Department of Children & Youth

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 Little Schoolhouse Preschool	Program Number 000000204412	Program Type Child Care Center
Address 4934 WESTERN ROW RD MASON OH 45040		County WARREN

Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
08/25/2008	E		0
Fire Inspection Approval Date 08/15/2025	Food Service Risk Level Exempt		

Inspection Information		
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 10/16/2025	Begin Time 9:15 AM	End Time 11:45 AM
Reviewer: Nicole Vadnais		

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

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	0
Older Toddler		0	14	14
Preschool		0	96	96
School Age		0	0	0
Total Capacity/Enrollment	102	0	110	110

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

Elephants	3 years to < 4 years	2 to 11	#1 & #2
Bears	3 years to < 4 years	2 to 11	#1 & #2
Butterflies	4 years to < 5 years	2 to 15	#1 & #2
Frogs	4 years to < 5 years	2 to 13	#1 & #2
Penguins	3 years to < 4 years	2 to 9	#1 & #2
Turtles	30 months to < 36 months	2 to 8	#1 & #2

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 and 5180:2-13-03 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

No Moderate Risk Non-Compliances were observed during this inspection

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Low Risk Non-Compliances

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 numbers 5 and 6 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: 11/15/2025

Rules In-Compliance/Not Verified

Ohio Department of Children & Youth

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-16 Written Disaster Plan	Compliant	Documenting Statement: Annual training of the written disaster plan was completed by staff.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-02 License Posted	Compliant	Documenting Statement: The license was in a location visible to parents as required.

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

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-02 Current Information	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-03 Inspection Requirements	Compliant	

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 Administrator Qualifications	Compliant	Documenting Statement: The administrator has completed the rules review course.

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-07 Administrator Responsibilities/Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-07 Written Program Policies and Procedures	Compliant	

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Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-08 Child Care Staff Member Educational Requirements	Compliant	Documenting Statement: All Child Care Staff Members had verification of educational requirements on file at the program.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-08 Orientation Training & Whistle Blower Protection	Compliant	Documenting Statement: On the day of the inspection, all child care staff members had met orientation training requirements.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-09 Background Check Requirements	Compliant	Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-10 Health Training Requirements	Compliant	Documenting Statement: The program had at least one Child Care Staff Member with currently valid training in First Aid, Management of Communicable Disease, CPR, and Child Abuse Prevention present and readily accessible during all hours of operation.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-10 Professional Development Requirements	Compliant	Documenting Statement: At the time of the inspection, all child care staff members had completed the required amount of professional development training.

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

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-11 Outdoor Space Requirements	Compliant	Documenting Statement: The quarterly playground inspections were completed and documented, as required.

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Rule	Status	Documenting Statement(s), If applicable
5180:2-12-12 Safe Equipment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Outdoor Play Equipment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Outdoor Play Fall Zones	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-12 Safe Environment	Compliant	Documenting Statement: A safe environment was observed during the inspection. Children were protected from items and conditions which threaten their health, safety and well-being.

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	Status	Documenting Statement(s), If applicable
5180:2-12-13 Handwashing Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-13 Smoke Free Environment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-14 Transportation and Field Trip Procedures	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-15 Child Medical and Enrollment Records	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-15 Medical/Physical Care Plans	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	Documenting Statement: On the day of the inspection, the complete prescribed

		JFS 01242 “Medical, Dental, and General Emergency Plan For Child Care” were posted in the program as required.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-16 Emergency Drills	Compliant	Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-16 First Aid/Standard Precautions	Compliant	Documenting Statement: During the inspection, the program had complete first aid kits available as required.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-16 Management of Communicable Disease	Compliant	Documenting Statement: The JFS 08087 "Communicable Disease Chart" was posted and was readily available to staff and parents.

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Incident/Injury Reporting	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-17 Materials and Equipment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-17 Daily Schedule	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 Attendance Records	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 Group Size	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-17 Daily Outdoor Play	Compliant	Documenting Statement: Outdoor play was observed for multiple groups.

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Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 License Capacity	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child ratios observed during the inspection surpassed those required by the rule.

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-20 Cots and Napping	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-19 Supervision	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-19 Child Guidance	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Meal and Snack Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Safe Food Handling/Storage	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-23 Diapering and Toilet Training	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-25 Medication Administration	Compliant	