

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 | | | | |
| McKinley Early Childhood Center #3 | 00000107076 | Child Care Center | | | | |
| Address | | County | | | | |
| 440 VERNON ODOM BLVD AKRON OH 44307 | | SUMMIT | | | | |

| Inspection Information | | | | | | | | |
|--------------------------|------------------------|----------------|-----------------|------------------|-------------------|-------------------|--|--|
| Inspection Type | | | | Inspection Scope | | Inspection Notice | | |
| Complaint | | | | Partial | | Unannounced | | |
| Reviewer(s) SHERI BAILEY | | Inspection Day | | Begin Time | | End Time | | |
| 09/02/2 | | 09/02/20 | 21 | 10:05 AM | | 2:15 PM | | |
| Summary of Findings | | | | | | | | |
| No. Rules Verified | No. Rules with Non-cor | npliances | No. Serious Ris | (| No. Moderate Risk | No. Low Risk | | |
| 7 | 6 | | 1 | | 2 | 3 | | |

| Staff-Child Ratios at the Time of Inspection | | | | | | |
|--|--------------------------|----------------|---------|--|--|--|
| Group | Age Group/Range | Ratio Observed | Comment | | | |
| Infant | 0 to < 12 months | 2 to 5 | | | | |
| Toddler | 18 months to < 30 months | 2 to 10 | | | | |
| PS/Pre-K | 3 years to < 4 years | 2 to 8 | | | | |



Complaint Allegations

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.

Domain:01 Ratio & Supervision Rule: 5101:2-12-19 Supervision Code: The program staff is required to supervise children in their assigned group by sight and hearing. Allegation: Child ran out of the building and was found near the parking lot. Determination: Substantiated Findings: During the inspection, it was determined that children were not supervised while outside the program as noted in number 1 below: 1. Child was left unattended outside the facility building. In that a child ran out of the building and almost to the parking lot unattended. Child(ren) were left unattended outside the facility building more than once. 2. 3. Child(ren) were left unattended off the program's premises. 4. Child(ren) were left unattended during a swimming activity. 5. Other []. Children must be supervised and within sight and hearing of a child care staff member at all times. Provide staff training. Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Risk Level: Serious

Corrective Action Plan Due: 09/21/2021

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.

Allegation: Center is often over ratio.

Determination: Substantiated

Findings: During the inspection, a ratio of 2 child care staff member(s) for 15 children was determined to have occurred for the mixed age (infant-pre-K) group when the situation in number(s) 6 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.

Risk Level: Moderate

Corrective Action Plan Due: 10/16/2021

Domain:01 Ratio & Supervision

Rule: 5101:2-12-19 Child Guidance

Code: The program staff 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: Teacher pushed over an easel with a child hiding inside it on purpose.

Determination: Substantiated

Findings: During the inspection, it was determined that a Child Care Staff Member had used the inappropriate techniques in number 1 below when managing unacceptable behavior in children:

1. Utilize cruel, harsh, unusual, or extreme techniques; by purposely knocking over an easel with a child inside it.

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 a child by prone restraint or 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 the Department to verify compliance with the requirements of this rule.

Risk Level: Moderate



Corrective Action Plan Due: 10/16/2021

Domain:07 Diapering & Infant Care

Rule: 5101:2-12-23 Diapering and Toilet Training Code: The program staff is required to change wet or soiled diapers immediately.

Allegation: Child went 6 hours without a diaper change one day and 4 hours on another day.

Determination: Substantiated

Findings: During the inspection, it was determined that a child's basic diapering needs were not being met in numbers 1,2,3 below:

1. Diapers were not checked and immediately changed when needed;

- 2. Diapers not checked regularly;
- 3. Diapers not changed when found to be wet or soiled;

4. Other [].

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

Risk Level: Low

Corrective Action Plan Due: 10/16/2021

Summary of Additional Non-Compliances

Serious Risk Non-Compliances

No Additional Serious Risk Non-Compliances were observed during this inspection

Moderate Risk Non-Compliances

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



Low Risk Non-Compliances

Domain:01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

Code: The program is required to maintain a record of the arrival and departure of each child. The program is also required to retain the attendance record for a period of one year.

Findings: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number 2 below:

1. No attendance record was being maintained;

- 2. The attendance record was not being consistently completed;
- 3. The attendance documentation was not kept at the program for a period of one year.

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: 10/16/2021

Domain:05 Health & Safety

Rule: 5101:2-12-16 Management of Communicable Disease Code: The program is required to notify parents of children exposed to a communicable disease by the end of the next day.

Findings: During the inspection, it was determined that parents were not informed by the end of the next day of program operation that their child had been exposed to a communicable disease, 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 required at this time.

Corrective Action Plan Due: 10/16/2021