Ohio 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 Tiny Town Childcare and Learning Center	Program Number 2180018387		Program Type Child Care Center
Address 206 Cleveland Street Elyria OH 44035			County LORAIN
Building Approval Date 07/30/2018	Use Group/Code E	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date 12/07/2023	Food Service Risk Level Level III		

Inspection Information		
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 09/26/2024	Begin Time 8:45 AM	End Time 10:45 AM
Reviewer: Brittani Aloi		

Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
58	11	0	2	9

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)		10	0	10
Young Toddler		5	0	5
Total Under 2 ½ Years	25	15	0	15
Older Toddler		5	0	5
Preschool		18	0	18
School Age		0	28	28
Total Capacity/Enrollment	53	23	28	66

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

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Infants	0 to < 12 months	2 to 11	combined with Toddlers
Infants	0 to < 12 months	2 to 7	
Toddlers	18 months to < 30 months	1 to 7	
Preschool	3 years to < 4 years	2 to 7	
Pre-K/SA	3 years to < 4 years	2 to 10	combined with Preschool
Pre-K/SA	4 years to < 5 years	1 to 7	

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: 5101:2-12-11 Outdoor Play Fall Zones
Code: The program is required to provide adequate fall surface for the outdoor play space.

Finding: During the inspection, it was determined that the playground did not have adequate fall surface under and around equipment as noted in number(s) 3 below:

1. No fall surface
2. Adequate fall surface to soften the impact of a fall
3. Adequate fall surface to soften the impact of a fall that extended the length of the required fall zone
4. Other [ ]

With any equipment designed for climbing, swinging, bouncing, or sliding, resilient material, as specified in Appendix A, needs to be added 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: 10/26/2024

Domain: 09 Children's Files

Rule: 5101:2-12-25 Medication Administration
Code: The program is required to store medication out of the reach of children.

Finding: During the inspection, it was determined that a medication, cough drops, was within the reach of children in the Pre-K room. All medications must be stored out of the reach of children. Create procedures that assure medications will always be inaccessible to 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.

Corrective Action Plan Due: 10/26/2024

Low Risk Non-Compliances

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records
Code: The program is required to maintain a record of the arrival and departure of each child. The program is also required to retain the original attendance record at the center for a period of one year.

Finding: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number(s) 2 below:

1. No attendance record was being maintained.
2. The attendance record was not being consistently completed.
3. The record did not include the name of at least one child.
4. The record did not include the birth date of at least one child.
5. The record did not include the assigned group.
6. The record did not include the child's weekly schedule.

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7. The record did not include the time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.
8. The original attendance record was not kept at the program for a period of one year.

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

Corrective Action Plan Due: 10/26/2024

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment
Code: The program is required to store chemicals and cleaning and sanitizing supplies in a place that is inaccessible to children. Cleaning agents, aerosol cans and chemical substances must be stored in their original container or clearly labeled. School-age children may use cleaning supplies and equipment with adult supervision.

Finding: During the inspection, a potentially hazardous substance, which was determined to not present a serious risk to a child, was not used or stored properly as noted in number(s) 2, 4 below:

1. Cosmetics were accessible to children in the [ ] area.
2. Disinfecting wipes were accessible to children in the Toddler area.
3. Fish food was accessible to children in the [ ] area.
4. Hand lotion was accessible to children in the Pre-K area.
5. Hand sanitizer (for children under 24 months) was accessible to children in the [ ] area.
6. Laundry detergent was accessible to children in the [ ] area.
7. Powder dish washing soap was accessible to children in the [ ] area.
8. Paint cans were accessible to children in the [ ] area.
9. White out was accessible to children in the [ ] area.
10. Potting Soil was accessible to children in the [ ] area.
11. Other potentially hazardous substance [ ] was accessible to children in the [ ] area.
12. Cleaning/sanitizing supplies had not been clearly labeled.
13. School-age children were using cleaning supplies, agents and/or equipment without adult supervision.
14. A spray aerosol was used in the [ ] group while children were in attendance.
15. Other: [ ].

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

Corrective Action Plan Due: 10/26/2024

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Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Equipment
Code: The program is required to use equipment, that is safe and hazard free, according to the manufacturer's guidelines. Fans, air conditioners, heat pumps, and space heaters must be inaccessible to children. The program is required to refrain from using trampolines, ball pits and inflatable equipment intended for climbing and bouncing, including but not limited to slides and bounce houses.

Finding: During the inspection, equipment was determined to be unsafe, hazardous to children, or in need of repair as noted in number(s) 3 below:

1. Manufacturer's guidelines for the [ ] were not followed in that [ ].
2. The straps were missing on the [ ].
3. The straps were attached, but were not used on the infant changing pad.
4. The straps were attached and were used, but were not used in a safe manner.
5. The equipment had sharp points or corners.
6. The equipment had splinters.
7. The equipment had protruding nails.
8. The equipment had loose or rusty parts.
9. The equipment had paint which contains lead or other poisonous materials.
10. The equipment had hazardous features.
11. A fan was unstable and could easily tip over.
12. A fan had openings a finger could enter.
13. The pipes from the heat pump felt hot to the touch
14. A space heater felt hot to the touch
15. The position of a space heater was a tripping hazard
16. The air conditioning unit was not enclosed and was accessible to children on the playground.
17. A ball pit, trampoline, inflatable bounce house, inflatable slide, or inflatable equipment used for climbing and bouncing was used.
18. Other [ ].

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

Corrective Action Plan Due: 10/26/2024

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Sanitary Equipment and Environment
Code: The program is required to provide equipment and materials that are easy to clean.

Finding: During the inspection, it was determined that at least one piece of equipment, furnishings, or material at the program was not constructed of materials to facilitate cleaning as noted in number(s) 1 below:

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1. The material had a tear.
2. The material was not washable.
3. The material was porous.
4. The surface was cracked.
5. The surface was repaired, but in a manner that still did not facilitate cleaning.
6. Other [ ].

Equipment, furnishings, and furniture shall be constructed of materials to facilitate cleaning. 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.

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Handwashing Requirements
Code: The program is required to have all staff and children wash their hands as outlined in rule.

Finding: During the inspection, it was determined that handwashing requirements were not followed as listed in number(s) 4 below, as required in rule.

1. At least one staff/child did not wash their hands upon arrival for the day.
2. At least one staff/child did not wash their hands prior to departure.
3. At least one staff did not wash their hands upon entry into a classroom.
4. At least one staff/child did not wash their hands after toileting or assisting a child with toileting.
5. At least one staff/child did not wash their hands after each diaper change or pull-up change.
6. At least one staff did not wash their hands after contact with bodily fluids or cleaning up spills or objects contaminated with bodily fluids.
7. At least one child did not wash their hands after contact with bodily fluids.
8. At least one child did not wash their hands after returning inside after outdoor play.
9. At least one staff did not wash their hands after cleaning or sanitizing or using any chemical products.
10. At least one staff/child did not wash their hands after handling pets, pet cages or other pet objects that have come in contact with the pet.
11. At least one staff did not wash their hands before eating, serving or preparing food or bottles or feeding a child.
12. At least one child did not wash their hands before eating or assisting with food preparation.
13. At least one staff did not wash their hands before and after completing a medical procedure or administering medication.
14. At least one child did not wash their hands after water activities.
15. At least one staff/child did not wash their hands when visibly soiled (must use soap and water).
16. Other [ ].

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

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Corrective Action Plan Due: 10/26/2024

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Play Equipment
Code: 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.

Finding: During the inspection, it was determined that outdoor play equipment was unsafe or not used as intended as noted in number(s) 10 below:

1. There was rust exposed.
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: 10/26/2024

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Domain: 06 Program Information

Rule: 5101:2-12-14 Transportation and Field Trip Procedures
Code: The program is required to take all required safety and health items on trips.

Finding: During the inspection, it was determined that all required items were not taken on a field trip and/or routine trip as determined in that the item number(s) 2 below was missing:

1. Completed copies of the JFS 01234 "Child Enrollment and Health Information For Child Care" (except routine walks);
2. First aid supplies;
3. A working cellular phone or other means of immediate communication (not to be used while a vehicle is in motion);
4. Written record of children on the trip, including which vehicle each child is being transported in and the cellular phone number of the adult in that vehicle who could be contacted in an emergency.

Provide staff training. Submit the program's corrective action plan, which includes a written plan that ensures these safety guidelines will be met when children are transported, and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/26/2024

Domain: 08 Staff Files

Rule: 5101:2-12-10 Professional Development Requirements
Code: The program is required to ensure child care staff members, including substitutes used more than ninety days annually, obtain at least 6 hours of professional development each state fiscal year.

Finding: In review of the staff records, it was determined that at least one child care staff member did not meet the annual professional development requirement as noted in number(s) 1 below:

1. The child care staff member(s) had not completed at least six hours of professional development.
2. Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.
3. Training topic did not meet the requirements listed in appendix A of this rule.
4. Documentation of training did not meet the requirements of this rule.
5. The substitute(s) had been used more than ninety days annually between July first and June thirtieth and had not completed at least six hours of professional development
6. Other [ ].

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

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Corrective Action Plan Due: 10/26/2024

Domain: 08 Staff Files

Rule: 5101:2-12-08 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(s) 5(b)(c), 6(a) 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: 11/07/2024

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Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 Current Information	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-03 Inspection Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Building Department Inspection	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Fire Inspection	Compliant	Documenting Statement: Please Note: Documentation of a fire inspection without any uncorrected violations must be secured for the program. Secure a new fire inspection by 12/7/24.
Rule: 5101:2-12-04 Fire Inspection	Compliant	Documenting Statement: Although the program had documentation of a current fire inspection without any uncorrected violations at the time of the licensing inspection, the program did not have the fire inspection completed within 12 months from the date of the last fire inspection without any uncorrected violations. Please ensure that fire inspections are completed in accordance with the rule requirements.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Food Service Requirements	Compliant	Documenting Statement: The food service license was observed posted. Following is the audit number and date of expiration: CGRC-BATRDU, 3/1/25.

Rule	Status	Documenting Statement(s), If applicable

5101:2-12-07 Administrator Qualifications	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator Responsibilities/Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-07 Written Program Policies and Procedures	Compliant	Documenting Statement: No changes have been made to the written policies and procedures since it was last approved by this Department.

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Orientation Training & Whistle Blower Protection	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-09 Background Check Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-10 Health Training Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Separation of Children Under 2 1/2 Years	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Space Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free Environment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-14 Transportation - Driver Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-14 Transportation - Vehicle Requirements	Compliant	Documenting Statement: An annual safety check of the vehicle(s), using the

		JFS 01230 "Vehicle Inspection Report For Child Care Centers" form, were verified and dated 9/24/24 (van), 4/22/24 (bus).

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Child Medical and Enrollment Records	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Medical/Physical Care Plans	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 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
5101:2-12-16 First Aid/Standard Precautions	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of Communicable Disease	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury Reporting	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Schedule	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Materials and Equipment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	

Rule	Status	Documenting Statement(s), If applicable

5101:2-12-18 License Capacity	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child ratios observed during the inspection were in compliance.

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Group Size	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Supervision	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cots and Napping	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cribs	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Meal and Snack Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Fluid Milk Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food Handling/Storage	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-23 Infant Daily Care	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-23 Infant Bottle and Food Preparation	Compliant	

Rule	Status	Documenting Statement(s), If applicable

5101:2-12-23 Diapering and Toilet Training	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Child Care Staff Member Educational Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Written Disaster Plan	Compliant	Documenting Statement: Annual training of the written disaster plan was completed by staff.
Rule: 5101:2-12-16 Written Disaster Plan	Compliant	Documenting Statement: No changes have been made to the written policies and procedures since it was last approved by this Department.