

## Center 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 La La's Daycare & Learning Center	Program Number 2240031084		Program Type Child Care Center
Address 178 12th Street Campbell OH 44405			County MAHONING
Building Approval Date 10/16/2024	Use Group/Code E	Occupancy Limit 15	Maximum Under 2 ½ 0
Fire Inspection Approval Date 12/11/2024	Food Service Risk Level Exempt		

Inspection Information		
Inspection Type Pre-license	Inspection Scope Full	Inspection Notice Announced
Inspection Date 02/03/2025	Begin Time 2:20 PM	End Time 5:55 PM
Reviewer: KATHLEEN BONACCI		

Summary of Findings				
No. Rules Verified 58	No. Rules with Non-compliances 12	No. Serious Risk 0	No. Moderate Risk 1	No. Low Risk 10

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
<b>Total Under 2 ½ Years</b>		0	0	0
Older Toddler		0	0	0
Preschool		0	0	0
School Age		0	0	0
<b>Total Capacity/Enrollment</b>		0	0	0

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment

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### 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

**No Serious Risk Non-Compliances were observed during this inspection**

#### Moderate Risk Non-Compliances

**Domain: 04 Indoor/Outdoor Space**

Rule: 5180:2-12-11 Outdoor Space Requirements

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

Finding: 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 1 below:

1. The fence, natural barrier, or combination of fence and natural barrier was not continuous. Fence had not been installed.
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: 03/16/2025

### Low Risk Non-Compliances

#### Domain: 01 Ratio & Supervision

Rule: 5180:2-12-18 Ratio

Code: The program is required to post the staff to child ratios, age grouping, and maximum group size appendix in a noticeable area in the program.

Finding: During the inspection it was determined that Appendix A of this rule, "Staff/Child Ratios, Age Grouping and Maximum Group Size", was not posted in a noticeable area in the program. 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: 03/16/2025

#### Domain: 03 Postings & Equipment

Rule: 5180:2-12-16 Medical, Dental, and General Emergency Plan

Code: The program is required to have the JFS 01201 "Dental First Aid" posted in a readily available area at the program.

Finding: During the inspection it was determined that the current JFS 01201 "Dental First Aid" was not posted in a location readily available to center staff and parents as required. 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.

**Domain: 03 Postings & Equipment**

Rule: 5180:2-12-17 Daily Schedule

Code: The program is required to have the daily program schedule posted in all required areas.

Finding: During the inspection, it was determined that a copy of the daily program schedule was not posted in the childcare area as required. 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.

**Domain: 05 Health & Safety**

Rule: 5180:2-12-16 First Aid/Standard Precautions

Code: The program is required to have a first aid kit onsite.

Finding: During the inspection, it was determined first aid kit at the program had missing, or expired, items that are required by appendix A of this rule to be contained in a first aid kit, as noted in numbers 5,9,10,12,14,15 below:

1. The program did not have a first aid kit [onsite, on the vehicle, on a field trip].
2. One roll of hypoallergenic first-aid tape.
3. Individually wrapped sterile gauze squares in assorted sizes.
4. Sterile adhesive bandages in assorted sizes.
5. Tweezers.
6. Gauze rolled bandage.
7. Triangular bandage.
8. Rounded end scissors.
9. 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).
10. A working digital thermometer.
11. Disposable non-latex gloves.
12. A working flashlight.
13. 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.
14. 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.
15. Pocket mask or face shield, appropriate for all ages of children in care, for cardiopulmonary resuscitation (CPR) administration.
16. Soap or waterless sanitizer (field trip or transporting away from the program only).



17. Bottled water (field trip or transporting away from the program only).

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: 03/16/2025

#### **Domain: 05 Health & Safety**

Rule: 5180:2-12-16 Management of Communicable Disease

Code: The program is required to post the JFS 08087 "Ohio Communicable Disease Chart".

Finding: During the inspection, it was determined that the JFS 08087 "Ohio Communicable Disease Chart" was not posted as required, as indicated in number 4 below:

1. The chart was not posted.
2. In a location readily available to program staff and parents.
3. The posted chart was not the current version, and the Child Care Manual Procedural Letter No. 159 was not attached.
4. The posted chart was not displayed in the size available in the ODJFS forms central to be easily read.

Technical assistance was provided at the time of 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: 03/16/2025

#### **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.

Finding: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number 1,4,5,6 below:

1. At least one administrator, employee or child care staff member (including substitutes) had not created a profile.
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.
8. Other: [ ]

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

Corrective Action Plan Due: 03/16/2025

#### **Domain: 08 Staff Files**

Rule: 5180:2-12-08 Medical Statement

Code: The program staff's medical statements are required to be completed and on file at the program.

Finding: In review of the staff records, it was determined that the medical statements for the employees listed on the Employee Record Chart did not meet the requirements as listed in number 1 below.

1. A medical statement was not on file for at least one employee;
2. The medical statement(s) on file did not have a date of examination within 12 months of the employee'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 employee 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);
6. Tuberculosis (TB) screening/test information was missing:
  - a. Documentation of the screening process to determine if the employee resided in a country identified by the world health organization as having a high burden of TB and arrived in the United States within the five years preceding the date of application for employment.
  - b. Results of a TB test for employees meeting both criteria in 6a.
  - c. Results of additional testing for employees with a positive TB test.
  - d. Written statement, signed by a representative of the TB control unit, that the employee's TB is no longer infectious or the individual is receiving a TB treatment regimen for employees with a positive TB test.

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

Corrective Action Plan Due: 03/16/2025

**Domain: 08 Staff Files**

Rule: 5180:2-12-08 Child Care Staff Member Educational Requirements

Code: 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 as listed in number 1 below:

1. Verification of completion of a high school education was not on file.
2. Documentation was incomplete or not on file for a high school junior or senior who is enrolled in a career-technical program.
3. Documentation was not on file for a high school junior or senior who is also enrolled in a college credit program in child development or early childhood education.
4. Documentation was not on file for a high school junior or senior who is enrolled in a Child Development Associate (CDA) training program.

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: 03/16/2025

**Domain: 08 Staff Files**

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

Code: The program administrator is required to have hours of availability to meet with parents and have the hours posted in a noticeable location.

Finding: During the inspection, it was determined that the administrator did not have scheduled hours of availability to meet with parents, or the hours of availability were not posted in a noticeable location. 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.



**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.

**Finding:** 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 numbers 2,5,10 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 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 [ ] and [ ] 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: 03/16/2025



Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-16 Written Disaster Plan	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding the written disaster plan training for the staff were discussed.
Rule: 5180:2-12-16 Written Disaster Plan	Compliant	Documenting Statement: The program's written disaster plan was reviewed during the inspection and met the requirements.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-04 Building Department Inspection	Compliant	Documenting Statement: The building approval listed the following stipulation/limitation: Over 2.5 years of age. Occupant load is 15.
Rule: 5180:2-12-04 Building Department Inspection	Compliant	Documenting Statement: A copy of the certificate of occupancy was available on-site for review.

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-04 Fire Inspection	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-04 Food Service Requirements	Compliant	Documenting Statement: The program has obtained a food service exemption status from the local health department.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-07 Written Program Policies and Procedures	Compliant	Documenting Statement: The written policies and procedures reviewed on the day of the inspection were verified as complete.

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Indoor Space Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-12 Safe Equipment	Compliant	Documenting Statement: Equipment was observed to be in good condition.

Rule: 5180:2-12-12 Safe Equipment	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding safe equipment were discussed.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-13 Sanitary Equipment and Environment	Compliant	Documenting Statement: During the inspection, the equipment was observed clean and in good repair.
Rule: 5180:2-12-13 Sanitary Equipment and Environment	Compliant	Documenting Statement: Per discussion trash will be stored in a suitable container and emptied daily.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-13 Smoke Free Environment	Compliant	Documenting Statement: Per discussion a no smoking will be allowed on the premises, and the notice stating that smoking is prohibited will be posted in a conspicuous place.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-13 Toothbrushing Requirements	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding toothbrushing were discussed. Observed toothbrushes and toothpaste. Discussed appropriate sanitary storage requirements.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-17 Materials and Equipment	Compliant	Documenting Statement: Sufficient equipment was observed in all categories.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-21 Evening and Overnight Care	Compliant	Documenting Statement: During the inspection, rule requirements pertaining to evening and overnight care were discussed, but not observed. The discussion included the requirements for the program's security plan, the schedule of activities, the sleeping arrangements if applicable, and the other hygiene stipulations outlined in the rule.



**Department of  
Children & Youth**

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