

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 Deta	nils	
Program Name	Program Number		Program Type
WEE CARE DAY CARE AND LEARNING	000000104249		Child Care Center
CENTRE Address			County
1145 NILES CORTLAND RD NW WARREN			TRUMBULL
OH 44484			TROMBOLE
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date 03/02/2021	Food Service Risk L	evel	

Inspection Information				
Inspection Type	Inspection So	cope	Inspection Notice	
Annual	Full		Unannounced	
Inspection Date 09/14/2021	Begin Time 3	::40 PM	End Time 7:18 PM	
Reviewer: SHELLY WILLIAMS				
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
57	9	0	0	13

License Capacity and Enrollment at the Time of Inspection				
Age Group	License Capacity		Enr	ollment
	Totals	Full Time	Part Time	Total
Infant (Birth to < 18 m)		24	0	24
Young Toddler		8	0	8
Total Under 2 ½ Years	40	32	0	32
Older Toddler		6	0	6
Preschool		20	0	20
School Age		0	12	12
Total Capacity/Enrollment	109	26	12	70

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Infant 1	0 to < 12 months	2 to 8	Afternoon Ratio

Infant 1	0 to < 12 months	1 to 1	Evening Ratio
Infant 2	12 months to < 18 months	1 to 6	Afternoon Ratio
Infant 2	18 months to < 30 months	1 to 2	Evening Ratio
Toddlers	18 months to < 30 months	1 to 4	Afternoon Ratio
Tigers/Explores/Flutter Flies	3 years to < 4 years	1 to 11	Afternoon Ratio
Tigers/Explores/Flutter Flies	5 years to < Kindergarten	1 to 1	Evening Ratio

Summary of Non-Compliances

If the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited. Ohio Administrative Code 5101: 2-12-03 details the process for submitting a request for a review if a program disagrees with a licensing finding. The request for review must be submitted within seven days from the receipt of the licensing report.

Serious Risk Non-Compliances	
No Serious Risk Non-Compliances were observed during this inspection	
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Moderate Risk Non-Compliances	1
No Moderate Risk Non-Compliances were observed during this inspection	



Low Risk Non-Compliances

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Handwashing Requirements

Code: The program is required to have all staff wash their hands as outlined in rule.

<u>Finding</u>: During the inspection, it was determined that at least one staff member with theMickey's group did not wash his or her hands at the time listed in number(s) 5 below, as required in rul

- 1. Upon arrival for the day;
- 2. After breaks;
- 3. Upon returning from outside;
- 4. After toileting or assisting a child with toileting;
- 5. After each diaper change or pull-up change;
- 6. After contact with bodily fluids or cleaning up spills or objects contaminated with bodily fluids;
- 7. After cleaning or sanitizing or using any chemical products;
- 8. After handling pets, pet cages or other pet objects that have come in contact with the pet;
- 9. Before eating, serving or preparing food or bottles or feeding a child;
- 10. Before and after completing a medical procedure or administering medication;
- 11. When visibly soiled (must use soap and water);
- 12. Other [].

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

Corrective Action Plan Due: 10/14/2021

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Sanitary Equipment and Environment

Code: The program is required to follow the cleaning schedule for equipment.

<u>Finding</u>: During the inspection, it was determined that the program was not providing a clean and healthy environment, furniture, materials and equipment as required by Appendix A, as noted in number(s) 2,3 below:

- 1. The changing table under the pad was not cleaned daily.
- 2. The floors were not being cleaned.
- 3. The carpets were not vacuumed.
- 4. The food prep areas were not being cleaned and sanitized before and after food prep.
- 5. Toilet seat(s), handle(s) and toilet bowl(s) were not being cleaned when visibly soiled and sanitized.
- 6. The sinks were not clean.
- 7. Diaper receptacles were not being cleaned and sanitized.
- 8. Other [].

Furniture, materials and equipment must be maintained according to the cleaning and sanitizing schedule in Appendix A to this rule. 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.

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Sanitary Equipment and Environment

<u>Code</u>: The program is required to following the cleaning schedule for equipment.

<u>Finding</u>: During the inspection it was determined that equipment was not sanitized after being used for eating, as noted in number(s) 4 below:

- 1. Highchairs;
- 2. High chair trays;
- 3. Cribs;
- 4. Table Tops;
- 5. Cots;
- 6. Other [].

Furniture, materials and equipment must be maintained according to the cleaning and sanitizing schedule in Appendix A to this rule. 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.

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Play Fall Zones

<u>Code</u>: The program is required to provide adequate fall surface for the outdoor play space.

<u>Finding</u>: During the inspection, it was determined that while there was adequate fall surface material in the outdoor play space, proper distribution had not been maintained under and around equipment as required. Submit the program's corrective action plan, which includes a statement that fall surface material has been properly redistributed, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/14/2021

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Play Fall Zones

Code: The program is required to provide fall zones around equipment to prevent injury if a child were to fall.

<u>Finding</u>: During the inspection, it was determined that the moveable equipment/slides were positioned such that the fall zone for number 3,4 below was not met:

- 1. The fall zone did not extend six feet from the point of furthest extension;
- 2. The fall zone was less than 6 feet from fence;
- 3. The fall zone was less than 9 feet from each piece of applicable equipment;
- 4. There was not a fall zone of 6 feet in all directions from the perimeter of the equipment;
- 5. Other [].

The program is required to provide equipment that is safe with adequate fall zones. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/14/2021

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Play Fall Zones

<u>Code</u>: The program is required to provide fall zones around equipment to prevent injury if a child were to fall.

<u>Finding</u>: During the inspection, it was determined that a fall zone hazard was present, in that, the other toys and equipment placed in the fall zone posed a risk of injury if a child were to fall from a piece of equipment. The program is required to provide fall zones that are free of hazards. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/14/2021

Domain: 07 Diapering & Infant Care

Rule: 5101:2-12-23 Infant Bottle and Food Preparation

<u>Code</u>: The program staff is required to label bottles containing formula or breast milk.

<u>Finding</u>: During the inspection, it was determined that bottles containing formula for a particular infant were not labeled with the child's name and date of preparation. 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.

Domain: 08 Staff Files

Rule: 5101:2-12-10 Health Training Requirements

Code: The program is required to maintain a staff schedule with coverage of the required health trainings.

<u>Finding</u>: In review of the staff records, it was determined the program did not have at least one child care staff member present/scheduled to be present during all hours of operation with currently valid documentation for the training(s) listed in number(s) 6 below:

- 1. First Aid child care staff members scheduled during the hours of [] and [] had expired training
- 2. First Aid child care staff members scheduled during the hours of [] and [] had not taken First Aid training
- 3. First Aid trained child care staff member was not present in each building used by the program.
- 4. First Aid child care staff member scheduled during the hours of [] and [] did not have verification of completion of First Aid
- 5. CPR child care staff members scheduled during the hours of [] and [] had expired training
- 6. CPR child care staff scheduled during the hours of 9:15 am and 2:15 pm and had not taken CPR training
- 7. CPR trained child care staff member was not present in each building used by children
- 8. CPR child care staff member scheduled during the hours of [] and [] did not have verification of completion of CPR
- 9. CPR training taken by staff did not include all age groups the program serves
- 10. Communicable Disease child care staff members scheduled during the hours of [] and [] had expired training
- 11. Communicable Disease child care staff scheduled during the hours of [] and [] had not taken Communicable Disease training
- 12. Communicable Disease trained child care staff member was not present in each building used by the program
- 13. Communicable Disease child care staff member scheduled during the hours of [] and [] did not have verification of completion of the full Communicable Disease training
- 14. Child Abuse child care staff members scheduled during the hours of [] and [] had expired training
- 15. Child Abuse trained child care staff was not in each building used by the program
- 16. Child Abuse child care staff scheduled during the hours of [] and [] had not taken Child Abuse training
- 17. Child Abuse child care staff member scheduled during the hours of [] and [] did not have verification of completion of the full six-hour Child Abuse training
- 18. Child Abuse child care staff considered to be providing coverage had only the ODJFS prescribed Child Abuse training, which does not meet this rule compliance



Refer to the Employee Record Chart for specific details. Submit the program's corrective action plan, which includes verification of complete coverage for any training listed, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/14/2021

Domain: 08 Staff Files

Rule: 5101:2-12-10 Professional Development Requirements

<u>Code</u>: The program staff is required to obtain at least 6 hours of professional development annually.

<u>Finding</u>: 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 6 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. Other [].

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

Corrective Action Plan Due: 10/14/2021

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

<u>Code</u>: The program staff medicals are required to include all information.

<u>Finding</u>: In review of the staff records, it was determined that the medical statements for those employees listed on the Employee Record Chart did not include the required information listed below in number(s) 4

- 1. Date of examination;
- 2. Signature, business address, and telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination;
- 3. A statement that verifies that 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);
- 4. Tuberculosis (TB) screening/test
- 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 4a;
- 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: 10/14/2021

Domain: 09 Children's Files

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

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

<u>Finding</u>: 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) 13 below.

- 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 parent information
- 4. Complete emergency contact information
- 5. Complete physician information
- 6. Information regarding the parent list
- 7. Health information
- 8. Additional information for all boxes checked "yes"
- 9. Emergency transportation information
- 10. Parent/guardian's signature
- 11. Diapering Statement
- 12. Acknowledgement of Policies and Procedures
- 13. Enrollment form for at least one child was not updated by either the parent or the administrator
- 14. Enrollment form for at least one child was not signed by the administrator
- 15. 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.

Domain: 09 Children's Files

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

Code: The program is required to have a completed medical on file at the program for each child enrolled.

<u>Finding</u>: In review of 25% of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in number(s) 1 below:

- 1. No medical was on file for at least one child
- 2. Medical(s) on file were not updated every 13 months
- 3. Medical(s) were missing child's name and date of birth
- 4. Medical(s) were missing the date of the medical examination
- 5. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care
- 6. Medical(s) were missing the signature, business address and telephone number of the physician, physician's assistant(PA), advance practice nurse (APN) or certified nurse practitioner (CNP) who examined the child
- 7. Medical(s) were missing a record of immunizations the child has had specifying month, day and year
- 8. Medical(s) were missing a statement from the physician, PA, APN, or CNP that the child has been immunized or is in the process of being immunized against the diseases required by division 5104.014 of the Revised Code and found in appendix A to this rule
- 9. Medical(s) were missing a statement from the child's parent or guardian that he or she has declined to have the child immunized against the disease for reasons of conscience, including religious convictions

10. Other []

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

Corrective Action Plan Due: 10/14/2021

Domain: 09 Children's Files

Rule: 5101:2-12-25 Medication Administration and Food Supplements

Code: The program is required to have medication labeled with the child's name.

<u>Finding</u>: During the inspection, it was determined that medication was at the program which had not been labeled with the child's name. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/14/2021

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Meal and Snack	Compliant	bocumenting statement(s), it applicable
	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Fire Approval	Compliant	Documenting Statement: Please Note: An
		annual fire inspection approval must be
		secured for the program. Secure a new
		approval by 3/2/22.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of	Compliant	
Communicable Disease		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free	Compliant	
Environment		
	l	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	(4)
Qualifications	Compilant	
Qualifications	<u> </u>	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Child Care Staff Member	Compliant	Documenting Statement(s), it applicable
Educational Requirements	Compliant	
Educational Requirements		
0.1		5 (1)
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Written Disaster Plan	Compliant	

Beginning!		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-24 Swimming and Water	Compliant	
Safety Requirements	·	
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Food License	Compliant	Documenting Statement: The food service
Naic. 3101.2 12 011 000 Election	Compilant	license was observed posted. Following is
		the audit number and date of expiration:
		·
		#9916013 and expires 3/1/22.
Dula	Chahua	Decressing Chatamantic) If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	
Rule	Status	Documenting Statement/s) If applicable
5101:2-12-22 Fluid Milk Requirements		Documenting Statement(s), If applicable
5101:2-12-22 Fluid Wilk Requirements	Compliant	
Dula	Chahua	Decomposition (tetromonato) If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard	Compliant	
Precautions		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food	Compliant	
Handling/Storage		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Written Program	Compliant	
Policies and Procedures		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-21 Evening and Overnight	Compliant	
Care		
	I	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space	Compliant	Booking statement(5), it applicable
Requirements	Compilant	
nequilentits		
Dula	Chahua	Decumentia - Chatanantia III
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Emergency Drills	Compliant	
		D V C V V V V V V V V V V V V V V V V V
Rule	Status	Documenting Statement(s), If applicable

Equipment	
Rule Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Equipment Compliant	
Rule Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play Compliant	
Rule Status	Decumenting Statement(s) If applicable
5101:2-12-04 Building Approval Compliant	Documenting Statement(s), If applicable
S101.2 12 04 Building Approval	
Rule Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted Compliant	
Rule Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Space Compliant	2 commendation of the second o
Requirements	
Rule Status	Documenting Statement(s), If applicable
5101:2-12-19 Supervision Compliant	
Rule Status	Documenting Statement(s), If applicable
5101:2-12-02 Current Information Compliant	
Rule Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Schedule Compliant	
Rule Status	Documenting Statement(s), If applicable
5101:2-12-20 Cots and Napping Compliant	
Rule Status	Documenting Statement(s), If applicable
5101:2-12-23 Infant Daily Care Compliant	bocumenting statement(s), if applicable
Somplant	
Rule Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Equipment Compliant	
Rule Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Medical/Physical Compliant	Documenting Statement: The program
Care Plans	had current information on the medical

	-	
		status and the required treatment plan
		for the children with health conditions.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cribs	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Separation of Children	Compliant	
Under 2 1/2 Years		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Orientation and Staff	Compliant	
Records		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Environment	Compliant	
	•	,
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-14 Transportation and	Compliant	Documenting Statement: Adequate
Field Trip Procedures	r -	supervision of children was observed
		during a routine walking trip from the bus
		stop.
		stop.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury	Compliant	Bootimenting statement(s); it applicable
Reporting	Compliant	
Reporting		
Rule	Status	Documenting Statement(s), If applicable
		Documenting Statement(s), it applicable
5101:2-12-16 Medical, Dental, and	Compliant	
General Emergency Plan		
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Attendance Records	Compliant	
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Group Size	Compliant	
	l a	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child
		ratios observed during the inspection
		were in compliance.
Rule	Status	Documenting Statement(s), If applicable

5101:2-12-23 Diapering and Toilet Training	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-09 Background Check	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-03 Inspection	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	
Responsibilities/Requirements		
	•	<u>.</u>