

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	
ST STEPHEN KIDDIE COLLEGE NURSERY	000000301392		Child Care Center	
Address 905 E PERKINS AVE SANDUSKY OH 44870			County ERIE	
Building Approval Date	Use Group/Code	Occupancy Limit 90	Maximum Under 2 ½	
Fire Inspection Approval Date	Food Service Risk Level			
01/25/2021	Level II			

Inspection Information				
Inspection Type	Inspection S	cope	Inspection Notice	
Annual	Full		Unannounced	
Inspection Date 10/08/2021	Begin Time 8	3:30 AM	End Time 8:50 AM	
Inspection Date 10/15/2021	Begin Time 8	3:30 AM	End Time 10:59 AM	
Reviewer:				
Akeea Nelson				
Reviewer:				
Akeea Nelson				
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
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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	74	74
School Age		0	0	0
Total Capacity/Enrollment	90	0	74	74

	Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment	
Preschool 3	3 years to < 4 years	1 to 7	Arrival Ratio	
Preschool 3	3 years to < 4 years	1 to 7	Departure Ratio	
Preschool 4	3 years to < 4 years	1 to 10	Arrival Ratio	
Preschool 4	3 years to < 4 years	1 to 10	Departure Ratio	
Preschool 5	4 years to < 5 years	1 to 7	Arrival Ratio	
Preschool 5	4 years to < 5 years	1 to 7	Departure Ratio	

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 Carious Dials Non-Compliances were absorbed during this inspection		
No Serious Risk Non-Compliances were observed during this inspection		
Moderate Risk Non-Compliances		
No Madagete Bisk New Compliances were absorbed device this increasion		
No Moderate Risk Non-Compliances were observed during this inspection		

Low Risk Non-Compliances

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(s) 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: 11/14/2021

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	Documenting Statement(s), if applicable
Requirements	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Fire Approval	Compliant	Journal of the control of the contro
PI PI		
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
5101:2-12-08 Child Care Staff Member	Compliant	Documenting Statement(s), it applicable
Educational Requirements	Compilant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Written Disaster Plan	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Food License	Compliant	Documenting Statement: The food service
		license was observed posted. Following is
		the audit number and date of expiration: KLAN-BYGMRP 3/1/22.
		KLAIV-BIGIVIKF 3/1/22.
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Sanitary Equipment and	Compliant	
Environment		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Fluid Milk Requirements	Compliant	Boomening statement(s), it applicable

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard	Compliant	
Precautions		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food	Compliant	
Handling/Storage		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Written Program	Compliant	
Policies and Procedures		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Emergency Drills	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	
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Building Approval	Compliant	
Pula	Status	Documenting Statement(s) If anylinghis
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
5101:2-12-19 Supervision	Compliant	bocumenting statement(s), if applicable
3101.2 12 13 Supervision	Compliant	
Rule	Status	Documenting Statement(s) If applicable
Rule 5101:2-12-02 Current Information	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-12-02 Current Information	Status Compliant	Documenting Statement(s), If applicable
		Documenting Statement(s), If applicable
	Compliant	
5101:2-12-02 Current Information		Documenting Statement(s), If applicable Documenting Statement(s), If applicable

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cots and Napping	Compliant	U
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Child Medical and	Compliant	
Enrollment Records		
2.1		D C
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Medical/Physical Care	Compliant	- commence of the second
Plans	'	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Orientation and Staff	Compliant	
Records		
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		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Environment	Compliant	Documenting Statement(s), if applicable
3101.2 12 12 3dre Environment	Compilant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury	Compliant	
Reporting		
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 Attendance Records	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Group Size	Compliant	outstanding) is approach
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.
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-25 Medication	Compliant	
Administration and Food Supplements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-09 Background Check	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-03 Inspection	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	
Responsibilities/Requirements		