Department of Education
Department of Job and Family Services

Center Complaint Inspection Summary 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 CHILDREN'S HOUSE, INC.	Program Number 000000206020	Program Type Child Care Center
Address 1277 HICKS BOULEVARD FAIRFIELD OH 45014		County BUTLER

Inspection Information			
Inspection Type Complaint		Inspection Scope Partial	Inspection Notice Unannounced
Reviewer(s) BRENDA MEYER	Inspection Day 01/10/2024	Begin Time 1:45 PM	End Time 2:15 PM

Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
3	3	0	1	3

Staff-Child Ratios at the Time of Inspection			
Group	**Age Group/Range**	**Ratio Observed**	**Comment**
Toddlers		1 to 8	
Infants		2 to 6	

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Complaint Allegations

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.

Domain:01 Ratio & Supervision

Rule: 5101:2-12-19 Child Guidance
Code: The program staff shall use developmentally appropriate techniques when managing children's behavior. Corporal punishment is prohibited, as well as any cruel, harsh, unusual or extreme techniques.

Allegation: CCSM used a prohibited discipline technique.

Determination: Substantiated

Findings: During the inspection, it was determined that a Child Care Staff Member had used the inappropriate techniques in number 1 below when managing unacceptable behavior in children:

1. Utilize cruel, harsh, unusual, or extreme techniques- pulled on child's ear
2. Utilize any form of corporal punishment;
3. Delegate children to manage or discipline other children;
4. Use physical restraints on a child;
5. Restrain a child by prone restraint or any means other than holding children for a short period of time, such as in a protective hug, so that the children may regain control;
6. Place children in a locked room or confine children in any enclosed area;
7. Confine children to equipment such as cribs or highchairs;
8. Humiliate, threaten or frighten children;
9. Subject children to profane language or verbal abuse;
10. Make derogatory or sarcastic remarks about children or their families;
11. Punish children for failure to eat or sleep or for toileting accidents;
12. Withhold any food (including snacks and treats), rest or toilet use;
13. Punish an entire group of children due to the unacceptable behavior of one or a few;
14. Isolate and restrict children from all activities for an extended period of time.

Child Care Staff Members and other employees must always use appropriate guidance and management methods with children. Provide staff training. Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Risk Level: Moderate

Corrective Action Plan Due: 02/10/2024

Domain:05 Health & Safety

Rule: 5101:2-12-16 Incident/Injury Reporting
Code: The program is required to submit notification of a serious incident in OCLQS by the next business day.

Allegation: Child was injured at program and parents did not receive incident report.

Determination: Substantiated

Findings: During the inspection, it was determined that a Serious Incident was not reported in the Ohio Child Licensing and Quality System (OCLQS), as required, by the program administrator or designee for an incident as listed in number 2 below:

1. An incident, injury or illness that required professional medical consultation or treatment.
2. An unusual or unexpected incident which jeopardizes the safety of a child, child care staff member or employee of the program.
3. An incident defined as a serious risk non-compliance in appendix A to rule 5101:2-12-03 of the Administrative Code.
4. The program did not submit the report in OCLQS by the next business day as required by rule.

Submit the program's corrective action plan, which includes a statement that the program administrator or designee has completed the Serious Incident Report in OCLQS, to the Department to verify compliance with the requirements of this rule.

Risk Level: Low

Corrective Action Plan Due: 02/10/2024

Domain:05 Health & Safety

Rule: 5101:2-12-16 Incident/Injury Reporting
Code: The program is required to complete the JFS 01299 "Incident/Injury Report" for injuries and incidents at the program, provide a copy to the person who picks the child up on the day of the incident, and retain a copy of the form onsite at the program for one year.

Allegation: Child was injured at program and parents did not receive incident report.

Determination: Substantiated

Findings: In review of the records, it was determined the program did not meet the requirements for completing a JFS 01299 "Incident/Injury Report" as noted in number 4 below:

1. The JFS 01299 was not completed when a child became ill or received an injury which required first aid treatment.
2.The JFS 01299 was not completed when a child was transported to a source for emergency assistance.
3. The JFS 01299 was not completed when a child received a bump or blow to the head.
4. The JFS 01299 was not completed when an unusual or unexpected incident which jeopardized the safety of a child or employee of a program.
5. The parent or a person picking up the child did not receive the JFS 01299 on the day of the incident.
6. The program information (program name, number, address) was incomplete on the JFS 01299.
7. Child's name was incomplete on the JFS 01299.
8. Child's birthdate was incomplete on the JFS 01299.
9. Name of person(s) responsible for the child at the time of the incident was incomplete on the JFS 01299.
10. Number of children present in the group at the time of the incident was incomplete on the JFS 01299.
11. Date and/or time of the incident was incomplete on the JFS 01299.
12. Whether or not parents were contacted was incomplete on the JFS 01299.
13. Complete summary of the incident was incomplete on the JFS 01299.
14. Accurate summary of the incident was incomplete on the JFS 01299.
15. Name and/or signature of the person completing the form was incomplete on the JFS 01299.
16. The JFS 01299 was not kept on file at the program for at least one year.
17. Other [ ].

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.

Risk Level: Low

Corrective Action Plan Due: 02/10/2024

Summary of Additional Non-Compliances

Serious Risk Non-Compliances

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

Moderate Risk Non-Compliances

No Additional Moderate Risk Non-Compliances were observed during this inspection

Low Risk Non-Compliances

Domain:01 Ratio & Supervision

Rule: 5101:2-12-20 Cots and Napping
Code: The program is required to provide sufficient lighting when the children rest, nap, or sleep.

Findings: During the inspection, it was determined that the area used when children rest, nap or sleep was not lighted sufficiently to allow child care staff visual supervision of the children at all times. 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: 02/10/2024