

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 Details | | |
|------------------------|----------------|-------------------|
| Program Name | Program Number | Program Type |
| Little Ones Child Care | 2240030593 | FCC - Type B Home |
| Address | · | County |
| 161 Parkwood Avenue | | LORAIN |
| | | |
| Avon Lake | | |
| OH 44012 | | |

| | Insp | ection Information | | | |
|--------------------|--------------------------------|--------------------|-------------------|--------------|--|
| Inspection Type | Inspection So | cope | Inspection Notice | | |
| Pre-license | Full | 65.94 | Announced | | |
| Inspection Date | Begin Time | | End Time | | |
| 11/04/2024 | 10:00 AM | 10:00 AM | | 12:35 PM | |
| Reviewer: | · | | | | |
| Jennifer Verda | | | | | |
| | Sui | mmary of Findings | S. | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk | |
| 68 | 9 | 0 | 2 | 8 | |

| Lic | 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 | | 0 | 0 | 0 |
| Older Toddler | | 0 | 0 | 0 |
| Preschool | | 0 | 0 | 0 |
| School Age | | 0 | 0 | 0 |
| Total Capacity/Enrollment | | 0 | 0 | 0 |

| St | taff-Child Ratios at the Time of I | nspection | |
|----------|------------------------------------|----------------|---------|
| Group | Age Group/Range | Ratio Observed | Comment |
| H. Keene | | 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 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.

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

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to refrain from using and storing potentially hazardous items, toxic substances, and outdoor machinery around children.

Findings: During the inspection, a potentially hazardous item or toxic substance was used or stored where children present had access to it as noted in number 2 below. The potentially hazardous substance or item that posed a risk to children was determined to be accessible to children in the bathroom.

- 1. Bleach.
- 2. Cleaning agent.
- 3. Fish tank chemicals.
- 4. Gasoline.
- 5. Pesticide.
- 6. Poison, including insect/rodent poison.
- 7. Flammable substance.
- 8. Windshield washer fluid.
- 9. Aerosol cans.
- 10. A lawn mower.
- 11. A weed trimmer.
- 12. Hedge trimmers.
- 13. A snow blower.
- 14. Other potentially hazardous substance, equipment or machinery: [].



Provide staff training. Submit the program's corrective action plan, which includes a statement that the potentially hazardous substance or item is no longer accessible to children and/or children will not be outside when machinery is in use and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/04/2024

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-13-11 Fall Zone

Code: The program is required to have an adequate fall surface on the outdoor playground.

Findings: During the inspection, it was determined that the playground did not have adequate fall surface under and around equipment as noted in the following number 1 below:

- 1. No fall surface
- 2. Adequate fall surface to soften the impact of a fall
- 3. Other []

Any equipment designed for climbing, swinging, bouncing, or sliding needs a fall zone of protective material resilient under and around the equipment in order to protect children in the event of a fall. Submit the program's corrective action plan, which includes written verification of the discontinued use of this equipment until corrections are made along with a description of the resilient material added, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/04/2024

Low Risk Non-Compliances

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-13 Clean environment and equipment

Code: The program is required to store trash outside of the areas approved for child care.

Findings: During the inspection, it was determined that accumulated trash or garbage was stored in an area approved for child care. Submit the program's corrective action plan to verify compliance with the requirements of this rule. Trash can must be covered,



Corrective Action Plan Due: 12/04/2024

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-13 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 3 below, were in the 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: 12/04/2024

Domain: 03 Postings & Equipment

Rule: 5101:2-13-16 Medical, Dental, and General Emergency Plan

Code: The program is required to post the fire and weather alert plan with a diagram.

Findings: During the inspection, it was determined the following information was not posted for item number 1,3 below:

- 1. Fire alert plan, including a diagram indicating evacuation routes.
- 2. Weather alert plan was missing details for [].
- 3. Weather alert plan was missing a diagram indicating evacuation routes.

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

Corrective Action Plan Due: 12/04/2024



Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-13-11 Outdoor Space

Code: The program is required to have an outdoor play space free from trash and foreign objects.

Findings: During the inspection, it was determined that the following hazardous conditions existed in the off-site outdoor play area, as noted in number 15 below:

- 1. There was broken glass.
- 2. There were tall weeds.
- 3. There was poison ivy.
- 4. There were tree branches.
- 5. There was mold visible.
- 6. The sandbox was contaminated.
- 7. There were thistles with prickers.
- 8. There were bird droppings.
- 9. The outdoor area was littered with trash.
- 10. The trash can was missing a lid.
- 11. The trash was not emptied from the day(s) before.
- 12. The trash can was overflowing with trash.
- 13. The trash can was infested with insects.
- 14. The trash can was visibly dirty.
- 15. Other- wooden slats, broken branches, extension cord. Steps must be fortified.

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

Corrective Action Plan Due: 12/04/2024

Domain: 05 Health & Safety

Rule: 5101:2-13-16 First Aid Kit/Standard Precautions

Code: The program is required to meet the requirements for first aid kits.

Findings: During the inspection, it was determined that the program did not have a first aid kit onsite as required that included all items listed in the appendix A of the rule. The kit was missing the item listed in number 11 below:

- 1. One roll of first-aid tape;
- 2. Individually wrapped sterile gauze;

squares in assorted sizes;

- 3. Sterile adhesive bandages in assorted sizes;
- 4.Tweezers;
- 5. Gauze rolled bandage;
- 6. Triangular bandage;
- 7. Rounded end scissors;



- 8. Tooth preservation system or fresh chilled liquid milk in which to transport a lost permanent tooth, including a written reference indicating location of the refrigerator/freezer where milk is stored if a tooth preservation system is not part of the first aid kit (for programs serving school age children only);
- 9. A working digital thermometer;
- 10. Disposable non-latex gloves;
- 11. A working flashlight;
- 12. An instant cold pack that has not been activated or ice, including a written reference indicating location of the refrigerator/freezer where the ice is stored if an instant cold pack is not part of the first aid kit;
- 13. Sealable leak-proof plastic bags in assorted sizes or double bagged plastic bags that can be securely tied for materials soiled with blood or bodily fluids;
- 14. Pocket mask or face shield, appropriate; for all ages of children in care, for cardiopulmonary resuscitation (CPR) administration;
- 15. Soap or waterless sanitizer (field trip or transporting away from the program only);
- 16. Bottled water (field trip or transporting away from the program only).

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

Corrective Action Plan Due: 12/04/2024

Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-23 Diapering

Code: The program staff is required to have adequate supplies for diapering available.

Findings: During the inspection, it was determined the required supplies were not available for diaper changing as noted in the following number 1 below:

- 1. There was no disposable separation material;
- 2. There was no germicidal solution for sanitizing;
- 3. There were no plastic containers or bags for the storage of soiled clothing;
- 4. There was no clean supply of diapers;
- 5. There was no extra change of clothing;
- 6. Other [].

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

Corrective Action Plan Due: 12/04/2024

Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-20 Crib and Playpen Requirements

Code: The program is required to provide mattresses in good condition and sheets that are not too large or too small for cribs and playpens.



Findings: During the inspection, it was determined that sheets, mattresses and/or mattress covers did not meet the rule requirement as noted in number 8 below:

- 1. At least one crib or playpen did not have a sheet.
- 2. At least one sheet was too large.
- 3. At least one sheet was too small.
- 4. At least one sheet was torn.
- 5. The mattress was not at least one and one-half inches thick.
- 6. The mattress was not firm.
- 7. There was space between the mattress and the sides and end panels of the crib or playpen which exceeded one and one-half inches.
- 8. The mattress cover was not waterproof.
- 9. The mattress cover was torn.
- 10. Other: [].

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

Corrective Action Plan Due: 12/04/2024

Domain: 08 Staff Files

Rule: 5101:2-13-10 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 15 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: 12/04/2024

Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(s), If applicable |
|---|-----------|---|
| 5101:2-13-02 Voluntary Temporary | Compliant | |
| Closure | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Voluntary Temporary | Compliant | |
| Closure | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Change of Location | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Information in OCLQS | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Provider Medical | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-03 Inspection | Compliant | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Building Requirements | Compliant | |
| for Type B Homes | | |
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| Rule 101:2-13-04 Fire Safety for Type B omes | Status Compliant | Documenting Statement(s), If applicable |
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| 101:2-13-04 Fire Safety for Type B omes | | Documenting Statement(s), If applicable |
| 101:2-13-04 Fire Safety for Type B omes | | Documenting Statement(s), If applicable |
| 101:2-13-04 Fire Safety for Type B omes | | bocamenting statement(3), it applicable |
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| | Status | Documenting Statement(s), If applicable |
| 101:2-13-04 Flammable and | Compliant | 8 |
| | Compliant | |
| ombustible Materials in a Type B | | |
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| tule | Status | Documenting Statement(s), If applicable |
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| 101:2-13-04 Heaters in a Type B | Compliant | |
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| tule | Status | Documenting Statement(s), If applicable |
| 101:2-13-07 Staff Records | Compliant | 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - |
| 101:2-13-07 Staff Records | Compilant | |
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| tule | Status | Documenting Statement(s), If applicable |
| 101:2-13-07 Type B Provider - Foster | Compliant | 5 () 11 |
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| tule | Status | Documenting Statement(s), If applicable |
| 101:2-13-08 Employee Requirements | Compliant | |
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| | | Documenting Statement(s), If applicable |
| 101:2-13-08 Whistle Blower | Compliant | |
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| | Chahara | D |
| | | Documenting Statement(s), If applicable |
| 101:2-13-09 Background Checks | Compliant | |
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| | Carlos Million | Documenting Statement/s) If any lively |
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| Rule 101:2-13-10 Professional | Compliant | 3 (7) |
| 101:2-13-10 Professional | | |
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| 101:2-13-10 Professional | | |
| 101:2-13-10 Professional evelopment | Compliant | |
| 101:2-13-10 Professional evelopment Rule | Compliant | Documenting Statement(s), If applicable |
| 101:2-13-10 Professional evelopment | Compliant | |
| 101:2-13-10 Professional evelopment Rule | Compliant | |
| Rule 101:2-13-08 Whistle Blower Rule 101:2-13-09 Background Checks | Status Compliant Status Compliant | Documenting Statement(s), If applica Documenting Statement(s), If applica Documenting Statement(s), If applica |



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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-12 Safe Equipment | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| | | Bocamenting Statement(5), it applicable |
| 5101:2-13-13 Handwashing | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Smoke Free | Compliant | |
| 510112 10 10 01110N0 1100 | Compilation | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-13-13 Toothbrushing | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Requirements for Field | Compliant | |
| and Routine Trips | | |
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| Rule | Chatus | Desumenting Statement/s) If applicable |
| | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Ratio and Supervision | Compliant | |
| for Field and Routine Trips | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 3.2.3.3.4. | | Bocamenting Statement(5), it applicable |
| 5101:2-13-14 Driver Requirements | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Vehicle Inspections | Compliant | |
| 3101.2-13-14 Vehicle hispections | Compilant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Vehicle Requirements | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-15 Child Medical and | Compliant | |
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| Emoliment Records | | |
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| Rule | Status | Documenting Statement(s), If applicable |



| 5101:2-13-15 Health Conditions | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-15 Child Records Retention and Confidentiality | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Emergency Drills | Compliant | bocumenting statement(s), if applicable |
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| Rule 5101:2-13-16 Communicable Diseases | Status Compliant | Documenting Statement(s), If applicable |
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| Rule 5101:2-13-16 Incident/Injury | Status Compliant | Documenting Statement(s), If applicable |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Emergency Preparedness and Response Plan | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-18 Attendance | Compliant | 3 (7) |
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| Rule 5101:2-13-19 Supervision | Status Compliant | Documenting Statement(s), If applicable |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-19 School Age Supervision | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-19 Child Guidance | Compliant | Desamenting statement(s), it applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-20 Sleep and Nap Requirements | Compliant | Documenting Statement(s), if applicable |



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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-21 Evening and Overnight | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-21 Sanitary Environment | Compliant | Bocamenting statement(s), it approasie |
| 2000-100 DO 07 | Compilant | |
| and Hygiene | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-22 Meals and Snacks | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-22 Fluid Milk | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-22 Food Handling | Compliant | Эссинония в семення (с), и времение |
| 3101.2 13 22 1 00d Hariding | Compilant | |
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| Rule | Status | Decumenting Statement(s) If applicable |
| | | Documenting Statement(s), If applicable |
| 5101:2-13-23 Infant Daily Care | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-23 Infant Bottle and Food | Compliant | |
| Preparation | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-24 Parent Permission for | Compliant | |
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| Swimming | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| Rule 5101:2-13-25 Medication | Status Compliant | Documenting Statement(s), If applicable |
| Rule | | Documenting Statement(s), If applicable |
| Rule 5101:2-13-25 Medication | | Documenting Statement(s), If applicable |
| Rule 5101:2-13-25 Medication Requirements | Compliant | |
| Rule 5101:2-13-25 Medication Requirements Rule | Compliant | Documenting Statement(s), If applicable Documenting Statement(s), If applicable |
| Rule 5101:2-13-25 Medication Requirements | Compliant | |
| Rule 5101:2-13-25 Medication Requirements Rule | Compliant | |
| Rule 5101:2-13-25 Medication Requirements Rule | Compliant | |



| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-18 Group Size and Ratios | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13 Written Policies and | Compliant | |
| Procedures | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-12 Carbon Monoxide | Compliant | (-// |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-08 Child Care Staff | | bocamenting statement(s), it applicable |
| | Compliant | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-11 Indoor Space | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-17 Programming | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-24 On-site Pools | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-12 Pets | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| | | Documenting Statement(s), it applicable |
| 5101:2-13-24 Swimming Sites | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| Rule 5101:2-13-17 Materials and | Status Compliant | Documenting Statement(s), If applicable |
| | | Documenting Statement(s), If applicable |