

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 | Program Number | Program Type | | | |
| ONCE UPON A DAYCARE & PRESCHOOL | 00000100432 | Child Care Center | | | |
| CENTER | | | | | |
| Address | | County | | | |
| 1033 E. TURKEYFOOT LAKE RD. SUITE 100 A | SUMMIT | | | | |

| Inspection Information | | | | | | | | |
|----------------------------|-----------------------|----------------|-----------------------|------------|-------------------|--------------|--|--|
| Inspection Type | | | Inspection Scope | | Inspection Notice | | | |
| Complaint | | | | Partial | | Unannounced | | |
| Reviewer(s) SHAWN CRAWFORD | | Inspection Day | | Begin Time | | End Time | | |
| | | 09/23/2022 | | 9:30 AM | | 11:30 AM | | |
| Reviewer(s) SHAWN CRAWFORD | | Inspection Day | | Begin Time | | End Time | | |
| | | 09/28/2022 | | 1:45 PM | | 3:00 PM | | |
| Reviewer(s) SHAWN CRAWFORD | | Inspection Day | | Begin Time | | End Time | | |
| | | 09/28/2022 | | 7:30 AM | | 8:15 AM | | |
| Summary of Findings | | | | | | | | |
| No. Rules Verified | No. Rules with Non-co | ompliances | nces No. Serious Risl | | No. Moderate Risk | No. Low Risk | | |
| 12 | 12 | 2 | | | 3 | 7 | | |

| Staff-Child Ratios at the Time of Inspection | | | | | | |
|--|--------------------------|----------------|------------------|--|--|--|
| Group | Age Group/Range | Ratio Observed | Comment | | | |
| Toddler 1 | 12 months to < 18 months | 1 to 7 | Day 1- 17 month | | | |
| | | | old in group | | | |
| Toddler 1 | 12 months to < 18 months | 1 to 3 | Day 2 AM (| | | |
| | | | Toddler 1&2 | | | |
| | | | combined) | | | |
| Toddler 1 | 12 months to < 18 months | 1 to 4 | Day 2-Nap | | | |
| Toddler 2 | 18 months to < 30 months | 1 to 6 | Day 1 | | | |
| Toddler 2 | 18 months to < 30 months | 1 to 6 | Day 2 Nap | | | |
| Preschool 1 | 3 years to < 4 years | 1 to 7 | Day 1 | | | |
| Preschool 1 | 3 years to < 4 years | 1 to 5 | Day 2 PM- Nap | | | |
| Preschool 2 | 3 years to < 4 years | 1 to 6 | Day 2- Nap | | | |
| Pre K | 3 years to < 4 years | 2 to 13 | Day 1 PS 2 & PK | | | |
| | US ACMI | | combined | | | |
| Pre K | 3 years to < 4 years | 1 to 6 | Day 2 AM- PS 1, | | | |
| | | | PS & PK combined | | | |
| Pre K | 4 years to < 5 years | 1 to 7 | Day 2 PM Nap | | | |
| School age | School-Age to < 11 years | 1 to 15 | Day 2 | | | |





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: 5101:2-12-19 Child Guidance

Code: The program staff, including the owner and administrator, shall use developmentally appropriate techniques when managing children's behavior. Corporal punishment is prohibited, as well as any cruel, harsh, unusual or extreme techniques.

Allegation: Administrator uses inappropriate guidance and management techniques. The director was in the classroom with a five year old who colored her mouth with a marker. She started screaming at the child and grabbed her by the arm and drug her to the sink and washed her mouth out with soap. The director restrained a 3 year old child by putting her in a head lock between her own legs while the child was on the toilet and then she forcefully wiped the child, while the child was fighting her. She was screaming and yelling at the child.

Determination: Substantiated

Findings: During the inspection, it was determined through interviews during the investigation, that the administrator had used inappropriate techniques when managing unacceptable behavior in children, in that the prohibited technique(s) in number(s) 5,9 below were used:

- 1. Utilize cruel, harsh, unusual, or extreme techniques;
- 2. Utilize any form of corporal punishment;
- 3. Delegate children to manage or discipline other children;
- 4. Use physical restraints on a child;
- 5. Restrain children by any means other than holding children for a short period of time, such as in a protective hug, so that the children may regain control;
- 6. Place children in a locked room or confine children in any enclosed area;
- 7. Confine children to equipment such as cribs or highchairs;
- 8. Humiliate, threaten or frighten children;
- 9. Subject children to profane language or verbal abuse;
- 10. Make derogatory or sarcastic remarks about children or their families;
- 11. Punish children for failure to eat or sleep or for toileting accidents;
- 12. Withhold any food (including snacks and treats), rest or toilet use;
- 13. Punish an entire group of children due to the unacceptable behavior of one or a few;
- 14. Isolate and restrict children from all activities for an extended period of time.

Child Care Staff Members and other employees must always use appropriate guidance and management methods with children. Provide staff training. Submit the program's corrective action plan, which includes a statement that training was provided to all employees, owners, and administrators, to the Department to verify compliance with the requirements of this rule.

Risk Level: Serious

Corrective Action Plan Due: 10/08/2022

Domain:08 Staff Files

Rule: 5101:2-12-09 Background Check Requirements

Code: The program is required to have all staff request background checks as required.

Allegation: Staff do not have criminal records checks on file and have been working at the program for a several weeks.

Determination: Substantiated

Findings: In review of the staff records, it was determined that background checks were not requested for the person(s) listed on the Employee Record Chart as noted in number(s) 1,2 below. The staff member has been working at the program since the last week of August 2022.

- 1. Submitting the request for a background check for child care in the OPR.
- 2. Submitting fingerprints electronically according to the process established by BCI.

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

Risk Level: Moderate

Corrective Action Plan Due: 11/02/2022

Summary of Additional Non-Compliances

Serious Risk Non-Compliances

Domain:00 License & Approvals

Rule: 5101:2-12-03 Inspection Requirements

Code: The program administrator and owner are required to provide true and accurate information.

Findings: During the inspection, it was determined that the program provided false information, in that the administrator stated that she put an incorrect birthdate on the Toddler 1 attendance record to show that a 17 month old child was 18 months of age. The child's correct age was verified on the JFS1234 during the investigation. The administrator stated an employee, whose criminal records checks had not been requested, started working on 9/12/22; however, the employee's file documented a start date of 9/6/22. Interviews during the investigation determined the employee had been working at the program for approximately three weeks as the employees child had been attending the program since the last week of August, when she was hired. The rule requires the program to provide accurate and truthful information to the Department. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/08/2022

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, a ratio of 1 child care staff member(s) for 7 children was determined to have occurred for the Toddler 1 group which included a 17 month old infant when the situation in number(s) 7 below occurred:

- 1. A child care staff member stepped out of the room.
- 2. A child care staff member had not arrived at work on time.
- 3. Children were present who were not scheduled to be there.
- 4. A child care staff member was unable to work.
- 5. A child was injured in that group.
- 6. A child arrived in the group before a second staff member was scheduled to arrive with the group.
- 7. The program did not follow the ratio for the youngest child in the group.
- 8. A child was transitioning to the next older age group, and the program did not follow the ratio for the youngest child in the group.
- 9. Ratio was doubled for more than two hours while children were napping.
- 10. Ratio was doubled while children were napping for a group that included at least one infant.
- 11. Ratio was doubled while children were napping and there were not enough staff members in the building to meet staff/child ratio.
- 12. Ratio was doubled in the school age group to allow access to the program, however, the program does not serve only school age children.
- 13. Both child care staff members did not have a working communication device when one staff member left the group to allow access to the school age only program.
- 14. The child care staff member did not return to the group after allowing access to the school age only program.
- 15. Other [].

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.

Corrective Action Plan Due: 11/02/2022

Domain:08 Staff Files

Rule: 5101:2-12-09 Background Check Requirements

Code: The program is required to have documentation from ODJFS, indicating the individual is eligible to be employed in child care, on file before allowing the staff to have sole responsibility of children.

Findings: During the inspection, it was determined that child care staff member(s) had sole responsibility of children in the Preschool 1 group(s) and neither a preliminary approval nor the JFS 01176 "Program Notification of Background Check Review for Child Care" were on file as required. Interviews during the investigation determined that the employee has been working since the end of August 2022. Submit the program's corrective action plan, which includes a copy of the JFS 01176 or a statement that the child care staff member(s) no longer have sole responsibility of children, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/02/2022

Rule: 5101:2-12-07 Administrator Responsibilities/Requirements

Code: The program administrator is required to maintain current employee records in the Ohio Professional Registry.

Findings: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 1,3,5,6 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: 11/02/2022

Domain:08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to be completed and on file at the program.

Findings: In review of the staff records, it was determined a completed medical examination statement for the employee(s) listed on the Employee Record Chart was not on file, as required by this rule. Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/02/2022

Domain:08 Staff Files

Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements

Code: The program staff is required to have educational verification on file at the program or in the Ohio Professional Registry.

Findings: In review of the staff records, it was determined that verification of a high school education was not on file nor verified in the Ohio Professional Registry for Child Care Staff Member(s) listed on the Employee Record Chart, as required. Submit the program's corrective action plan, which includes a copy of the verification of a high school education, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/02/2022



Domain:08 Staff Files

Rule: 5101:2-12-08 Orientation Training & Whistle Blower Protection

Code: The program is required to have staff complete the online staff orientation training before they are permitted to have sole responsibility of children.

Findings: During the inspection, it was determined that Child Care Staff Member(s) listed on the Employee Record Chart had sole responsibility of children and had not completed the online orientation, as required by this rule. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/02/2022

Domain:08 Staff Files

Rule: 5101:2-12-10 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.

Findings: 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) 1,2,3,5,6 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.

Corrective Action Plan Due: 11/02/2022

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.

Findings: 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.

Corrective Action Plan Due: 11/02/2022

Domain:09 Children's Files

Rule: 5101:2-12-15 Child Medical and Enrollment Records

Code: The program is required to use the updated JFS 01234 "Child Enrollment and Health Information For Child Care" .

Findings: In review of 25% of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in number(s) 1 below, in that a child had been attending the program since 8/29/22 and no JFS 1234 was on file.

- 1. No enrollment form was completed for at least one child
- 2. The current JFS 01234 was not completed for at least one child
- 3. Complete child information
- 4. Complete parent information
- 5. Complete emergency contact information
- 6. Complete physician information
- 7. Information regarding the parent list
- 8. Health information
- 9. Additional information for all boxes checked "yes"
- 10. Emergency transportation information
- 11. Parent/guardian's signature
- 12. Diapering Statement
- 13. Acknowledgement of Policies and Procedures
- 14. Enrollment form for at least one child was not updated by either the parent or the administrator
- 15. Enrollment form for at least one child was not signed by the administrator
- 16. Other []

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.