



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 BETTER CHILD CARE CORP	Program Number 000000207607	Program Type Child Care Center	
Address 6945 HARRISON AVENUE CINCINNATI OH 45247		County HAMILTON	
Building Approval Date 09/26/2003	Use Group/Code E with I-2	Occupancy Limit 173	Maximum Under 2 ½ NA
Fire Inspection Approval Date 09/30/2021	Food Service Risk Level Level II		

Inspection Information		
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 02/23/2022	Begin Time 9:30 AM	End Time 12:15 PM
Reviewer: Nicole Vadnais		

Summary of Findings				
No. Rules Verified 58	No. Rules with Non-compliances 14	No. Serious Risk 0	No. Moderate Risk 3	No. Low Risk 11

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)		13	0	13
Young Toddler		14	0	14
Total Under 2 ½ Years	48	27	0	27
Older Toddler		11	0	11
Preschool		53	0	53
School Age		0	0	0
Total Capacity/Enrollment	153	64	0	91

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Young Infants	0 to < 12 months	1 to 5	#1



Young Infants	0 to < 12 months	2 to 6	#2
Older Infants	12 months to < 18 months	1 to 5	#1
Older Infants	12 months to < 18 months	1 to 5	#2
Yellow	18 months to < 30 months	1 to 3	#1
Yellow	18 months to < 30 months	1 to 4	#2
Orange	18 months to < 30 months	1 to 7	#1
Orange	18 months to < 30 months	2 to 7	#2
Green	3 years to < 4 years	1 to 8	#1
Green	3 years to < 4 years	1 to 10	#2
Rainbow	4 years to < 5 years	1 to 10	#1
Rainbow	4 years to < 5 years	1 to 10	#2
Blue	30 months to < 36 months	2 to 7	#1
Blue	30 months to < 36 months	1 to 7	#2
Purple	4 years to < 5 years	1 to 8	#1
Purple	4 years to < 5 years	1 to 8	#2
Red	4 years to < 5 years	2 to 9	#1
Red	4 years to < 5 years	1 to 9	#2

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 Non-Compliances

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. Supervision includes being near enough to respond and reach children immediately and protecting them from harm.



Finding: During the inspection, it was determined that children were left unattended while inside the program as noted in number 3 below:

1. Child(ren) were left unattended once.
2. Child(ren) were left unattended more than once.
3. Child(ren) left the group and were unattended.
4. Child care staff were using a baby monitor to supervise children.
5. Child care staff were using a walkie talkie to supervise children.
6. Child care staff were using mirrors to view children in another room.
7. Child care staff were using a video camera instead of physically being present in the room.
8. 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.

Corrective Action Plan Due: 03/26/2022

Domain: 08 Staff Files

Rule: 5101:2-12-09 Background Check Requirements

Code: The program is required to have staff update their background checks every five years as required.

Finding: In review of the staff records, it was determined that background checks were not updated every five years for the individual(s) listed on the Employee Record Chart as noted in numbers 1-3 below:

1. Owner;
2. Administrator;
3. Child Care Staff Member, employee.

Submit the program's corrective action plan, which includes a statement the background check update has been requested, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/26/2022

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) [] 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: 03/26/2022



Low Risk Non-Compliances

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to store chemicals in a place that is inaccessible to children.

Finding: During the inspection, a potentially hazardous substance, which was determined to not present a serious risk to a child, was accessible to children as noted in number 2 below:

1. Cosmetics;
2. Disinfecting wipes;
3. Fish food;
4. Hand lotion;
5. Hand sanitizer (for children under 24 months);
6. Laundry detergent;
7. Powder dish washing soap;
8. Paint cans;
9. White out;
10. Potting Soil;
11. Other potentially hazardous substance [].

The potentially hazardous substance was determined to be accessible to children in the following area: []. Provide staff training. Submit the program's corrective action plan, which includes a statement that the potentially hazardous substance is no longer accessible to children and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/26/2022

Domain: 03 Postings & Equipment

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

Code: The program is required to post and implement the JFS 01242 "Medical, Dental, and General Emergency Plan" when necessary.

Finding: During the inspection, it was determined the requirements for the JFS 01242 "Medical, Dental, and General Emergency Plan for Child Care" were not followed as noted in number 8 below:

1. The plan was not posted in each classroom.
2. The plan was not posted in other spaces used by children.
3. The name, address and telephone number of the program were not complete.



4. The location of first aid kit, fire extinguishers and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.
5. The telephone number for emergency squad, fire department, hospital, poison control program, public children services agency, local health department, local emergency management agency, and police department were not complete.
6. Location of children's records was not complete.
7. Emergency information including any medications or supplies needed in the event of an evacuation was not complete.
8. The current version of the prescribed form was not used.
9. The plan was not implemented when necessary in that [].

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

Corrective Action Plan Due: 03/26/2022

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Play Fall Zones

Code: The program is required to provide adequate fall surface for the outdoor play space.

Finding: During the inspection, it was determined that while there was adequate fall surface material in the outdoor play space, proper distribution had not been maintained under and around equipment as required. Submit the program's corrective action plan, which includes a statement that fall surface material has been properly redistributed, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/26/2022

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 numbers 3, 10, and 13 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 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 3 below:

1. Monthly fire drills.
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: 03/26/2022



Domain: 08 Staff Files

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

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

Finding: 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 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: 03/26/2022

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 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: 03/26/2022



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: 03/26/2022

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 numbers 5 and 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: 03/26/2022



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 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: 03/26/2022

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 numbers 6, 10, 13, and 15 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
Rule: 5101:2-12-02 License Posted	Compliant	Documenting Statement: The license was in a location visible to parents as required.
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 Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Building Department Inspection	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Fire Inspection	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Food Service Requirements	Compliant	Documenting Statement: The food service license was observed posted.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-05 Denial, Revocation and Suspension	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator Qualifications	Compliant	
Rule: 5101:2-12-07 Written Program Policies and Procedures	Compliant	Documenting Statement: During the 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 Educational Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Separation of Children Under 2 1/2 Years	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Space Requirements	Compliant	Documenting Statement: Outdoor play was not observed due to weather conditions however, the quarterly playground inspections were discussed and documentation was on file, as required.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Sanitary Equipment and Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-13 Handwashing Requirements	Compliant	Documenting Statement: Children were viewed washing their hands, as required by the rule.



Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-13 Smoke Free Environment	Compliant	Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program.
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.
Rule: 5101:2-12-16 Incident/Injury Reporting	Compliant	
Rule: 5101:2-12-16 Written Disaster Plan	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding the written disaster plan were discussed.
Rule: 5101:2-12-17 Daily Schedule	Compliant	
Rule: 5101:2-12-17 Materials and Equipment	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding materials and equipment were discussed.
Rule: 5101:2-12-17 Daily Outdoor Play	Compliant	
Rule: 5101:2-12-18 License Capacity	Compliant	
Rule: 5101:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child ratios observed during the inspection were in compliance.



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Group Size	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Attendance Records	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cots and Napping	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cribs	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Meal and Snack Requirements	Compliant	
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 Handling/Storage	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-23 Infant Daily Care	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-23 Infant Bottle and Food Preparation	Compliant	Documenting Statement: All bottles were labeled as required.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-23 Diapering and Toilet Training	Compliant	Documenting Statement: Appropriate diaper changing procedures were observed during the inspection in the young infant room.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-25 Medication Administration	Compliant	Documenting Statement: There were no children on medication at the time of the



		inspection; however, the method of storage and practices for the administration were reviewed.
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