Complaint Inspection Summary Report

All licensed early care and education programs are inspected at least once each year. Non-compliances are documented and grouped by risk level. Documenting statements, technical assistance provided and supplemental information may be included in this report. Licensing inspection reports from the previous three years can be viewed on the Department of Children & Youth website at https://childcaresearch.ohio.gov/ . This includes complaint investigation reports with substantiated allegations. For any other early care and education records, please contact the Family and Customer Support Center at 1-844-234-5437.

Program Details		
Program Name Destined Angels	Program Number 2240029617	Program Type FCC - Type B Home
Address 2999 megan cir youngstown OH 44505		County MAHONING

Inspection Information			
Inspection Type Complaint	Inspection Scope Partial	Inspection Method On-site Inspection	Inspection Notice Unannounced
Inspection Date	Begin Time	End Time	Reviewer:

Summary of Findings			
No. Requirements Verified 12	No. Requirements with Non-compliances 7		No. Requirements Compliant
No. Serious Risk 0	No. Moderate Risk Findings 1	No. Other Non-compliance Findings 6	No. Technical Assistance Provided

Staff-Child Ratios at the Time of Inspection

Group	Age Group/Range	Ratio Observed	Compliance	Comment
Destined Angels	Mixed Age Group	1 to 6		Ratio observed at arrival 9:10 AM

Complaint Allegations

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, 5180:2-13-03, 5180:2-19-10 and 5180:2-20-02 detail the process for submitting a request for review. The request for review must be submitted within ten business days from the receipt of the licensing report. In addition, if the program is Step Up To Quality rated, the rating may be impacted if a serious or moderate risk non-compliance is cited.

No Allegations were substantiated during this inspection.

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, 5180:2-13-03, 5180:2-19-10 and 5180:2-20-02 detail the process for submitting a request for review. The request for review must be submitted within ten business days from the receipt of the licensing report. In addition, if the program is Step Up To Quality rated, the rating may be impacted if a serious or moderate risk non-compliance is cited.

Serious Risk Non-Compliances

A serious risk non-compliance is a licensing rule violation that has the potential to lead to a great risk of harm to a child and is observable and/or based on facts.

No serious risk non-compliances were observed during this inspection

Moderate Risk Non-Compliances

A moderate risk non-compliance is a licensing rule violation that has the potential to lead to a great risk of harm to a child and is observable and/or based on facts.

Domain: **08 Staff Files**

Rule: 5180:2-13-09 Background Checks

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

Finding: 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.

The following was observed: The individual had engaged in duties and was near children with no preliminary approval from DCY. The background check was not submitted electronically in the OPR and fingerprints were not submitted. The individual was playing, dancing, holding and initiating activities with the children during operating hours.

Submit the program's corrective action plan, which includes a copy of the DCY 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.

Corrective Action Plan Due: 08/23/2026

Other Non-Compliances

This section includes other rule violations that are observable and/or based on facts.

Domain: **02 Safe & Sanitary Environment**

Rule: 5180:2-13-13 Handwashing

Requirement: The program is required to have all child care staff members, employees, and children wash their hands as outlined in rule.

Finding: During the inspection, it was determined the handwashing requirements were not being followed by the provider, program staff, or a child in that the provider fed an infant without handwashing. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 08/23/2026

Domain: **05 Health & Safety**

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

Requirement: The program is required to safely store food.

Finding: During this inspection, it was determined that food was not served in a safe manner.

The following was observed: The provider opened the baby food container with her mouth

Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 08/23/2026

Domain: **08 Staff Files**

Rule: 5180:2-13-07 Staff Records

Requirement: The provider is required to maintain current employee, child care staff members and resident records in the Ohio Professional Registry.

Finding: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained.

The following was observed: At least one employee or staff care member had not completed a childcare staff member record in OPR before first day of employment.

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

Corrective Action Plan Due: 08/23/2026

Domain: **08 Staff Files**

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

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

Finding: 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.

The following was observed: no education verification for childcare 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: 08/23/2026

Domain: **09 Children's Files**

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

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

Finding: In review of the children's records, it was determined that information had not been secured from the parent/guardian on the DCY 01234 "Child Enrollment and Health Information For Child Care" or equivalent as required.

The following was observed as missing: Information regarding second guardian/ parent, enrollment forms were expired,

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

Corrective Action Plan Due: 08/23/2026

Domain: **10 Written Policies & Procedures**

Rule: 5180:2-13-07 Written Policies and Procedures

Requirement: The program is required to have policies and procedures for all items listed in this rule.

Finding: On the day of the inspection, the program's written policies and procedures provided to the parents/guardians and employees was missing item(s).

The following was observed as missing: Social medial policy, Policies regarding using CCSM's for sick days, vacations and other time off.

The following were observed to be inaccurate: Maximum ratio stated 6, stated a child medical statement is required.

Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 08/23/2026