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 Alta Head Start Newton Falls	Program Number 2240030872	Program Type Child Care Center
Address 336 Ridge Road Newton Falls OH 44444		County TRUMBULL

Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
08/22/2024	E	50	0
Fire Inspection Approval Date 08/26/2024	Food Service Risk Level		

Inspection Information		
Inspection Type Provisional	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 05/01/2025	Begin Time 9:30 AM	End Time 12:41 PM
Reviewer: Sara Davis		

Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
58	6	0	1	6

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	0	0
Preschool		26	0	26
School Age		0	0	0
Total Capacity/Enrollment	26	26	0	26

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

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Preschool 1	3 years to < 4 years	2 to 18	
Preschool 1	3 years to < 4 years	2 to 18	Lunch
Preschool 2	3 years to < 4 years	2 to 5	
Preschool 2	3 years to < 4 years	2 to 5	Lunch

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

Domain: 09 Children's Files

Rule: 5180:2-12-15 Medical/Physical Care Plans
Code: The program is required to have a completed JFS 01236 "Child Medical/Physical Care Plan for Child Care" on file at the program for any child having a health condition and must implement and/or follow instructions on the plan. The program is required to have staff trained to perform the procedures on the JFS 01236 "Child Medical/Physical Care Plan for Child Care" present at the program when the child requiring the procedure is onsite. Only staff who have been trained shall be permitted to perform the procedures listed on the JFS 01236.

Finding: In review of the children's records, it was determined the program did not meet the requirements for caring for at least one child, indicated on the Children Records Review, with a condition that requires a JFS 01236 "Child Medical/Physical Care Plan" as noted in number(s) 5,7,30,31 below:

1. No plan was on file.
(Page 1)
2. Child's name was missing.
3. Name of the condition was missing.
4. Indication if medication or medical food is required was missing.
5. Signs, symptoms or situations that require staff to take action were missing.

6. Activities, foods, environmental conditions to avoid were missing.
7. Training instructions for procedures for staff to follow were missing or incomplete.
(Page 2)
8. Child's name was missing or not attached.
9. Child's date of birth was missing or not attached.
10. Child's weight was missing or not attached.
11. Name of the medication/medical food was missing or not attached.
12. Dosage of medication/medical food to be administered was missing or not attached.
13. Time for medication/medical food to be administered was missing or not attached.
14. Expiration date for medication/medical food was missing or not attached.
15. Symptoms that require staff to administer medication/medical food were missing or not attached.
16. Specific instructions to administer the medication/medical food were missing or not attached.
17. Actions to be taken if the symptoms do not subside were missing or not attached.
18. Physician's signature was missing or not attached.
19. The date of the physician's signature was missing or not attached.
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20. Child's name was missing.
21. Instructions regarding emergency evacuation, if applicable, were missing.
22. Signature of parent granting permission to implement the plan and verifying training was missing.
23. Date of parent signature was missing.
24. Certified Professional Trainer information was missing.
25. Signature of certified professional who trained the program staff was missing, if parent was not the trainer.
26. Date of trainer signature was missing.
27. Printed name(s)of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
28. Signature(s) of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
29. Date of staff signature was missing.
30. Administrator/Provider signature was missing
31. Date of administrator/Provider was missing.
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32. Child's name was missing.
33. Name of medication or medical food was missing.
34. Date the medication/medical food was administered was missing.
35. Time medication/medical food was administered was missing.
36. Dosage of medication/medical food that was administered was missing.
37. Signature of person administering medication/medical food was missing.
38. The plan was not followed or implemented.
39. The plan was not able to be implemented due to conflicting information.
40. None of the child care staff members trained in the procedures on the JFS 01236 were onsite when a child requiring the plan was present.
41. Child care staff members trained in the procedures on the JFS 01236 were not scheduled to be present the entire the time the child requiring the plan was onsite.
42. None of the child care staff members trained in the procedures on the JFS 01236 accompanied the child requiring the plan during a trip.
43. A child care staff member who had not been trained in the procedures on the JFS 01236 performed the procedure.
44. Medication listed in the procedures to follow was not onsite available to administer as instructed and alternate instructions for this situation were not included on the plan.

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Provide staff training. Submit the program's corrective action plan, which includes a copy of the completed JFS 01236, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/31/2025

Low Risk Non-Compliances

Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-12-13 Sanitary Equipment and Environment
Code: The program is required to provide a clean restroom with the appropriate materials available.

Finding: During the inspection, it was determined that unsanitary conditions, as noted in number(s) 5,6 below, were in both restrooms:

1. There was no liquid soap.
2. There was no toilet paper.
3. There were no paper towels.
4. The toilet cleaning brush was accessible to the children.
5. The plunger was accessible to the children.
6. The toilet(s) were not flushed.
7. The trash was not emptied from the day before.
8. There was a strong urine odor.
9. Other [ ].

The restroom(s) must be kept sanitary 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 not required at this time.

Corrective Action Plan Due: 05/31/2025

Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-12-13 Handwashing Requirements
Code: The program is required to have all staff and children wash their hands as outlined in rule.

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Finding: During the inspection, it was determined that handwashing requirements were not followed as listed in number(s) 12 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.

Corrective Action Plan Due: 05/31/2025

Domain: 08 Staff Files

Rule: 5180:2-12-07 Administrator Responsibilities/Requirements
Code: The program administrator is required to maintain current employee records in the Ohio Professional Registry.

Finding: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 2,3,4,5,7 below:

1. At least one administrator, employee or child care staff member (including substitutes) had not created a profile.
2. At least one administrator, employee or child care staff member had not created an employment record for the program on or before their first day of employment.

3. At least one administrator, employee or child care staff member had not updated changes to positions or roles within five calendar days of the change.
4. The administrator had not assigned at least one employee or child care staff member to the program's organization dashboard.
5. At least one individual's schedule was not current.
6. At least one individual's position or role did not include an applicable group assignment.
7. At least one individual's employment had not been end dated.
8. Other: [ ]

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

Corrective Action Plan Due: 05/31/2025

Domain: 08 Staff Files

Rule: 5180:2-12-07 Administrator Responsibilities/Requirements
Code: The program is required to maintain documentation onsite at the program for each employee.

Finding: During the inspection, it was determined that required staff record documentation was not on file at the program, and was not verified in the OPR, for the employee(s) listed on the Employee Record Chart. The documentation was able to be verified as noted in number(s) 2 below:

1. The information had been verified at the previous inspection.
2. The information was provided from another location during the inspection.

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

Corrective Action Plan Due: 05/31/2025

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 number(s) 5a,5c,6 below.

1. A medical statement was not on file for at least one employee;

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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: 05/31/2025

Domain: 08 Staff Files

Rule: 5180:2-12-10 Health Training Requirements
Code: The program is required to have all child care staff members complete training in child abuse and neglect recognition and prevention within sixty days of hire. Staff must complete training in first aid and CPR within the first ninety days of hire.

Finding: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in number(s) 2,3 below:

1. Child abuse and neglect recognition and prevention training was not completed within sixty days of hire.
2. First aid training was not completed within ninety days of hire.
3. Cardiopulmonary resuscitation (CPR) training was not completed within ninety days of hire.
4. The child abuse and neglect recognition and prevention training was expired.
5. The first aid training was expired.
6. The CPR training was expired.

Refer to the Employee Record Chart for the name(s) of the child care staff member(s) who must complete the required health and safety training(s). 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: 05/31/2025

Rules In-Compliance/Not Verified

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: 5180:2-12-16 Written Disaster Plan	Compliant	Documenting Statement: The program's written disaster plan was reviewed during the inspection and met the requirements.

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-02 License Posted	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
Rule: 5180:2-12-04 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 8/25/2025.

Rule	Status	Documenting Statement(s), If applicable

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Rule: 5180:2-12-04 Food Service Requirements	Compliant	Documenting Statement: The food service license was observed posted. Following is the audit number and date of expiration: 9995382 3/1/2026.

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

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-07 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
5180:2-12-08 Child Care Staff Member Educational Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-08 Orientation Training & Whistle Blower Protection	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-09 Background Check Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-10 Professional Development Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-11 Outdoor Space Requirements	Compliant	Documenting Statement: Outdoor play was observed for the Preschool 1 and 2 group(s).
Rule: 5180:2-12-11 Outdoor Space Requirements	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding outdoor space were discussed. Playground was under construction from January - March due to new playground install. No inspection was complete during the construction.

Rule	Status	Documenting Statement(s), If applicable

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5180:2-12-11 Indoor Space Requirements	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
5180:2-12-12 Safe Equipment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-12 Safe Environment	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding safe environment were discussed. Space Heater approval from fire department was discussed and required to use current space heater.

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

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

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-14 Transportation and Field Trip Procedures	Compliant	Documenting Statement: The form(s) used by the program for routine and/or field trips were verified to meet the requirements of the rule.

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

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	

Rule	Status	Documenting Statement(s), If applicable

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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
5180:2-12-16 First Aid/Standard Precautions	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Management of Communicable Disease	Compliant	

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

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

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

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

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 were in compliance.

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

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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 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
5180:2-12-22 Fluid Milk Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-25 Medication Administration	Compliant	Documenting Statement: The program had complete written documentation for administering medication or food supplements.

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