



## 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 A PLACE FOR EVERYONE LLC	Program Number 000000107064	Program Type Child Care Center	
Address 5192 DARROW RD HUDSON OH 44236		County SUMMIT	
Summary of Program Information			
Building Approval Date 10/02/2009	Use Group/Code E	Occupancy Limit 45	Maximum Under 2 ½
Fire Inspection Approval Date 08/17/2017	Food Service Risk Level Exempt		

Inspection Information		
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 12/05/2022	Begin Time 11:00 AM	End Time 2:15 PM
Reviewer: SARAH HEIL-HINTON		

Summary of Findings				
No. Rules Verified 58	No. Rules with Non-compliances 24	No. Serious Risk 0	No. Moderate Risk 5	No. Low Risk 31

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)		3	0	3
Young Toddler		0	0	0
<b>Total Under 2 ½ Years</b>	19	3	0	3
Older Toddler		1	0	1
Preschool		12	0	12
School Age		0	0	0
<b>Total Capacity/Enrollment</b>	41	13	0	16

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



Toddlers	0 to < 12 months	2 to 15	Free Play (all children combined)
Toddlers	18 months to < 30 months	1 to 6	Lunch
Toddlers	18 months to < 30 months	1 to 5	Naptime
Infant	0 to < 12 months	1 to 1	Playtime
Infant	0 to < 12 months	1 to 1	Naptime
Preschool	3 years to < 4 years	1 to 9	Lunch
Preschool	3 years to < 4 years	1 to 9	Naptime

### 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 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.

### Serious Risk Non-Compliances

No Serious Risk Non-Compliances were observed during this inspection

### Moderate Risk Non-Compliances

#### Domain: 00 License & Approvals

Rule: 5101:2-12-04 Fire Inspection

Code: The program is required to have all spaces used for child care inspected by the fire department or the state fire marshal's office prior to serving children. The program is required to obtain a fire inspection without any uncorrected violations within 12 months from the date of the last fire inspection. If violations are noted during the inspection, the program is required to have all violations corrected and have the program re-inspected to obtain a completed fire form.

Finding: During the inspection, it was determined the program did not meet the requirements for fire inspection as noted in number(s) 2 below:



1. The program did not have documentation on file for a fire inspection without any uncorrected violations within 12 months from the date of the last fire inspection and the request for the new inspection was not made at least 30 days prior to the expiration of the previous fire inspection.
2. The documentation for the most recent fire inspection contained violations that had not been corrected.
3. The [ ] space was being used and had not been approved by the fire department or the state fire marshal's office for child care.

Submit the program's corrective action plan, which includes an updated fire inspection without any uncorrected violations, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/07/2023

**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.

Finding: During the inspection, a ratio of 2 child care staff member(s) for 15 children was determined to have occurred for the combined infant/toddler/preschool group 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. Two groups were combined, and 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: 01/07/2023

**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.

Finding: 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 below:

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, which includes a copy of the JFS 01176, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/07/2023

**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.

Finding: During the inspection, it was determined that child care staff member(s) had sole responsibility of children in the toddler 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. 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: 01/07/2023

**Domain: 09 Children's Files**

Rule: 5101:2-12-15 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. The program is required to implement and/or follow instructions on the JFS 01236 for a child with a health condition.

Finding: A written, signed and dated JFS 01236 "Child Medical/Physical Care Plan for Child Care" must be on file for any child having health conditions which require monitoring for symptoms, or a medical procedure be performed, or ongoing administration of medication or medical foods at the program. In review of the children's records, it was determined that the required written information was either not on file, implemented or followed, for at least one child indicated on the Children Records Review, as noted in number(s) 1 below:

1. No plan was on file (sesame seed allergy).
2. Child's name was missing.
3. Child's date of birth was missing.
4. Name of the condition was missing.
5. Indication if medication is required was missing.
6. Symptoms to watch for were missing.
7. Directions for when should the medication or medical food be administered were missing.
8. Instructions for administration were missing.
9. Conditions that trigger the need for medication or medical foods were missing.
10. Expected results of the medication or medical food were missing.
11. Actions to be taken if the symptoms do not subside were missing.
12. Activities, foods, environmental conditions to avoid were missing.
13. Training instructions were missing.
14. Directions for action to be taken if expected result of medication or medical food does not occur were missing.
15. Instructions regarding emergency evacuation, if applicable, were missing.
16. Dated signature of parent was missing.
17. Dated signature of certified professional who trained the program staff was missing, if parent was not the trainer.
18. Printed name(s)/Dated signature(s) of child care staff member(s) trained to perform the procedure were missing.
19. Dated signature(s) of administrator was missing.
20. Name of any applicable medication was missing.
21. Date medication was administered was missing.
22. Time medication was administered was missing.
23. Dosage administered was missing.
24. Signature of staff member who administered the medication was missing.
25. 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.
26. The plan was not implemented.
27. The plan was not able to be implemented due to conflicting information.
28. The plan was not followed.

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: 01/07/2023



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**Low Risk Non-Compliances**

**Domain: 00 License & Approvals**

Rule: 5101:2-12-03 Inspection Requirements

Code: The program is required to respond to noncompliances by the date noted in the inspection report.

Finding: During the inspection, it was determined the program had not responded to the non-compliances addressed in the inspection report dated 5/25/22. The rule requires the program to complete and submit a corrective action plan in OCLQS to address non-compliances detailed in written inspection reports within the timeframe outlined in the report. Submit the program’s corrective action plan, which includes a statement that current and future corrective action plans will be submitted timely, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/07/2023

**Domain: 01 Ratio & Supervision**

Rule: 5101:2-12-18 Group Size

Code: The program may combine all age groups when there are twelve or fewer children in the center.

Finding: During the inspection, it was determined groups which included children less than two and one half years were combined with groups of children two and one half years and older and there were more than 12 children in the center. 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: 01 Ratio & Supervision**

Rule: 5101:2-12-18 Group Size



**Code:** The program is required to maintain the appropriate group size for each group of children served.

**Finding:** During the inspection, group size limitations were not maintained for the group of infant/toddlers/preschool children as it was determined there were 15 children grouped together. The group size shall not exceed twice the maximum number of children allowed per Child Care Staff Member. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/07/2023

**Domain: 02 Safe & Sanitary Environment**

**Rule:** 5101:2-12-12 Safe Environment

**Code:** The program is required to label all cleaning and sanitizing supplies.

**Finding:** During the inspection, it was determined that not all cleaning/sanitizing supplies had been clearly labeled (Toddler room). When cleaning or sanitizing supplies are not stored in their original containers, the container must be labeled with the contents. 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

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

**Finding:** During the inspection, it was determined that the items noted in number(s) 1,2 below were not cleaned weekly, or when soiled, as required:

1. Carpets (infant room & hallway).
2. Floors (preschool bathroom & kitchen floor).
3. Washable furniture.

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:** 5101:2-12-12 Safe Environment

**Code:** The program is required to provide an environment that protects the children in care from any items and conditions that may threaten their health, safety, and well-being.

**Finding:** Children in care shall be protected from any items and conditions which threaten their health, safety, and well-being. During the inspection, it was determined that children were not protected from the following item(s) or condition(s) which may threaten their health, safety, or well-being as noted in number(s) 11 below:

1. Open pull cords that are not closed loop.
2. Telephone cords.
3. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
4. Stacked chairs.
5. Employee(s) purse(s).
6. Diaper bags.
7. Television not securely anchored.
8. Small or lightweight pieces of shelving units are not securely anchored to the wall.
9. Smoke detector needing batteries replaced.
10. Staff member stepped over a barrier/gate while holding a child.
11. Emergency exits were blocked by outdoor play equipment stored against the door to the preschool classroom.
12. Other [ ].

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: 01/07/2023

**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.

**Finding:** 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) 7,10,11 below:





1. The changing table was not sanitized after each use.
2. Reusable cloths were not being cleaned daily or when visibly soiled.
3. Dividers were not cleaned when visibly soiled.
4. The food prep areas were not being cleaned and sanitized before and after food prep.
5. The food prep areas were not being cleaned and sanitized between preparing raw and cooked food.
6. Toilet seat(s), handle(s) and toilet bowl(s) were not being cleaned when visibly soiled and sanitized.
7. The sinks were not clean in the preschool classroom & bathroom.
8. Diaper receptacles were not being cleaned and sanitized.
9. Potty chairs were not emptied and/or cleaned and sanitized after each use.
10. Wastebaskets/trash receptacles/rinse buckets were not being cleaned and sanitized when visibly soiled Preschool classroom & kitchen.
11. Other: tables were not wiped before eating lunch in the preschool room & tables were not wiped after AM snack in the kitchen as there were pop tart pieces left all over the tables.

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: 5101:2-12-12 Safe Environment

Code: The program is required to provide an environment that protects the children in care from any items and conditions that may threaten their health, safety, and well-being.

Finding: Children in care shall be protected from any items and conditions which threaten their health, safety, and well-being. During the inspection, it was determined that at least one area of the program or at least one piece of equipment had chipping or peeling paint (Toddler Room & Kitchen). Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/07/2023

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to provide a sturdy platform for children if the sink or toilet are too high.



Finding: During the inspection, it was determined the platforms for the sink/toilet in the preschool classroom bathroom was unsafe for children as noted in number(s) 3 below.

1. No platform was provided.
2. The platform was not sturdy.
3. The platform posed a safety hazard in that they had no gripping to stop the platforms from sliding while in use.

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: 03 Postings & Equipment**

Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan

Code: The program is required to post the fire and weather plans.

Finding: During the inspection, it was determined that the following information was not posted for item number(s) 1 below:

1. Fire alert plan, including a diagram indicating evacuation routes (infant room).
2. Weather alert plan was missing details for [ ].
3. Weather alert plan was missing a diagram indicating evacuation routes.

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

Corrective Action Plan Due: 01/07/2023

**Domain: 05 Health & Safety**

Rule: 5101:2-12-16 First Aid/Standard Precautions

Code: The program is required to have a first aid kit onsite.

Finding: During the inspection, it was determined first aid kit(s) at the program had missing, or expired, items that are required by appendix A of this rule to be contained in a first aid kit, as noted in number(s) 6 below:

1. The program did not have a first aid kit [onsite, on the vehicle, on a field trip].
2. One roll of hypoallergenic first-aid tape.



3. Individually wrapped sterile gauze squares in assorted sizes.
4. Sterile adhesive bandages in assorted sizes.
5. Tweezers.
6. Gauze rolled bandage.
7. Triangular bandage.
8. Rounded end scissors.
9. Tooth preservation system or fresh chilled liquid milk in which to transport a lost permanent tooth, including a written reference indicating location of the refrigerator/freezer where milk is stored if a tooth preservation system is not part of the first aid kit (for programs serving school age children only).
10. A working digital thermometer.
11. Disposable non-latex gloves.
12. A working flashlight.
13. An instant cold pack that has not been activated or ice, including a written reference indicating location of the refrigerator/freezer where the ice is stored if an instant cold pack is not part of the first aid kit.
14. Sealable leak-proof plastic bags in assorted sizes or double bagged plastic bags that can be securely tied for materials soiled with blood or bodily fluids.
15. Pocket mask or face shield, appropriate for all ages of children in care, for cardiopulmonary resuscitation (CPR) administration.
16. Soap or waterless sanitizer (field trip or transporting away from the program only).
17. Bottled water (field trip or transporting away from the program only).

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: 05 Health & Safety**

Rule: 5101:2-12-16 First Aid/Standard Precautions

Code: The program is required to follow the standard precautions procedures.

Finding: During the inspection, it was determined that the required standard precautions noted in number(s) 3 below were not followed.

1. Disposable vinyl gloves were not worn by staff when in contact with blood or other bodily fluids containing blood.
2. Surfaces contaminated with blood or bodily fluids containing blood were not cleaned with hot soapy water and then sanitized properly.
3. Material(s) contaminated with blood were not placed in a sealable, leak proof plastic bag, or securely tied double bags in that a paper towel with dried blood was placed inside the first aid container..
4. Sharp items used for a medical procedure were not stored in a "sharps container".
5. A "sharps container" used for the disposal of sharp items from a medical procedure was not stored out of reach of children.



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: 05 Health & Safety**

Rule: 5101:2-12-16 Emergency Drills

Code: The program is required to complete fire drills, weather drills, and emergency/lockdown drills appropriately.

Finding: During the inspection, it was determined that the required drills were not completed for item number(s) 1 below:

1. Monthly fire drills (November).
2. Monthly weather emergency drills (March through September).
3. Emergency/lockdown drills in each quarter of the calendar year.

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

Corrective Action Plan Due: 01/07/2023

**Domain: 07 Diapering & Infant Care**

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

Code: The program staff is required to clean the bottle warmer daily.

Finding: During the inspection, it was determined that the container used for heating bottles was not emptied and cleaned each day, as required. 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: 07 Diapering & Infant Care**

Rule: 5101:2-12-23 Diapering and Toilet Training

Code: The program is required to launder diapers according to manufacturer's guidelines.

Finding: During the inspection, it was determined that the program was not storing or laundering soiled diapers or clothing according to the rule, in that the program did not meet the condition indicated in number(s) 2 below.

1. Store for no longer than one day
2. Store in an individual covered container or plastic bag away from children's belongings in that a child's soiled onesie & outfit was left laying on the counter next to the changing station.
3. Kept out of reach of children
4. Store soiled diapers and diapering washcloths laundered by the center in a covered container with sanitizing solution
5. Hold soiled diapers to be commercially laundered for no more than seven days
6. Store soiled disposable diapers in a plastic-lined covered container not easily accessible to children
7. Discard disposable diapers daily or more frequently as needed to eliminate odor
8. Launder diapers according to manufacturer's guidelines
9. 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: 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.

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) 1,2,3 7 4 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: 01/07/2023

**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.

Finding: 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: 01/07/2023

**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.

Finding: In review of the staff records, it was determined that child care staff member(s) had not completed the online orientation training as noted in number(s) 1 below:

1. Within 30 days of starting employment at the program as a child care staff member.
2. No documentation of completing the training after December 31, 2016.
3. Completion of the training was not verified in the OPR.

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

Corrective Action Plan Due: 01/07/2023



**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.

**Finding:** 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: 01/07/2023

**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.

**Finding:** 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) 12 & 13 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 [ ] did not have verification of completion of First Aid
3. First Aid – trained child care staff member was not present in each building used by the program.
4. CPR – child care staff members scheduled during the hours of [ ] and [ ] had expired training
5. CPR – child care staff scheduled during the hours of [ ] and [ ] had did not have verification of completion of CPR
6. CPR – trained child care staff member was not present in each building used by children
7. CPR – training taken by staff was not appropriate for all ages and developmental levels of the children in care
8. CPR - audiovisual or electronic media training taken by staff did not include an in-person component of the training
9. Communicable Disease – child care staff members scheduled during the hours of [ ] and [ ] had expired training
10. Communicable Disease – child care staff scheduled during the hours of [ ] and [ ] had not taken Communicable Disease training
11. Communicable Disease – trained child care staff member was not present in each building used by the program
12. Child Abuse – child care staff members scheduled during the hours of 7-9:30am Monday - Friday had expired training
13. Child Abuse – child care staff scheduled during the hours of 7-9:30am Monday - Friday had not taken Child Abuse training



14. Child Abuse – trained child care staff was not in each building used by the program

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: 01/07/2023

**Domain: 08 Staff Files**

Rule: 5101:2-12-07 Administrator Qualifications

Code: The program administrator is required to complete the rules course reiew within the defined time period.

Finding: During the inspection, it was determined that the administrator had not completed the required rules review course provided by this Department for program administrators within the time period defined in 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: 08 Staff Files**

Rule: 5101:2-12-07 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) 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: 01/07/2023

**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.

Finding: 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: 01/07/2023

**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.

Finding: 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: 01/07/2023

**Domain: 08 Staff Files**

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

Code: The program is required to retain documentation for each employee who has left the program in the past three years.

Finding: During the inspection, it was determined that employment records were not maintained on file at the program for the current employees as well as for past employees who had left the program's employment in the past three years. 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.

Finding: 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) 2 below:

1. No medical was on file for at least one child
2. Medical(s) on file was 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. The date of the exam was more than 13 months prior to the date the form was signed.
6. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care
7. 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
8. Medical(s) were missing a record of immunizations the child has had specifying month, day and year



9. 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
10. 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
11. Other [ ]

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

Corrective Action Plan Due: 01/07/2023

**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" .

Finding: 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) 2 & 14 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 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.



**Domain: 10 Written Policies & Procedures**

Rule: 5101:2-12-16 Written Disaster Plan

Code: The program is required to train child care staff members and employees on the written disaster plan annually and keep written documentation of the training on-site.

Finding: During the inspection, it was determined the program's written disaster plan did not meet the requirement for training child care staff members and employees on the plan annually as noted in number(s) 2 below:

1. Child care staff members and employees were not trained annually.
2. Written documentation of the training was not kept on file.

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

Corrective Action Plan Due: 01/07/2023

**Domain: 10 Written Policies & Procedures**

Rule: 5101:2-12-07 Written Program Policies and Procedures

Code: The program's policies and procedures are required to include all topics outlined in rule.

Finding: During the inspection, it was determined the program's written policies and procedures provided to the parents/guardians and employees was missing item number(s) 4,14,15,17,20,23,26 & 28 below:

General Information

1. Program name, address, email address and telephone number.
2. Description of the program's program philosophy.
3. Days and hours of operation, scheduled closings and basic daily schedule.
4. Staff/child ratios and group size.
5. Opportunities for parent involvement in program activities.
6. Opportunities for parents to meet with teachers regarding their child.
7. Payment schedule, overtime charges and registration fees as applicable.
8. Supports for onsite breastfeeding or pumping for mothers who wish to do so (if the program serves infants or toddlers).

Program Policies and Procedures



9. Enrollment including required enrollment information.
10. Care of children without immunizations.
11. Attendance including procedures for arrival and departure, the program's absent day policy, releasing child to persons other than the parent, releasing a child according to a custody agreement and follow up when a child scheduled to arrive from another program or activity does not arrive.
12. Supervision of children, including a separate supervision policy for school-age children, if applicable.
13. Child guidance.
14. Suspension and expulsion.
15. Compliance with the Americans with Disabilities Act (ADA), including administering medication to children with disabilities and administering care procedures to children with disabilities.
16. Outdoor play, including limitations placed on outdoor play due to weather or safety issues (considerations may include but are not limited to temperature, humidity, wind chill, ozone levels, pollen count, lightning, rain or ice.)
17. Food and dietary policy, including, information regarding meeting one-third of the child's recommended daily dietary allowance, policy regarding formula, breast milk, meals and snacks, and a policy on providing supplemental food.
18. Management of illness including isolation precautions, symptoms for discharge and return and notification of parent of ill child.
19. Summary of procedures taken in the event of an emergency, serious illness or injury.
20. Administration of medication and topical products including medical foods, modified diets and whether school age children are permitted to carry their own medication and ointments.
21. Transportation for fieldtrips, routine trips (if applicable) and emergencies, including if the center will provide child care services to children whose parents refuse to grant consent for transportation to the source of emergency treatment.
22. Water activities/swimming.
23. Infant care, if applicable, including feeding, frequency of diaper checks and information about daily activities.
24. Sleeping, Napping and Resting.
25. Evening and overnight care, if applicable.
26. Policy on hours of operation including closing due to weather, school delays or closings and any other factors.
27. Situations that may require disenrollment of a child, if applicable.
28. Problem or issue resolution for parents or employees to follow when needing assistance in resolving problems related to the child care program.
29. Formal screenings and assessments on enrolled children and if the program reports child level data to ODJFS pursuant to 5101:2-17-02 of the Administrative Code.

Revise the program's written policies and procedures to include the missing information. Submit the program's corrective action plan, which includes the revised written policies and procedures, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/07/2023



**Rules In-Compliance/Not Verified**

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-02 License Posted	Compliant	Documenting Statement: The license was in a location visible to parents as required.
Rule: 5101:2-12-02 Current Information	Compliant	Documenting Statement: The program had current information entered in the Ohio Child Licensing and Quality System (OCLQS).
Rule: 5101:2-12-04 Building Department Inspection	Compliant	
Rule: 5101:2-12-04 Food Service Requirements	Compliant	Documenting Statement: The program has obtained a food service exemption status from the local health department.
Rule: 5101:2-12-11 Indoor Space Requirements	Compliant	
Rule: 5101:2-12-11 Separation of Children Under 2 1/2 Years	Compliant	
Rule: 5101:2-12-11 Outdoor Space Requirements	Compliant	Documenting Statement: The quarterly playground inspections were completed and documented, as required. The most recent inspection report form was dated 10/5/22.
Rule: 5101:2-12-11 Outdoor Space Requirements	Compliant	Documenting Statement: The outdoor play area is separated from traffic and other hazards by a fence.



Rule: 5101:2-12-11 Outdoor Space Requirements	Compliant	Documenting Statement: Shade is provided by means of trees.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Play Equipment	Compliant	Documenting Statement: All equipment in the outdoor play space was observed to be anchored and stable.
Rule: 5101:2-12-11 Outdoor Play Equipment	Compliant	Documenting Statement: All equipment was observed to be properly placed out of the path of the main traffic pattern.
Rule: 5101:2-12-11 Outdoor Play Equipment	Compliant	Documenting Statement: The playground safety kit was used to verify the outdoor play equipment was free from entrapment hazards and unsafe and protruding bolts.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Play Fall Zones	Compliant	Documenting Statement: The protective material used under outdoor equipment was mulch.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Management of Communicable Disease	Compliant	Documenting Statement: The JFS 08087 "Communicable Disease Chart" was posted and was readily available to staff and parents; outside of administrator's door.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Incident/Injury Reporting	Compliant	Documenting Statement: The JFS 01299 "Incident/Injury Report For Child Care" forms reviewed during this inspection were complete as required.



Rule: 5101:2-12-16 Incident/Injury Reporting	Compliant	Documenting Statement: The requirements for completing JFS 01299 "Incident/Injury Report For Child Care" reports were discussed during the inspection.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-17 Daily Schedule	Compliant	Documenting Statement: Daily schedules were observed posted.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-17 Materials and Equipment	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-17 Daily Outdoor Play	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-18 License Capacity	Compliant	Documenting Statement: The program was operating within their license capacity limits.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-18 Attendance Records	Compliant	Documenting Statement: During the inspection, attendance records were reviewed. Child Care Staff Members were viewed recording the attendance for each child upon arrival and departure. All attendance records met the requirements of the rule and were kept with the group at all times.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-19 Supervision	Compliant	Documenting Statement: Child Care Staff Members were supervising the children and were able to intervene as needed.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-19 Child Guidance	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>





Rule: 5101:2-12-20 Cots and Napping	Compliant	Documenting Statement: The rest area had adequate lighting, which allowed for the visual supervision of children.
Rule: 5101:2-12-20 Cots and Napping	Compliant	Documenting Statement: Cots were placed appropriately and safely during nap time.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-20 Cribs	Compliant	Documenting Statement: Cribs were separated from the play space by a safe and sturdy and physical barrier.
Rule: 5101:2-12-20 Cribs	Compliant	Documenting Statement: All cribs were labeled with the assigned infant's name.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-22 Meal and Snack Requirements	Compliant	Documenting Statement: Posted snack menus were current and dated.
Rule: 5101:2-12-22 Meal and Snack Requirements	Compliant	Documenting Statement: The program served the following: AM Snack, Lunches (packed) & PM Snack.
Rule: 5101:2-12-22 Meal and Snack Requirements	Compliant	Documenting Statement: Meals were provided at intervals as required by this rule.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Fluid Milk Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-22 Safe Food Handling/Storage	Compliant	Documenting Statement: Sack lunches were stored in the refrigerator.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-23 Infant Daily Care	Compliant	Documenting Statement: Appropriate daily written records for all infants were viewed.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-25 Medication Administration	Compliant	



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