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<br>The Child Care & Learning Center of Poland | Program Number<br>2260033224 | Program Type<br>Child Care Center |
| Address<br>361 Johnston St Poland<br>OH<br>44514 | | County<br>MAHONING |

| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ |
|---|---|---|---|
| 09/10/2025 | E | 50 | 0 |
| Fire Inspection Approval Date<br>09/09/2025 | Food Service Risk Level<br>Exempt | | |

| Inspection Information | | |
|---|---|---|
| Inspection Type<br>Pre-license | Inspection Scope<br>Full | Inspection Notice<br>Announced |
| Inspection Date<br>05/11/2026 | Begin Time<br>2:10 PM | End Time<br>4:15 PM |
| Reviewer:<br>KATHLEEN BONACCI | | |

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

| 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 |
| Older Toddler | | 0 | 0 | 0 |
| Preschool | | 0 | 0 | 0 |
| School Age | | 0 | 0 | 0 |
| **Total Capacity/Enrollment** | | 0 | 0 | 0 |

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

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## 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

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

### Low Risk Non-Compliances

**Domain: 08 Staff Files**

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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 1,5 b & c 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: 06/10/2026

## 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. |

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| 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: 5180:2-12-16 Written Disaster Plan | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding the written disaster plan were discussed. |

| Rule | Status | Documenting Statement(s), If applicable |
|---|---|---|
| Rule: 5180:2-12-04 Building Department Inspection | Compliant | Documenting Statement: The building approval listed the following stipulation(s)/limitation(s): Total capacity 50 over 2.5 years of age. Room 201 , occupant load 25 , Room 202 ,occupant load 25, gym, per classroom. |
| Rule: 5180:2-12-04 Building Department Inspection | Compliant | Documenting Statement: A copy of the certificate of occupancy was available on-site for review. |

| Rule | Status | Documenting Statement(s), If applicable |
|---|---|---|
| 5180:2-12-02 Current Information | 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 9-9-2026. |
| Rule: 5180:2-12-04 Fire Inspection | Compliant | Documenting Statement: During the inspection, documentation of a fire inspection without any uncorrected violations for the following additional space was reviewed: 9-9-2025. |

| Rule | Status | Documenting Statement(s), If applicable |
|---|---|---|
| Rule: 5180:2-12-04 Food Service Requirements | Compliant | Documenting Statement: The program has obtained a food service exemption status from the local health department. |

| Rule | Status | Documenting Statement(s), If applicable |
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| Rule: 5180:2-12-07 Administrator Qualifications | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding administrator qualifications were discussed. |
| Rule: 5180:2-12-07 Administrator Qualifications | Compliant | Documenting Statement: The administrator has completed the rules review course. |

| Rule | Status | Documenting Statement(s), If applicable |
|---|---|---|
| Rule: 5180:2-12-07 Administrator Responsibilities/Requirements | Compliant | Documenting Statement: The administrator's hours of availability to meet with parents were posted in a noticeable location. |
| Rule: 5180:2-12-07 Administrator Responsibilities/Requirements | Compliant | Documenting Statement: The current licensing rules were available in a noticeable location on the premises. |
| Rule: 5180:2-12-07 Administrator Responsibilities/Requirements | Compliant | Documenting Statement: The administrator's posted hours of availability reflected an appropriate schedule meeting rule compliance. |
| Rule: 5180:2-12-07 Administrator Responsibilities/Requirements | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding administrator responsibilities and requirements were discussed. |

| Rule | Status | Documenting Statement(s), If applicable |
|---|---|---|
| Rule: 5180:2-12-07 Written Program Policies and Procedures | Compliant | Documenting Statement: The written policies and procedures reviewed on the day of the inspection were verified as complete. |

| Rule | Status | Documenting Statement(s), If applicable |
|---|---|---|
| Rule: 5180:2-12-08 Child Care Staff Member Educational Requirements | Compliant | Documenting Statement: All Child Care Staff Members had verification of educational requirements on file at the program. |

| Rule | Status | Documenting Statement(s), If applicable |
|---|---|---|
| Rule: 5180:2-12-08 Orientation Training & Whistle Blower Protection | Compliant | Documenting Statement: On the day of the inspection, all child care staff |

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| | | members had met orientation training requirements. |

| Rule | Status | Documenting Statement(s), If applicable |
|---|---|---|
| Rule: 5180:2-12-09 Background Check Requirements | Compliant | Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed. |

| Rule | Status | Documenting Statement(s), If applicable |
|---|---|---|
| Rule: 5180:2-12-10 Health Training Requirements | Compliant | Documenting Statement: The program had at least one Child Care Staff Member with currently valid training in First Aid, Management of Communicable Disease, CPR, and Child Abuse Prevention present and readily accessible during all hours of operation. |
| Rule: 5180:2-12-10 Health Training Requirements | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding health training were discussed. |

| Rule | Status | Documenting Statement(s), If applicable |
|---|---|---|
| Rule: 5180:2-12-10 Professional Development Requirements | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding professional development training for administrators and child care staff members were discussed. |

| Rule | Status | Documenting Statement(s), If applicable |
|---|---|---|
| Rule: 5180:2-12-11 Indoor Space Requirements | Compliant | Documenting Statement: The following additional space was measured during the inspection: gym. |
| Rule: 5180:2-12-11 Indoor Space Requirements | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding indoor space were discussed. |

| Rule | Status | Documenting Statement(s), If applicable |
|---|---|---|
| Rule: 5180:2-12-11 Outdoor Space Requirements | Compliant | Documenting Statement: Indoor play space used for gross motor activities was the gym per classroom). |

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| Rule: 5180:2-12-11 Outdoor Space Requirements | Compliant | Documenting Statement: The quarterly playground inspections were completed and documented, as required. The most recent inspection report form was dated 4-12-2026. |
| Rule: 5180:2-12-11 Outdoor Space Requirements | Compliant | Documenting Statement: Shade is provided by means of tress , building, table with umbrella . |
| Rule: 5180:2-12-11 Outdoor Space Requirements | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding outdoor space were discussed. |
| Rule: 5180:2-12-11 Outdoor Space Requirements | Compliant | Documenting Statement: The outdoor play area is separated from traffic and other hazards by a courtyard. |

| Rule | Status | Documenting Statement(s), If applicable |
|---|---|---|
| Rule: 5180:2-12-12 Safe Environment | Compliant | Documenting Statement: Cleaning supplies were viewed stored out of the reach of children. |
| Rule: 5180:2-12-12 Safe Environment | Compliant | Documenting Statement: All electrical outlets were covered with safety receptacles. |
| Rule: 5180:2-12-12 Safe Environment | Compliant | Documenting Statement: A safe environment was observed during the inspection. Children were protected from items and conditions which threaten their health, safety and well-being. |
| Rule: 5180:2-12-12 Safe Environment | Compliant | Documenting Statement: The indoor temperature of the program during the inspection was comfortable and met rule compliance. |

| Rule | Status | Documenting Statement(s), If applicable |
|---|---|---|
| Rule: 5180:2-12-12 Safe Equipment | Compliant | Documenting Statement: Equipment was observed to be in good condition. |
| Rule: 5180:2-12-12 Safe Equipment | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding safe equipment were discussed. |

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| Rule | Status | Documenting Statement(s), If applicable |
|---|---|---|
| Rule: 5180:2-12-13 Sanitary Equipment and Environment | Compliant | Documenting Statement: On the day of the inspection, the program provided a clean environment in accordance with Appendix A of this rule, which included the furniture, materials and equipment. |

| Rule | Status | Documenting Statement(s), If applicable |
|---|---|---|
| Rule: 5180:2-12-13 Smoke Free Environment | Compliant | Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program. |

| Rule | Status | Documenting Statement(s), If applicable |
|---|---|---|
| Rule: 5180:2-12-16 Medical, Dental, and General Emergency Plan | Compliant | Documenting Statement: On the day of the inspection, the complete prescribed JFS 01242 “Medical, Dental, and General Emergency Plan For Child Care” were posted in the program as required. |
| Rule: 5180:2-12-16 Medical, Dental, and General Emergency Plan | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general emergencies were discussed. |

| Rule | Status | Documenting Statement(s), If applicable |
|---|---|---|
| Rule: 5180:2-12-16 Emergency Drills | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding emergency drills were discussed. |

| Rule | Status | Documenting Statement(s), If applicable |
|---|---|---|
| Rule: 5180:2-12-17 Daily Schedule | Compliant | Documenting Statement: Daily schedules were observed posted. |

| Rule | Status | Documenting Statement(s), If applicable |
|---|---|---|
| Rule: 5180:2-12-16 Management of Communicable Disease | Compliant | Documenting Statement: The JFS 08087 "Communicable Disease Chart" was posted and was readily available to staff and parents. |
| Rule: 5180:2-12-16 Management of Communicable Disease | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding management of communicable diseases were discussed. Parents |

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| | | informed of exposure, requirements for solation of sick children. |

| Rule | Status | Documenting Statement(s), If applicable |
|---|---|---|
| Rule: 5180:2-12-16 First Aid/Standard Precautions | Compliant | Documenting Statement: During the inspection, the program had complete first aid kit available as required. |
| Rule: 5180:2-12-16 First Aid/Standard Precautions | Compliant | Documenting Statement: The program had a system in place for regularly checking and replacing first aid kit supplies. |

| Rule | Status | Documenting Statement(s), If applicable |
|---|---|---|
| Rule: 5180:2-12-17 Materials and Equipment | Compliant | Documenting Statement: Sufficient equipment was observed in all categories. |

| Rule | Status | Documenting Statement(s), If applicable |
|---|---|---|
| Rule: 5180:2-12-18 Ratio | Compliant | Documenting Statement: The Appendix A "Staff/Child Ratios, Age Grouping and Maximum Group Size" was posted in a noticeable area at the program as required. |

| Rule | Status | Documenting Statement(s), If applicable |
|---|---|---|
| Rule: 5180:2-12-18 License Capacity | Compliant | Documenting Statement: The program was seeking initial licensure. The program requested to serve a total capacity of 50 children; of this, 0 children may be under two and one-half years of age. |
| Rule: 5180:2-12-18 License Capacity | Compliant | Documenting Statement: Limitations on the license capacity were as noted in number 1 below:<br><br>1. Building's occupancy;<br>2. Indoor space;<br>3. Number of cots/mats;<br>4. Number of tables and chairs;<br>5. Number of staff;<br>6. Fire evacuation capacity;<br>7. Outdoor play space;<br>8. Number of cribs; |

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|---|---|---|
| | | 9. Quantity of play equipment and materials. |