

# **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 <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. 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         |  |
| EPIPHANY LUTHERAN PRESCHOOL               | 00000203068             |                 | Child Care Center    |  |
|   |                         |                 |                      |  |
| Address<br>6430 FAR HILLS AVE CENTERVILLE |                         |                 | County<br>MONTGOMERY |  |
| OH 45459                                  |                         |                 |                      |  |
|   |                         |                 |                      |  |
| Building Approval Date                    | Use Group/Code          | Occupancy Limit | Maximum Under 2 ½    |  |
|   | E                       |                 |                      |  |
| Fire Inspection Approval Date             | Food Service Risk Level |                 |                      |  |
| 02/18/2021                                | Exempt                  |                 |                      |  |

| Inspection Information        |                                |                  |                   |              |
|-------------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type               | Inspection So                  | cope             | Inspection Notice |              |
| Annual                        | Full                           |                  | Unannounced       |              |
| Inspection Date<br>01/10/2022 | Begin Time 9:30 AM             |                  | End Time 4:44 PM  |              |
| Reviewer:<br>BRENDA MEYER     |                                |                  |                   |              |
| Summary of Findings           |                                |                  |                   |              |
| No. Rules Verified            | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58                            | 2                              | 0                | 0                 | 2            |

| License Capacity and Enrollment at the Time of Inspection |                  |            |           |       |
|---|------------------|------------|-----------|-------|
| Age Group   | License Capacity | Enrollment |           |       |
|   | Totals           | Full Time  | Part Time | Total |
| Infant ( Birth to < 18 m)                                 |                  | 0          | 0         | 0     |
| Young Toddler   |                  | 0          | 0         | 0     |
| Total Under 2 ½ Years                                     | 0                | 0          | 0         | 0     |
| Older Toddler   |                  | 0          | 8         | 8     |
| Preschool   |                  | 0          | 85        | 85    |
| School Age  |                  | 0          | 0         | 0     |
| Total Capacity/Enrollment                                 | 132              | 0          | 93        | 93    |

| Staff-Child Ratios at the Time of Inspection |  |        |  |
|--|--|--------|--|
| Group Age Group/Range Ratio Observed Comment |  |        |  |
| 4s 9A  |  | 1 to 7 |  |



| Tiny Toddlers | 2 to 5  |
|---------------|---------|
| 4s 9C         | 1 to 10 |
| 3s Room 8     | 1 to 7  |
| 3s room 6     | 1 to 8  |
| Pre-K Room 7  | 1 to 7  |
| Pre-K Room 5  | 1 to 9  |
| 3s Room 4     | 1 to 6  |
| 4s Room 2     | 1 to 4  |
| 4s Room 3     | 1 to 7  |
| 4s Room 1     | 1 to 6  |

#### **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-O3 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

## **Moderate Risk Non-Compliances**

No Moderate Risk Non-Compliances were observed during this inspection



## Low Risk Non-Compliances

#### Domain: 08 Staff Files

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

<u>Code</u>: The program is required to have staff complete training in child abuse and neglect recognition and prevention within sixty days of hire.

<u>Finding</u>: In review of the staff records, it was determined that at least one child care staff member had not completed training in child abuse and neglect recognition and prevention as noted in number 1 and 2 below:

1. The training was not completed within sixty days of hire.

2. The training was expired, as it is only valid for two years.

Refer to the Employee Record Chart for the name(s) of the child care staff member(s) who must complete training in child abuse and neglect recognition and prevention. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/09/2022

# Domain: 09 Children's Files

<u>Rule</u>: 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 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.

# **Rules In-Compliance/Not Verified**

| Rule                             | Status     | Documenting Statement(s), If applicable |
|----------------------------------|------------|---|
| 5101:2-12-02 License Posted      | Compliant  |   |
|                                  |            |   |
|                                  | · ·        |   |
| Rule                             | Status     | Documenting Statement(s), If applicable |
| 5101:2-12-02 Current Information | Compliant  |   |
|                                  |            |   |
|                                  |            |   |
| Rule                             | Status     | Documenting Statement(s), If applicable |
| 5101:2-12-03 Inspection          | Compliant  |   |
| Requirements                     |            |   |
|                                  | - <b>-</b> |   |
| Rule                             | Status     | Documenting Statement(s), If applicable |
| 5101:2-12-04 Building Department | Compliant  |   |
| Inspection                       |            |   |
| · · ·                            |            |   |
| Rule                             | Status     | Documenting Statement(s), If applicable |
| 5101:2-12-04 Fire Inspection     | Compliant  |   |
|                                  |            |   |
|                                  |            |   |
| Rule                             | Status     | Documenting Statement(s), If applicable |
| 5101:2-12-04 Food Service        | Compliant  |   |
| Requirements                     | -          |   |
| · ·                              | 1          |   |
| Rule                             | Status     | Documenting Statement(s), If applicable |



Department of Education Department of Job and Family Services

| 5101:2-12-05 Denial, Revocation and Suspension                   | Compliant |   |
|--|-----------|---|
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator<br>Qualifications                     | Compliant |   |
|  |           |   |
| Rule<br>5101:2-12-07 Administrator                               | Status    | Documenting Statement(s), If applicable |
| Responsibilities/Requirements                                    | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-07 Written Program                                     | Compliant |   |
| Policies and Procedures  |           |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-08 Medical Statement                                   | Compliant |   |
|  |           |   |
| Rule<br>5101:2-12-08 Child Care Staff Member                     | Status    | Documenting Statement(s), If applicable |
| Educational Requirements   | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-08 Orientation Training &<br>Whistle Blower Protection | Compliant |   |
|  |           |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-09 Background Check<br>Requirements                    | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-10 Professional  | Compliant |   |
| Development Requirements   |           |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-11 Indoor Space<br>Requirements                        | Compliant |   |
| · · · · · · · · · · · · · · · · · · ·                            | ·         |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-11 Separation of Children<br>Under 2 1/2 Years         | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Space                                       | Compliant |   |
| Requirements   |           |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Equipment                              | Compliant |   |



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| Rule<br>Rule: 5101:2-12-16 First Aid/Standard<br>Precautions | Status<br>Compliant | Documenting Statement(s), If applicableDocumenting Statement: During theinspection, the program had completefirst aid kits available as required. |
|--|---------------------|---|
| Precautions  |                     | inspection, the program had complete  |
|  |                     |   |
|  |                     | mist dia kits available as required.  |
|  |                     |   |
|  |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-16 Management of                                   | Compliant           |   |
| Communicable Disease   |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
|  | Compliant           |   |
| 5101:2-12-16 Incident/Injury                                 | Compliant           |   |
| Reporting  |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-16 Written Disaster Plan                           | Compliant           |   |
|  |                     |   |
| Rule   | Status              | Documenting Statement/s) If annihists   |
|  |                     | Documenting Statement(s), If applicable   |
| 5101:2-12-17 Daily Schedule                                  | Compliant           |   |
|  |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-17 Materials and                                   | Compliant           |   |
| Equipment  |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-17 Daily Outdoor Play                              | Compliant           |   |
|  | Compliant           |   |
|  |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-18 License Capacity                                | Compliant           |   |
|  |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-18 Ratio                                     | Compliant           | Documenting Statement: Staff/child  |
|  |                     | ratios observed during the inspection   |
|  |                     | surpassed those required by the rule.   |
| Rule: 5101:2-12-18 Ratio                                     | Compliant           | Documenting Statement: The Appendix A   |
|  |                     |   |
|  |                     | "Staff/Child Ratios, Age Grouping and   |
|  |                     | Maximum Group Size" was posted in a   |
|  |                     | noticeable area at the program as   |
|  |                     | required.   |
|  | l                   |   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-18 Group Size                                      | Compliant           |   |



| Rule                                 | Status    | Documenting Statement(s), If applicable |
|--------------------------------------|-----------|---|
| Rule: 5101:2-12-18 Attendance        | Compliant | Documenting Statement: Child Care Staff |
| Records                              |           | Members were observed recording the     |
|                                      |           | attendance for each child upon arrival  |
|                                      |           | and documenting each child's departure. |
|                                      |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-19 Supervision             | Compliant |   |
|                                      |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-19 Child Guidance          | Compliant |   |
|                                      |           |   |
| Pulo                                 | Status    | Desumenting Statement/s) If applicable  |
| Rule<br>5101:2-12-22 Meal and Snack  |           | Documenting Statement(s), If applicable |
|                                      | Compliant |   |
| Requirements                         |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-22 Fluid Milk Requirements | Compliant |   |
| S101.2 12 22 Hald Wilk Requirements  | compliant |   |
|                                      | I         |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-22 Safe Food               | Compliant |   |
| Handling/Storage                     |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-25 Medication              | Compliant |   |
| Administration                       |           |   |
|                                      |           | · · ·                                   |
|                                      |           |   |