Department of Children & Youth

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

Inspection Information			
Inspection Type Complaint		Inspection Scope Partial	Inspection Notice Unannounced
Reviewer(s) Margaret Agoston	Inspection Day 11/14/2025	Begin Time 10:00 AM	End Time 11:00 AM

Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
5	2	0	0	2

Staff-Child Ratios at the Time of Inspection			
Group	**Age Group/Range**	**Ratio Observed**	**Comment**
Preschool	3 years to < 4 years	4 to 12	

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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: 5180:2-12-18 Ratio
Code: The program is required to maintain the appropriate staff to child ratio for each group served with child care staff members who meet the requirements.

Allegation: It is reported that children are being supervised by an individual who does not meet CCSM requirements.

Determination: Substantiated

Findings: During the inspection, it was determined that children were being supervised by an individual who did not meet the requirements of a child care staff member or was not at least two years older than the child(ren). Additional child care 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.

Risk Level: Low

Corrective Action Plan Due: 12/14/2025

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

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Low Risk Non-Compliances

Domain:05 Health & Safety

Rule: 5180:2-12-16 Incident/Injury Reporting
Code: The program is required to submit notification of a serious incident in OCLQS by the next business day.

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(s) as listed in number(s) 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.

Corrective Action Plan Due: 12/14/2025