



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 LAKEVIEW PRESCHOOL CENTER	Program Number 000000302631	Program Type Child Care Center	
Address 591 FERNDALE AVE VERMILION OH 44089		County LORAIN	
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date 08/12/2021	Food Service Risk Level Exempt		

Inspection Information		
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 02/07/2022	Begin Time 8:30 AM	End Time 1:30 PM
Reviewer: ELAINE OBRIEN		

Summary of Findings				
No. Rules Verified 58	No. Rules with Non-compliances 9	No. Serious Risk 0	No. Moderate Risk 1	No. Low Risk 10

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	15	15
School Age		0	0	0
Total Capacity/Enrollment	36	0	15	15

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
PS 3's	3 years to < 4 years	1 to 7	Arrival



PS 3's	3 years to < 4 years	1 to 7	Programming
PS 4's	4 years to < 5 years	1 to 7	Arrival
PS 4's	4 years to < 5 years	0 to 7	Children left unattended in hallway

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(s) 1 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: 03/09/2022

Low Risk Non-Compliances

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(s) 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: 03/09/2022



Domain: 03 Postings & Equipment

Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan
Code: The program is required to post the fire and weather plans.

Finding: During the inspection, it was determined that the following information was not posted for item number(s) 3 below:

1. Fire alert plan, including a diagram indicating evacuation routes.
2. Weather alert plan was missing details for [].
3. Weather alert plan was missing a diagram indicating evacuation routes.

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

Corrective Action Plan Due: 03/09/2022

Domain: 03 Postings & Equipment

Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan
Code: The program is required to have the JFS 01201 "Dental First Aid" posted in a readily available area at the program.

Finding: During the inspection it was determined that the current version JFS 01201 "Dental First Aid" was not posted in a location readily available to center staff and parents as required. 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(s) 1 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: 03/09/2022

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(s) 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: 03/09/2022

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to include all information.

Finding: 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: 03/09/2022

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 number(s) 2,3,4,5,6 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: 03/09/2022



Domain: 08 Staff Files

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

Code: The program is required to maintain a current JFS 01176 "Program Notification of Background Check Review for Child Care" on file for each staff.

Finding: In review of the staff records, it was determined that background check requirements had not been followed, for the individual(s) listed on the Employee Record Chart, as noted in number(s) 2 below:

1. The JFS 01176 Program Notification of Background Check Review for Child Care the program received from the Department was not on file and the individual was not left alone with children.
2. The JFS 01177 Individual Notification of Background Check Review for Child Care was on file instead of the JFS 01176.
3. The JFS 01176 on file was for a different program.

Submit the program's corrective action plan, which includes a statement that the correct form is now on file, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/09/2022

Domain: 10 Written Policies & Procedures

Rule: 5101:2-12-07 Written Program Policies and Procedures

Code: The program is required to provide appendix C to all parents of the children enrolled.

Finding: During the inspection, it was determined that parent(s) of the children enrolled in the program were not provided with a copy of Appendix C to this rule. 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: 10 Written Policies & Procedures

Rule: 5101:2-12-16 Written Disaster Plan

Code: The program is required to have a written disaster plan.

Finding: During the inspection, it was determined the program's written disaster plan did not meet the requirement or was missing the information in number(s) 19 below:

Procedures:



1. The written disaster plan had not been completed
 2. The plan was not provided to all child care staff and employees
 3. The plan was not used to respond to an emergency or disaster situation
 4. Weather emergencies and natural disasters which include severe thunderstorms, tornadoes, flash flooding, major snowfall, blizzards, ice storms or earthquakes
 5. Emergency outdoor and indoor lockdown or evacuation due to threats of violence which includes active shooter, bioterrorism or terrorism
 6. Emergency or disaster evacuations due to hazardous materials and spills, gas leaks or bomb threats.
 7. Outbreaks, epidemics or other infectious disease emergencies
 8. Loss of power, water, or heat
 9. Other threatening situations that may pose a health or safety hazard to the children in the program
- Details:
10. Shelter in place or evacuation, how the program will care for and account for the children until they can be reunited with the parent
 11. Assisting infants and children with special needs and/or health conditions
 12. Emergency contact information for parents and the program
 13. Procedures for notifying and communicating with parents regarding the location of the children if evacuated
 14. Procedures for communicating with parents during loss of communications, no phone or internet service available
 15. The location of supplies and procedures for gathering necessary supplies for staff and children if required to shelter in place
 16. What to do if a disaster occurs during the transport of children or when on a field trip or routine trip
 17. Making the plan available to all child care staff members and employees
 18. Training of staff or reassignment of staff duties as appropriate
 19. Updating the plan on a yearly basis
 20. Contact with local emergency management officials

Make the necessary revisions to the disaster plan. Submit the program’s corrective action plan, which includes the revised information, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/09/2022

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 Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Building Department Inspection	Compliant	Documenting Statement: The building approval listed the following stipulation(s)/limitation(s): Yellow Room (4-6 yrs,) 15 Blue Room (4-5yrs) - 12 ,Red Room (3-4) years- 13.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Fire Inspection	Compliant	Documenting Statement: Please Note: Documentation of a fire inspection without any uncorrected violations must be secured for the program. Secure a new fire inspection by August 12, 2022.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Food Service Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator Qualifications	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements	Compliant	Documenting Statement: All Child Care Staff Members had verification of educational requirements on file at the program.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-10 Health Training Requirements	Compliant	Documenting Statement: The program had at least one Child Care Staff Member with currently valid training in First Aid, Management of Communicable Disease, CPR, and Child Abuse Prevention present and readily accessible during all hours of operation.
Rule	Status	Documenting Statement(s), If applicable



Rule: 5101:2-12-10 Professional Development Requirements	Compliant	Documenting Statement: At the time of the inspection, all child care staff members had completed the required amount of professional development training.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-12 Safe Equipment	Compliant	Documenting Statement: Equipment was observed to be in good condition.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Environment	Compliant	
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
5101:2-12-13 Handwashing Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Child Medical and Enrollment Records	Compliant	Documenting Statement: At the time of the inspection, 25% of the children's records were reviewed, and the records were complete, as required by the rule.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Medical/Physical Care Plans	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 First Aid/Standard Precautions	Compliant	Documenting Statement: During the inspection, the program had complete first aid kits available as required.



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of Communicable Disease	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Incident/Injury Reporting	Compliant	Documenting Statement: The JFS 01299 "Incident/Injury Report For Child Care" forms reviewed during this inspection were complete as required.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-17 Daily Schedule	Compliant	Documenting Statement: Daily schedules were observed posted.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-17 Materials and Equipment	Compliant	Documenting Statement: Sufficient equipment was observed in all categories.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 License Capacity	Compliant	Documenting Statement: The program was operating within their license capacity limits.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Ratio	Compliant	Documenting Statement: The Appendix A "Staff/Child Ratios, Age Grouping and Maximum Group Size" was posted in a noticeable area at the program as required.
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
5101:2-12-25 Medication Administration	Compliant	