo Junction OH 43938		County JEFFERSON

Inspection Information			
Inspection Type Complaint		Inspection Scope Partial	Inspection Notice Unannounced
Reviewer(s) SARAH HEIL-HINTON	Inspection Day 06/09/2025	Begin Time 2:55 PM	End Time 4:30 PM
Summary of Findings			
No. Rules Verified 8	No. Rules with Non-compliances 8	No. Serious Risk 0	No. Moderate Risk 2
		No. Low Risk 8	

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
School Age	School-Age to < 11 years	7 to 24	Transitioning to next activity
School Age (Girls)	School-Age to < 11 years	1 to 9	Small Group Activity
School Age (Boys)	School-Age to < 11 years	1 to 15	Small Group Activity

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:08 Staff Files

Rule: 5180:2-12-10 Health Training Requirements

Code: The program is required to have all child care staff members complete training in child abuse and neglect recognition and prevention within sixty days of hire. Staff must complete training in first aid and CPR within the first ninety days of hire.

Allegation: Staff do not have CPR certification.

Determination: Substantiated

Findings: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in number(s) 3 below:

1. Child abuse and neglect recognition and prevention training was not completed within sixty days of hire.
2. First aid training was not completed within ninety days of hire.
3. Cardiopulmonary resuscitation (CPR) training was not completed within ninety days of hire.
4. The child abuse and neglect recognition and prevention training was expired.
5. The first aid training was expired.
6. The CPR training was expired.

Refer to the Employee Record Chart for the name(s) of the child care staff member(s) who must complete the required health and safety training(s). Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Risk Level: Low

Corrective Action Plan Due: 07/16/2025

Domain:08 Staff Files

Rule: 5180:2-12-09 Background Check Requirements

Code: The program is required to have all staff request background checks as required and receive a JFS 01176 or preliminary approval from ODJFS prior to allowing an individual to engage in assigned duties or be near children.

Allegation: Staff do not have background checks.

Determination: Substantiated

Findings: In review of the staff records, it was determined that background checks did not meet the requirements of the rule for the person(s) listed on the Employee Record Chart as noted in number(s) 1,2,3 below:

1. The request for a background check for child care was not submitted in the OPR.
2. The fingerprints were not submitted electronically according to the process established by BCI.
3. The individual(s) had engaged in assigned duties or were near children and preliminary approval from ODJFS was not on file.
4. Background checks were not updated every five years.

Submit the program's corrective action plan, which includes a copy of the JFS 01176, or a copy of the preliminary approval or a statement that the individual(s) are no longer engaged in assigned duties and are not near children until the preliminary approval has been received, to the Department to verify compliance with the requirements of this rule.

Risk Level: Moderate

Corrective Action Plan Due: 07/16/2025

Domain:08 Staff Files

Rule: 5180:2-12-09 Background Check Requirements

Code: The program is required to have documentation from ODJFS, indicating the individual is eligible to be employed in child care, on file before allowing the staff to have sole responsibility of children.

Allegation: Staff do not have background checks.

Determination: Substantiated

Findings: During the inspection, it was determined that child care staff member(s) had sole responsibility of children in the school age group(s) and neither a preliminary approval nor the JFS 01176 "Program Notification of Background Check Review for Child Care" were on file as required. Submit the program's corrective action plan, which includes a copy of the JFS 01176 or a statement that the child care staff member(s) no longer have sole responsibility of children, to the Department to verify compliance with the requirements of this rule.

Risk Level: Moderate

Corrective Action Plan Due: 07/16/2025

Domain:08 Staff Files

Rule: 5180:2-12-08 Orientation Training & Whistle Blower Protection

Code: The program is required to have staff complete the online staff orientation training. Additionally, the training must be completed before they are permitted to have sole responsibility of children.

Allegation: Staff do not have required training.

Determination: Substantiated

Findings: In review of the staff records, it was determined that child care staff member(s) did not meet the requirements for completing the online orientation training as noted in number(s) 4 below:

1. The training was not completed within 30 days of starting employment at the program as a child care staff member.
2. Documentation of completing the training after December 31, 2016 was not on file.
3. Completion of the training was not verified in the OPR.
4. A child care staff member had sole responsibility of children and had not completed the online orientation.

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

Risk Level: Low

Corrective Action Plan Due: 07/16/2025

Domain:08 Staff Files**Rule: 5180:2-12-07 Administrator Responsibilities/Requirements****Code: The program administrator is required to maintain current employee records in the Ohio Professional Registry.**

Allegation: Staff are not listed on the programs OCCRRA account.

Determination: Substantiated

Findings: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 1,2,3,7 below:

1. At least one administrator, employee or child care staff member (including substitutes) had not created a profile- seven staff present had not created profiles in OCCRRA.
2. At least one administrator, employee or child care staff member had not created an employment record for the program on or before their first day of employment.
3. At least one administrator, employee or child care staff member had not updated changes to positions or roles within five calendar days of the change.
4. The administrator had not assigned at least one employee or child care staff member to the program's organization dashboard.
5. At least one individual's schedule was not current.
6. At least one individual's position or role did not include an applicable group assignment.
7. At least one individual's employment had not been end dated- 5 staff had to be removed form the ERC.
8. Other: []

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

Risk Level: Low

Corrective Action Plan Due: 07/16/2025

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:00 License & Approvals**

Rule: 5180:2-12-02 Current Information

Code: The rule requires the program to keep their information current in OCLQS.

Findings: During the inspection, it was determined the information in number(s) 4 below was not up to date in the Ohio Child Licensing and Quality System (OCLQS):

1. Mailing address
2. Telephone number
3. Email address
4. Days and hours of operation
5. Services offered
6. Name of program
7. Private pay rates

Technical assistance was provided, and as discussed, log on to OCLQS and update the information, as required.

Domain:01 Ratio & Supervision

Rule: 5180:2-12-18 Attendance Records

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) 4,6,7 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: 07/16/2025

Domain:08 Staff Files

Rule: 5180:2-12-07 Administrator Responsibilities/Requirements

Code: The program is required to retain documentation for each employee who has left the program in the past three years.

Findings: During the inspection, it was determined that employment records were not maintained on file at the program for the current employees. 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.

Domain:08 Staff Files

Rule: 5180:2-12-10 Health Training Requirements

Code: The program is required to have all child care staff members complete training in child abuse and neglect recognition and prevention within sixty days of hire. Staff must complete training in first aid and CPR within the first ninety days of hire.

Findings: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in number(s) 1,2 below:

1. Child abuse and neglect recognition and prevention training was not completed within sixty days - alone with children.
2. First aid training was not completed within ninety days of hire - alone with children.
3. Cardiopulmonary resuscitation (CPR) training was not completed within ninety days of hire.
4. The child abuse and neglect recognition and prevention training was expired.
5. The first aid training was expired.
6. The CPR training was expired.

Refer to the Employee Record Chart for the name(s) of the child care staff member(s) who must complete the required health and safety training(s). Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/16/2025

Domain:08 Staff Files

Rule: 5180:2-12-10 Health Training Requirements

Code: The program is required to maintain a staff schedule with coverage of the required health trainings.

Findings: In review of the staff records, it was determined the program did not have at least one child care staff member present/scheduled to be present during all hours of operation with currently valid documentation for the training(s) listed in number(s) 10 below:

1. First Aid – child care staff members scheduled during the hours of [] and [] had expired training
2. First Aid – child care staff members scheduled during the hours of [] and [] did not have verification of completion of First Aid
3. First Aid – trained child care staff member was not present in each building used by the program.
4. CPR – child care staff members scheduled during the hours of [] and [] had expired training
5. CPR – child care staff scheduled during the hours of [] and [] had did not have verification of completion of CPR
6. CPR – trained child care staff member was not present in each building used by children
7. CPR – training taken by staff was not appropriate for all ages and developmental levels of the children in care
8. CPR - audiovisual or electronic media training taken by staff did not include an in-person component of the training
9. Communicable Disease – child care staff members scheduled during the hours of [] and [] had expired training
10. Communicable Disease – child care staff scheduled during the hours of 8:00 am - 5:00 pm had not taken Communicable Disease training
11. Communicable Disease – trained child care staff member was not present in each building used by the program
12. Child Abuse – child care staff members scheduled during the hours of [] and [] had expired training
13. Child Abuse – child care staff scheduled during the hours of [] and [] had not taken Child Abuse training
14. Child Abuse – trained child care staff was not in each building used by the program

Refer to the Employee Record Chart for specific details. Submit the program's corrective action plan, which includes verification of complete coverage for any training listed, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/16/2025