

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 | Program Number | | Program Type | |
| W.C. YMCA | 000000207294 | | Child Care Center | |
| Address 900 S. ALEX RD W. CARROLLTON OH 45449 | | | County MONTGOMERY | |
| | 1 0 /0 / | Ta | | |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ | |
| 04/16/2012 | E | 150 | | |
| Fire Inspection Approval Date | Food Service Risk Level | | | |
| 05/19/2020 | Exempt | | | |

| Inspection Information | | | | |
|----------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type | Inspection So | cope | Inspection Notice | |
| Annual | Full | | Unannounced | |
| Inspection Date 11/23/2021 | Begin Time 1 | 1:30 AM | End Time 12:35 PM | |
| Reviewer: MARGARET CONRAD | | | | |
| Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58 | 1 | 0 | 0 | 1 |

| 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 | 0 | 0 |
| Preschool | | 0 | 0 | 0 |
| School Age | | 16 | 0 | 16 |
| Total Capacity/Enrollment | 155 | 16 | 0 | 16 |

| Staff-Child Ratios at the Time of Inspection | | | | |
|--|--------------------------|---------|--|--|
| Group Age Group/Range Ratio Observed Comment | | | | |
| School Age | School-Age to < 11 years | 2 to 13 | | |



Domain: 03 Postings & Equipment

Rule: 5101:2-12-17 Materials and Equipment

| School Age | School-Age to < 11 years | 1 to 4 | other group |
|------------|--------------------------|--------|-------------|
| | | | swimming |

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 Sorious Pick Non Compliances were observed during this inspection | | | |
| No Serious Risk Non-Compliances were observed during this inspection | | | |
| | | | |
| | | | |
| | \neg | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Moderate Risk Non-Compliances | | | |
| Moderate hisk non-compliances | | | |
| No. Markovsky Phil No. 20, and Process of the standard of the Hill Constitution | | | |
| No Moderate Risk Non-Compliances were observed during this inspection | | | |
| | | | |
| | | | |
| | \neg | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Low Risk Non-Compliances | | | |
| Low Risk Non-Compliances | | | |



Code: The program is required to have quiet areas available.

<u>Finding</u>: During the inspection, it was determined that the program's environment did not provide for a quiet area in the school age classroom. 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 | | |
| | | |
| 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 | |
| | | |
| | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Food Service | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-05 Denial, Revocation and | Compliant | |
| Suspension | | |

| Rule | Status | Documenting Statement(s), If applicable |
|--------------------------------------|---------------------|--|
| 5101:2-12-07 Administrator | Compliant | U (// SEE |
| Qualifications | | |
| | • | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator | Compliant | |
| Responsibilities/Requirements | | |
| | | |
| 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 | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Child Care Staff Member | Compliant | Documenting statement(s), if applicable |
| Educational Requirements | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Orientation Training & | Compliant | |
| Whistle Blower Protection | | |
| | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-09 Background Check | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-10 Health Training | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-10 Professional | Compliant | |
| Development Requirements | | |
| Dula | Chahua | Decumenting Chatagories (A) If |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Indoor Space | Compliant | |
| Requirements | | |
| Rule | Status | Documenting Statement(s) If applicable |
| 5101:2-12-11 Separation of Children | Status Compliant | Documenting Statement(s), If applicable |
| Under 2 1/2 Years | Compnant | |
| Officer 2 1/2 rears | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Space | Compliant | Documenting Statement: During the |
| Requirements | | inspection, the requirements of the rule |
| | | regarding outdoor space were discussed. |
| • | 1 | regarding outdoor space were discussed. |

| | | This is a YMCA building and their is no fenced in area for the children to play in, |
|---|---------------------|---|
| | | TA was provided and a fence or barrier |
| | | will need to be added. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Equipment | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Fall Zones | Compliant | (-// |
| • | , | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Equipment | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Environment | Compliant | |
| | | |
| | C | Described Chairmant (a) If and inchin |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Sanitary Equipment and Environment | Compliant | |
| Elivironment | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Handwashing | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Smoke Free | Compliant | |
| Environment | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-15 Child Medical and | Compliant | became ming state mental, in approximation |
| Enrollment Records | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-15 Medical/Physical Care | Compliant | |
| Plans | | |
| Dula. | Chatus | Desimenting Statement(s) If applicable |
| Rule 5101:2-12-16 Medical, Dental, and | Status Compliant | Documenting Statement(s), If applicable |
| General Emergency Plan | Compliant | |
| General Emergency Fian | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Emergency Drills | Compliant | |
| | | |
| 1 | | |

| Rule | Status | Documenting Statement(s), If applicable |
|--|---------------------------------------|---|
| 5101:2-12-16 First Aid/Standard | Compliant | |
| Precautions | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Management of | Compliant | |
| Communicable Disease | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Incident/Injury | Compliant | bocumenting statement(s), if applicable |
| Reporting | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Written Disaster Plan | Compliant | |
| | | |
| Pulo | Ctatus | Documenting Statement/s\ If applicable |
| Rule 5101:2-12-17 Daily Schedule | Status Compliant | Documenting Statement(s), If applicable |
| 3101.2-12-17 Daily Schedule | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Outdoor Play | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 License Capacity | Compliant | Bocamenting statement(s), if applicable |
| | , , , , , , , , , , , , , , , , , , , | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 Ratio | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 Group Size | Compliant | 3 (7) |
| | | |
| | | |
| Rule: 5101-2-12-19 Attendence | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 Attendance Records | Compliant | Documenting Statement: Child Care Staff Members were observed recording the |
| Records | | attendance for each child upon arrival |
| | | and documenting each child's departure. |
| | | and documenting each child's departure. |
| | l | |
| 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 | Documenting statement(s), if applicable |
| 3101.2 12 13 Cilia Galdance | Compliant | |
| | | |

| Rule | Status | Documenting Statement(s), If applicable |
|--------------------------------------|-----------|---|
| 5101:2-12-20 Cots and Napping | Compliant | |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Meal and Snack | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Fluid Milk Requirements | Compliant | |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Safe Food | Compliant | |
| Handling/Storage | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-25 Medication | Compliant | |
| Administration | | |
| | | |