

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 Deta	ils	
Program Name	Program Number		Program Type
Shining Stars Preschool & Daycare LLC	2250031413		Child Care Center
Address			County
2627 Atlantic St NE Warren		TRUMBULL	
ОН			
44402			
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
03/05/2025	E	4.4	
Fire Inspection Approval Date	Food Service Risk Level		
02/28/2025	Level III		

Inspection Type Pre-license	Inspection Information Inspection Scope Full		on Type Inspection Scope Inspection Notice		
Inspection Date	spection Date Begin Time End Time				
03/26/2025 10:00 AM 1:30 PM Reviewer:		1:30 PM			
REBECCA KOTEWICZ					
Summary of Findings					
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk	
58	8	0	1	7	

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 ½ Years		0	0	0
Older Toddler		0	0	0
Preschool		0	0	0
School Age		0	0	0
Total Capacity/Enrollment		0	0	0

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



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	
Serious Risk Non-Compliances were observed during this inspection	

Moderate Risk Non-Compliances

Domain: 08 Staff Files

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

<u>Code</u>: 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.

<u>Finding</u>: 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) 2 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.

Corrective Action Plan Due: 04/26/2025



Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5180:2-12-04 Fire Inspection

Code: The program is required to abide by stipulations and limitations documented on the fire report.

<u>Finding</u>: During the inspection, it was determined the program was not abiding by stipulations or limitations set forth in the written documentation by the state fire marshal or local fire safety inspector, in that a reinspection is required for classrooms that are to house under 2.5 year olds with no direct egress. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/26/2025

Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-12-12 Safe Equipment

<u>Code</u>: The program is required to refrain from placing indoor swings, slides, climbers, and climbing apparatus directly over a hard surface. Shock absorbent protective covering, intended to be a fall surface per manufacturer's guidelines, shall be placed and used under the equipment.

<u>Finding</u>: During the inspection, it was determined that indoor swings, slides, climbers, and climbing apparatus did not have required shock absorbent protective covering under and around the equipment as noted in number(s) 2 below:

- 1. A shock absorbent protective covering was not used.
- 2. The mats were not at least one and one-half inches thick for equipment over three feet high. no mat.
- 3. The mats were not used according to the manufacturer's guidelines.
- 4. Other [].

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

Corrective Action Plan Due: 04/26/2025



Domain: 03 Postings & Equipment

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

<u>Code</u>: The program is required to post and implement the JFS 01242 "Medical, Dental, and General Emergency Plan" when necessary.

<u>Finding</u>: During the inspection, it was determined the requirements for the JFS 01242 "Medical, Dental, and General Emergency Plan for Child Care" were not followed as noted in number(s) 1 below:

- 1. The plans page 2 was not visible in each classroom.
- 2. The plan was not posted in other spaces used by children.
- 3. The name, address and telephone number of the program were not complete.
- 4. The location of first aid kit, fire extinguishers and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.
- 5. The telephone number for emergency squad, fire department, hospital, poison control program, public children services agency, local health department, local emergency management agency, and police department were not complete.
- 6. Location of children's records was not complete.
- 7. Emergency information including any medications or supplies needed in the event of an evacuation was not complete.
- 8. The current version of the prescribed form was not used.
- 9. The plan was not implemented when necessary in that [].

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

Corrective Action Plan Due: 04/26/2025

Domain: 04 Indoor/Outdoor Space

Rule: 5180:2-12-11 Outdoor Play Equipment

<u>Code</u>: The program is required to provide equipment that does not pose a safety risk and must follow the manufacturer's guidelines for assembling, installing and using the equipment.

<u>Finding</u>: During the inspection, it was determined that outdoor play equipment was unsafe or not used as intended as noted in number(s) 1 below:

- 1. There was rust exposed. swings
- 2. There were protruding bolts.
- 3. There were cracks.



- 4. There were holes.
- 5. There was splintering wood.
- 6. There were sharp edges or points.
- 7. There were lead hazards.
- 8. There were toxic substances.
- 9. There were tripping hazards.
- 10. There was chipped and/or peeling paint.
- 11. The sandbox was not covered when the program was closed or during non-daylight hours.
- 12. Outdoor equipment, [] was not developmentally appropriate.
- 13. Outdoor equipment, [], was placed in the main traffic pattern.
- 14. Outdoor play equipment, [], was positioned too closely together, posing a risk of injury if a child were to fall from one piece of equipment into another.
- 15. Outdoor equipment, [], was not securely anchored but did not present a risk of imminent danger of the structure collapsing when children are using the equipment
- 16. Outdoor equipment, [], was 30 inches or more from the ground and did not have a protective barrier that would prevent a child from falling off this piece of equipment.
- 17. The manufacturer's guidelines for assembly and installation were not followed for the [].
- 18. Functionally linked equipment was used by preschool-age children and the distance between two adjacent pieces of equipment exceeded 12 inches.
- 19. Functionally linked equipment was used by school-age children and the distance between two adjacent pieces of equipment exceeded 18 inches.

20. Other [].

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

Corrective Action Plan Due: 04/26/2025

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".

<u>Finding</u>: During the inspection, it was determined that the JFS 08087 "Ohio Communicable Disease Chart" was not posted as required, as indicated in number(s) 1 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 not required at this time.



Corrective Action Plan Due: 04/26/2025

Domain: 05 Health & Safety

Rule: 5180:2-12-22 Meal and Snack Requirements

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

<u>Finding</u>: 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.

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.

Corrective Action Plan Due: 04/26/2025

Domain: 08 Staff Files

Rule: 5180:2-12-08 Medical Statement

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

<u>Finding</u>: 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(s) 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: 04/26/2025

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Written Disaster Plan	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-02 License Posted	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-04 Building	Compliant	Documenting Statement: A copy of the
Department Inspection		certificate of occupancy was available on-
		site for review.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-03 Inspection	Compliant	
Requirements		



~~·		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-02 Current Information	Compliant	
	· ·	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-04 Food Service	Compliant	Documenting Statement: The food service
Requirements		license was observed posted. Following is
Marie a sain. Place reconstruction and a second sec		the audit number and date of expiration:
		9961869, March 1, 2026.
	I	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-07 Administrator	Compliant	5
Qualifications	Compilant	
Qualifications		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-05 Denial, Revocation and	Compliant	bootinenting statement(3), it applicable
	Compliant	
Suspension		
Rule	Status	Documenting Statement(s) If anylinghis
111/11/00/100		Documenting Statement(s), If applicable
5180:2-12-07 Administrator	Compliant	
Responsibilities/Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-07 Written Program	Compliant	
Policies and Procedures		
	1	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-08 Child Care Staff Member	Compliant	
Educational Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-08 Orientation Training &	Compliant	
Whistle Blower Protection		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-10 Health Training	Compliant	
Requirements		
	<u>. </u>	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-10 Professional	Compliant	
Development Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Indoor Space	Compliant	booking statement(3), it applicable
Requirements	Compliant	
Requirements		
Pula	Ctatus	Decumenting State 1 f 1
Rule	Status	Documenting Statement(s), If applicable



5180:2-12-11 Separation of Children Under 2 1/2 Years	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Outdoor Space	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Outdoor Play Fall Zones	Compliant	
	'	
	S	5 () 15
Rule 5180:2-12-12 Safe Environment	Status Compliant	Documenting Statement(s), If applicable
3160.2-12-12 Sale Eliviroliment	Compilant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-13 Sanitary Equipment and	Compliant	
Environment		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-13 Handwashing	Compliant	<u> </u>
Requirements	· ·	
Rule 5180:2-12-13 Smoke Free	Status	Documenting Statement(s), If applicable
Environment	Compliant	
Livioninent		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-15 Child Medical and	Compliant	
Enrollment Records		
Rule	Status	Decumenting Statement(s) If applicable
5180:2-12-15 Medical/Physical Care	Compliant	Documenting Statement(s), If applicable
Plans	Compilant	
	<u>.</u>	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-17 Daily Schedule	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 First Aid/Standard	Compliant	
Precautions	*	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Incident/Injury Reporting	Compliant	
- Hebot till B		
Rule	Status	Documenting Statement(s), If applicable



5180:2-12-17 Materials and	Compliant	
Equipment		
-	- National Control of	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-17 Daily Outdoor Play	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 License Capacity	Compliant	
Dula	Chahua	Decumenting Statement/s) If applicable
Rule 5180:2-12-19 Child Guidance	Status Compliant	Documenting Statement(s), If applicable
5100.2-12-15 child daldance	Compilant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-20 Cots and Napping	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-20 Cribs	Compliant	
	To all the second second	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Fluid Milk Requirements	Compliant	
	1	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Safe Food	Compliant	
Handling/Storage		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-23 Infant Daily Care	Compliant	
	<u>.</u>	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-23 Infant Bottle and Food	Compliant	
Preparation		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-23 Diapering and Toilet	Compliant	
Training		
		D
Rule	Status	Documenting Statement(s) it applicable
Rule 5180:2-12-25 Medication	Status Compliant	Documenting Statement(s), If applicable
	Compliant	Documenting Statement(s), if applicable