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 Standards of Excellence Pre-K Academy, LLC	Program Number 2220026892	Program Type Child Care Center
Address 2405 Romig Road Akron OH 44320		County SUMMIT

Inspection Information			
Inspection Type Complaint		Inspection Scope Partial	Inspection Notice Unannounced
Reviewer(s) SHAWN CRAWFORD	Inspection Day 10/08/2024	Begin Time 8:00 AM	End Time 9:10 AM

Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
5	4	0	1	3

Staff-Child Ratios at the Time of Inspection			
Group	**Age Group/Range**	**Ratio Observed**	**Comment**
Mixed group-Centrum area	30 months to < 36 months	2 to 16	Breakfast- older toddler-school age
Mixed group-Centrum area	30 months to < 36 months	2 to 20	Older toddler-school age
Mixed group-Centrum area	School-Age to < 11 years	1 to 9	School dismissal
PreK	4 years to < 5 years	2 to 14	
Preschool	30 months to < 36 months	1 to 4	

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.

No Complaints were observed during this inspection.

Summary of Additional Non-Compliances

Serious Risk Non-Compliances

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

Moderate Risk Non-Compliances

Domain:01 Ratio & Supervision

Rule: 5101:2-12-18 Ratio
Code: The program is required to maintain the appropriate staff to child ratio for each group served.

Findings: During the inspection, required staff/child ratios were not maintained for the same group on multiple occasions, as noted below:

The ratio determined for the combined group of older toddlers-school age was 2 Child Care Staff Member(s) for 18 children. Additionally, a ratio of 2 Child Care Staff Member(s) for 20 children was determined for the combined older toddler-school age group.

Additional staff members must be hired or current Child Care Staff Members must be rescheduled to maintain compliance. 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: 11/17/2024

Low Risk Non-Compliances

Domain:01 Ratio & Supervision

Rule: 5101:2-12-18 Group Size
Code: The program is required to maintain the appropriate group size for each group of children served.

Findings: During the inspection, group size limitations were not maintained for the group of older toddler- school age children as it was determined there were 20 children grouped together. The group size shall not exceed twice the maximum number of children allowed per Child Care Staff Member. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/17/2024

Domain:01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records
Code: The program is required to have a method for tracking the children in each group. The tracking method must be updated throughout the day and kept with the group at all times.

Findings: During the inspection, it was determined that the method for tracking children in each group did not meet the requirements of the rule as noted in number(s) 5 below:

1. There was no method in place;
2. The method did not include each child's name;
3. The method did not include each child's date of birth;
4. The tracking method did not remain with the group at all times;
5. The tracking method was not updated throughout the day as children entered or left the group.

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

Corrective Action Plan Due: 11/17/2024

Domain:01 Ratio & Supervision

Rule: 5101:2-12-19 Supervision

Code: The program staff is required to supervise children in their assigned group by sight and hearing. Supervision includes being near enough to respond and reach children immediately including responding to the child's basic needs and protecting them from harm.

Findings: During the inspection, it was determined that children were not being properly supervised as noted in number(s) 3 below, in that children were observed being dropped off at entrance doors and walking into school to program space with staff being unaware of their presence; staff members left children unattended in classrooms:

1. Child(ren) were not within both sight and hearing of a child care staff member during indoor play.
2. Child(ren) were not within both sight and hearing of a child care staff member during outdoor play.
3. Child(ren) were not within both sight and hearing of a child care staff member more than once.
4. Staff were not physically present in the space and near enough to respond and reach the child(ren) immediately.
5. Other: [ ].

Children must be supervised according to rule and within both sight and hearing of a child care staff member at all times. 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: 11/17/2024