

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	ils	
Program Name	Program Number		Program Type
HICKORY DICKORY TOTS, LLC	000000207513		Child Care Center
Address 9057 CINCINNATI-COLUMBUS RD WEST CHESTER OH 45069		County BUTLER	
Building Approval Date 09/24/2009	Use Group/Code E	Occupancy Limit 289	Maximum Under 2 ½
Fire Inspection Approval Date	Food Service Risk Level		
09/22/2021	Level III		

Inspection Information				
Inspection Type	Inspection So	cope	Inspection Notice	
Annual	Full		Unannounced	
Inspection Date 02/09/2022	Begin Time 8	:40 AM	End Time 3:45 PM	
Reviewer:	Reviewer:			
Steffani Roberts	Steffani Roberts			
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
55	3	0	1	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)		21	0	21
Young Toddler		22	0	22
Total Under 2 ½ Years	56	43	0	43
Older Toddler		16	0	16
Preschool		69	0	69
School Age		0	40	40
Total Capacity/Enrollment	274	85	40	168

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Bears	18 months to < 30 months	2 to 6	@ arrival

Bears	18 months to < 30 months	1 to 5	
Peanuts	12 months to < 18 months	2 to 9	@ Arrival
Peanuts	12 months to < 18 months	2 to 10	
Rainforest #2	0 to < 12 months	1 to 4	@ Arrival
Rainforest #2	0 to < 12 months	1 to 4	
Rainforest #1	0 to < 12 months	1 to 4	Arrival
Rainforest #1	0 to < 12 months	1 to 5	
Bees	18 months to < 30 months	1 to 7	@ Arrival
Bees	18 months to < 30 months	1 to 7	
Ducks	18 months to < 30 months	1 to 5	@ Arrival
Moose	30 months to < 36 months	1 to 5	@ Arrival
Moose	30 months to < 36 months	1 to 5	
Toucan	18 months to < 30 months	1 to 7	@ Arrival
Toucan	18 months to < 30 months	1 to 7	
Monkeys	3 years to < 4 years	2 to 9	@ Arrival
Monkeys	3 years to < 4 years	1 to 11	
Frogs	4 years to < 5 years	2 to 15	@ Arrival
Frogs	4 years to < 5 years	2 to 21	
Hippos	4 years to < 5 years	1 to 14	@ Arrival
Hippos	5 years to < Kindergarten	2 to 22	

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		

Moderate	Risk N	lon-Com	pliances
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Domain: 09 Children's Files

Rule: 5101:2-12-15 Medical/Physical Care Plans



<u>Code</u>: 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.

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

- 1. No plan was on file.
- 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: 03/11/2022



Low Risk Non-Compliances

Domain: 08 Staff Files

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

<u>Code</u>: 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.

<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 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: 03/11/2022

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 4a.

- 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: 03/11/2022

Rules In-Compliance/Not Verified

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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 Current Information	Compliant	
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Dula	Chahus	Decumenting Statement (a) If a mulicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-03 Inspection	Compliant	
Requirements		
Dula	Chahara	December 5 Chataman + (a) If a malicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Building Department	Compliant	
Inspection		
	<u>l</u>	<u></u>
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Fire Inspection	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Food Service	Compliant	Documenting Statement: The food service
Requirements		license was observed posted. Following is
		the audit number and date of expiration:
		KRIY-BWQCM Exp: 3/1/22.
D. I.	l c	10 (1)
Rule 5101:2-12-07 Administrator	Status	Documenting Statement(s), If applicable
Qualifications	Compliant	
Qualifications		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	botamenting statement(s), ii applicable
Responsibilities/Requirements		
	I	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-07 Written Program	Compliant	Documenting Statement: During the
Policies and Procedures	·	inspection, the requirements of the rule
		regarding the program's written policies
		and procedures were discussed.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Child Care Staff Member	Compliant	
Educational Requirements		
Rule	Status	Documenting Statement(s) If applicable
5101:2-12-08 Orientation Training &	Compliant	Documenting Statement(s), If applicable
Whistle Blower Protection	Соттриант	
William Blower Frotection	<u> </u>	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-09 Background Check	Compliant	(-),
Requirements	'	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-10 Health Training	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space	Compliant	
Requirements		
Dula	Chathan	Danier Chair (1) If III
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
Nuie	Status	Documenting statement(s), if applicable

5101:2-12-11 Outdoor Space Requirements	Not Verified	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Play Equipment	Not Verified	Documenting Statement: The outdoor play space and equipment were not viewed during this inspection due to snow covering; however, the requirements were discussed.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Play Fall Zones	Not Verified	Documenting Statement: The protective surfaces under the outdoor equipment were not viewed during this inspection due to snow covering; however, the requirements were discussed.
Dulo	Status	Decumenting Statement(s) If applicable
Rule: 5101:2-12-12 Safe Equipment	Compliant	Documenting Statement(s), If applicable Documenting Statement: Equipment was observed to be in good condition.
Rule: 5101:2-12-12 Safe Environment	Status Compliant	Documenting Statement(s), If applicable Documenting Statement: A safe environment was observed during the inspection. Children were protected from items and conditions which threaten their health, safety and well-being.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-13 Sanitary Equipment and Environment	Compliant	Documenting Statement: During the inspection, the equipment was observed clean and in good repair.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-13 Handwashing Requirements	Compliant	Documenting Statement: Staff and children were observed washing hands as required by the rule.
Pulo	Status	Documenting Statement(s) If applicable
Rule 5101:2-12-13 Smoke Free Environment	Status Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable

5101:2-12-14 Transportation and Field	Compliant	
Trip Procedures		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Child Medical and	Compliant	State of the state
Enrollment Records	Compilant	
Emoliment Records		
Dulo	Chahua	Decumenting (taken ant/s) If and inchis
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Medical, Dental, and	Compliant	
General Emergency Plan		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Emergency Drills	Compliant	Documenting Statement: Documentation
		for completed fire, weather, and
		emergency/lockdown drills was verified
		during this inspection.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 First Aid/Standard	Compliant	Documenting Statement: During the
Precautions	'	inspection, the program had complete
		first aid kits available as required.
		mot ara kito avanable ao reganica.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of	Compliant	Bootimenting statement(s), it applicable
Communicable Disease	Compliant	
Communicable Disease		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury		bocumenting statement(s), if applicable
	Compliant	
Reporting		
	1	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Written Disaster	Compliant	Documenting Statement: During the
Plan		inspection, the requirements of the rule
		regarding the written disaster plan were
		discussed.
Rule	Status	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	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	bocamenting statement(s), it applicable
STOTIL IE TO Electrice empacity	Compilarie	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Ratio	Compliant	, , , , , , , , , , , , , , , , , , ,
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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	
Dula	Chahua	Decumenting (tatement(s) If applicable
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-19 Child Guidance	Compliant	Documenting Statement: Appropriate
		child guidance techniques and practices
		were observed being used during the
		inspection.
Dista	Chahua	Decumenting Statement(s) If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cots and Napping	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cribs	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-22 Meal and Snack	Compliant	Documenting Statement: The menu
Requirements		posted reflected the meal served.
		<u> </u>
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
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
Rule: 5101:2-12-23 Infant Bottle and	Compliant	Documenting Statement: During the
Food Preparation		inspection, the requirements of the rule
		regarding infant bottle and food
		preparation were discussed. We
		specifically discussed the storage and
		labeling of breast milk.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-23 Diapering and	Compliant	Documenting Statement: Appropriate
Toilet Training		diaper changing procedures were
		observed during the inspection in the
		infant and toddler room(s).
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-25 Medication	Compliant	
Administration	·	