

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	nils	
Program Name	Program Number		Program Type
CARNIVAL CHILD DEVELOPMENT CENTER,	000000300161		Child Care Center
INC.			
Address			County
1690 LANDER ROAD MAYFIELD HTS.			CUYAHOGA
OH 44124			
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
03/24/2011	E		
Fire Inspection Approval Date	Food Service Risk L	evel	
01/09/2021	Level III		

Inspection Information				
Inspection Type	Inspection So	cope	Inspection Notice	
Annual	Full		Unannounced	
Inspection Date 05/04/2021	Begin Time 9	:32 AM	End Time 1:08 PM	
Reviewer: REBECCA KOTEWICZ				
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
60	8	0	0	10

License Capacity and Enrollment at the Time of Inspection				
Age Group	License Capacity	Enrollment		ollment
	Totals	Full Time	Part Time	Total
Infant (Birth to < 18 m)		12	0	12
Young Toddler		13	0	13
Total Under 2 ½ Years	38	25	0	25
Older Toddler		12	0	12
Preschool		37	0	37
School Age		0	40	40
Total Capacity/Enrollment	118	49	40	114

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Infant	0 to < 12 months	2 to 6	Arrival

Toddler 1	12 months to < 18 months	2 to 12	
toddler 2	18 months to < 30 months	2 to 13	
PS 1	3 years to < 4 years	2 to 21	
PS 2	4 years to < 5 years	2 to 11	
SA 1	School-Age to < 11 years	1 to 1	

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
No Moderate Risk Non-Compliances were observed during this inspection
and the same of th
Low Risk Non-Compliances

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

Code: The program is required to have the information listed in rule on all attendance records.

<u>Finding</u>: During the inspection, it was determined that the attendance records did not include the required information listed in number(s) 5 below:

1. The name of the child.

- 2. The birth date of the child.
- 3. The assigned group.
- 4. The child's weekly schedule.
- 5. The time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.

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

Corrective Action Plan Due: 06/03/2021

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

<u>Code</u>: The program is required to provide an environment that protects the children in care from any items and conditions that may threaten their health, safety, and well-being.

<u>Finding</u>: Children in care shall be protected from any items and conditions which threaten their health, safety, and well-being. During the inspection, it was determined that children were not protected from the following item(s) or condition(s) which may threaten their health, safety, or well-being as noted in number(s) 12 below:

- 1. Open pull cords that are not closed loop.
- 2. Telephone cords.
- 3. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
- 4. Stacked chairs.
- 5. Employee(s) purse(s).
- 6. Diaper bags.
- 7. Television not securely anchored.
- 8. Small or lightweight pieces of shelving units are not securely anchored to the wall.
- 9. Smoke detector needing batteries replaced.
- 10. Staff member stepped over a barrier/gate while holding a child.
- 11. Emergency exits were blocked by the following classroom furniture: [].
- 12. Other broken tile with sharp edges and large scissors accessible to children in the toddler 2 classroom.

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: 06/03/2021

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.

<u>Finding</u>: 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: 06/03/2021

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Space Requirements

<u>Code</u>: The program is required to have an outdoor play space free from general hazards.

<u>Finding</u>: During the inspection, it was determined that the following hazardous conditions existed in the outdoor play area, as noted in number(s) 6 below:

- 1. There was broken glass.
- 2. There were tall weeds.
- 3. There was poison ivy.
- 4. There were tree branches.
- 5. There was mold visible.
- 6. There were thistles with prickers.
- 7. There were bird droppings.
- 8. There were bolts with more than two threads exposed along a fence line or gate on a playground.
- 9. The sandbox was contaminated.
- 10. Other [].

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

Corrective Action Plan Due: 06/03/2021

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: 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(s) 3.

- 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: 06/03/2021

Domain: 08 Staff Files

Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements

Code: The program staff is required to have educational verification on file at the program.

<u>Finding</u>: In review of the staff records, it was determined that verification of a high school education was not on file for Child Care Staff Member(s) listed on the Employee Record Chart, as required. Submit the program's corrective action plan, which includes a copy of the verification of a high school education, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/03/2021

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

<u>Code</u>: The program staff medicals are required to be completed and on file at the program.

<u>Finding</u>: In review of the staff records, it was determined that completed medical examination statement(s) for the employee(s) listed on the Employee Record Chart [was/were] 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: 06/03/2021

Domain: 08 Staff Files

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

Code: The program is required to have staff complete the required one hour prescribed Child Abuse training.

<u>Finding</u>: In review of the staff records, it was determined that the requirement for the ODJFS one-hour prescribed Child Abuse Training was not met as noted in number(s) 2 below:

- 1. The training was not completed within sixty days of hire;
- 2. The training expired, as it is only valid for two years;
- 3. Not all administrators, Child Care Staff Members, and substitutes have completed the training.

Refer to the Employee Record Chart for the name(s) of the Child Care Staff Member(s) who must complete the ODJFS one-hour prescribed Child Abuse Training. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/03/2021

Domain: 09 Children's Files

Rule: 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(s) 5 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 parent information
- 4. Complete emergency contact information
- 5. Complete physician information
- 6. Information regarding the parent list
- 7. Health information
- 8. Additional information for all boxes checked "yes"
- 9. Emergency transportation information
- 10. Parent/guardian's signature
- 11. Diapering Statement
- 12. Acknowledgement of Policies and Procedures
- 13. Enrollment form for at least one child was not updated by either the parent or the administrator
- 14. Enrollment form for at least one child was not signed by the administrator
- 15. 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.

Domain: 09 Children's Files

Rule: 5101:2-12-15 Child Medical and Enrollment Records

<u>Code</u>: The program is required to have a completed medical on file at the program for each child enrolled.

<u>Finding</u>: In review of 25% of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in number(s)1, 2 below:

- 1. No medical was on file for at least one child
- 2. Medical(s) on file were not updated every 13 months
- 3. Medical(s) were missing child's name and date of birth
- 4. Medical(s) were missing the date of the medical examination
- 5. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care
- 6. Medical(s) were missing the signature, business address and telephone number of the physician, physician's assistant(PA), advance practice nurse (APN) or certified nurse practitioner (CNP) who examined the child
- 7. Medical(s) were missing a record of immunizations the child has had specifying month, day and year
- 8. Medical(s) were missing a statement from the physician, PA, APN, or CNP that the child has been immunized or is in the process of being immunized against the diseases required by division 5104.014 of the Revised Code and found in appendix A to this rule
- 9. Medical(s) were missing a statement from the child's parent or guardian that he or she has declined to have the child immunized against the disease for reasons of



conscience, including religious convictions 10. Other []

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

Corrective Action Plan Due: 06/03/2021

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Meal and Snack	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Handwashing	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Fire Approval	Compliant	Documenting Statement: Please Note: An
		annual fire inspection approval must be
		secured for the program. Secure a new
		approval by 1/09/22.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of	Compliant	
Communicable Disease		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free	Compliant	
Environment		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	
Qualifications		



Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-14 Transportation -	Compliant	Documenting Statement: The driver(s)
Driver Requirements		had completed the required ODJFS driver
		training.
		t.ag.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Written Disaster Plan	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Food License	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Sanitary Equipment and	Compliant	bocamenting statement(s), it applicable
Environment	Comphanic	
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	0 (" 11
	'	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-22 Fluid Milk	Compliant	Documenting Statement: All
Requirements		infants/toddlers were served
		formula/milk in sufficient amounts to
		meet the nutritional requirements.
		D C
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard Precautions	Compliant	
Frecautions		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	bocamenting statement(3), if applicable
======================================	35	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food	Compliant	
Handling/Storage		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Written Program	Compliant	
Policies and Procedures		
Dula	Chahua	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
Nuic	Status	Documenting Statement(s), it applicable

oeginning:	T	1
5101:2-12-16 Emergency Drills	Compliant	
Dula.	Chabus	Desimenting Statement(s) If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Materials and	Compliant	
Equipment		
	T	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Equipment	Compliant	
	T	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	
5.1.	Chahara	Described Chatamant/a) If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Building Approval	Compliant	
Dul-	Chahus	Desimenting Statement(s) If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	
Rule	Status	Documenting Statement(s), If applicable
		Documenting Statement(s), if applicable
5101:2-12-19 Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 Current Information	Compliant	Documenting statement(s), it applicable
3101.2-12-02 Current information	Compilant	
	<u> </u>	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-23 Infant Bottle and Food	Compliant	Bootimenting statement(s), it approach
Preparation	Compilant	
Fieparation		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Schedule	Compliant	Documenting statement(s), it applicable
3101.2-12-17 Daily Schedule	Compilant	
	L	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cots and Napping	Compliant	Documenting statement(s), it applicable
3101.2 12 20 Cots and Napping	Compilant	
	<u> </u>	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-23 Infant Daily Care	Compliant	Booking out on the first of the
JIOI.2 12 23 mant bany care	Compilation	
	L	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Equipment	Compliant	Booking sweet (-),
3101.2 12 12 3010 1quip	Compliant	
	L	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Medical/Physical	Compliant	Documenting Statement: The program
Care Plans		had current information on the medical
		status and the required treatment plan
		for the children with health conditions.
		Tor the children with health conditions.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cribs	Compliant	
	·	
	1	
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
5101:2-12-08 Orientation and Staff	Compliant	bocumenting statement(s), if applicable
Records	Compnant	
Necolus		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-10 Professional	Compliant	bocumenting statement(s), if applicable
Development Requirements	Compliant	
Development Requirements		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-14 Transportation -	Compliant	Documenting Statement: An annual
Vehicle Requirements	Compilant	safety check of the vehicle(s), using the
vernere negamentes		JFS 01230 "Vehicle Inspection Report For
		Child Care Centers" form, were verified
		and dated 7/23/20, 7/24/20
		and dated 7/25/20, 7/2 1/20
Rule: 5101:2-12-14 Transportation -	Compliant	Documenting Statement: During the
Vehicle Requirements	'	inspection, weekly safety inspections
'		and/or monthly emergency exiting drills
		were completed and documented, as
		required [using the ODJFS sample form].
	•	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-14 Transportation and	Compliant	Documenting Statement: The driver(s)
Field Trip Procedures		had current and valid training in first aid,
		management of communicable disease,
		and CPR.
	T 6	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury	Compliant	
Reporting		
Pulo	Status	Documenting Statement(s) If a militable
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
5101:2-12-18 Group Size	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child
	·	ratios observed during the inspection
		were in compliance.
	I a	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-23 Diapering and Toilet Training	Compliant	Documenting Statement: Appropriate diaper changing procedures were
Toller training		observed during the inspection in the
		[infant/toddler] room(s).
		[a.r.y todaici j room(s).
	ı	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-25 Medication	Compliant	Documenting Statement: The program's
Administration and Food Supplements		policy was not to administer medication.
Pulo	Chatus	Decumenting Statement(s) If applicable
Rule: 5101:2-12-09 Background Check	Status Compliant	Documenting Statement(s), If applicable Documenting Statement: During the
Requirements	Compilant	inspection, the required documentation
Requirements		regarding background checks was on file
		for all employees listed.
		, , , , , , , , , , , , , , , , , , ,
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-03 Inspection	Compliant	
Requirements		
	Status	Documenting Statement(s) If applicable
Rule	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-12-07 Administrator	Status Compliant	Documenting Statement(s), If applicable
Rule		Documenting Statement(s), If applicable
Rule 5101:2-12-07 Administrator		Documenting Statement(s), If applicable Documenting Statement(s), If applicable
Rule 5101:2-12-07 Administrator Responsibilities/Requirements	Compliant	
Rule 5101:2-12-07 Administrator Responsibilities/Requirements Rule	Compliant	
Rule 5101:2-12-07 Administrator Responsibilities/Requirements Rule 5101:2-12-02.2 Transitional Pandemic Requirements	Compliant	Documenting Statement(s), If applicable
Rule 5101:2-12-07 Administrator Responsibilities/Requirements Rule 5101:2-12-02.2 Transitional Pandemic Requirements Rule	Status Compliant Status Status	Documenting Statement(s), If applicable Documenting Statement(s), If applicable
Rule 5101:2-12-07 Administrator Responsibilities/Requirements Rule 5101:2-12-02.2 Transitional Pandemic Requirements	Status Compliant	Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement: During the
Rule 5101:2-12-07 Administrator Responsibilities/Requirements Rule 5101:2-12-02.2 Transitional Pandemic Requirements Rule	Status Compliant Status Status	Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement: During the inspection, documents and/or
Rule 5101:2-12-07 Administrator Responsibilities/Requirements Rule 5101:2-12-02.2 Transitional Pandemic Requirements Rule	Status Compliant Status Status	Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement: During the inspection, documents and/or professional development as outlined in
Rule 5101:2-12-07 Administrator Responsibilities/Requirements Rule 5101:2-12-02.2 Transitional Pandemic Requirements Rule	Status Compliant Status Status	Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement: During the inspection, documents and/or



	Care Operations Following the Response to the Coronavirus (COVID-19) Pandemic", were not assessed. Requirements will be assessed according to the schedule outlined in CCCMTL No. 25. Please ensure all requirements are met and maintained on file for review.
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