

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 | ails | |
|---|---------------------|-----------------|--------------------|
| Program Name | Program Number | | Program Type |
| HOLY FAMILY CHILD DAY CARE CENTER | 000000304652 | | Child Care Center |
| Address 7367 YORK RD PARMA OH 44130 | | | County CUYAHOGA |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ |
| Fire Inspection Approval Date 05/17/2021 | Food Service Risk L | evel | - |

| Inspection Information | | | | |
|----------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type | Inspection So | cope | Inspection Notice | |
| Annual | Full | | Unannounced | |
| Inspection Date 03/30/2022 | Begin Time 9 | :00 AM | End Time 3:30 PM | |
| Reviewer: DIANE TRACZYK | | | | |
| Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58 | 5 | 0 | 0 | 6 |

| 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) | | 12 | 1 | 13 |
| Young Toddler | | 7 | 5 | 12 |
| Total Under 2 ½ Years | 70 | 19 | 6 | 25 |
| Older Toddler | | 5 | 2 | 7 |
| Preschool | | 29 | 8 | 37 |
| School Age | | 0 | 0 | 0 |
| Total Capacity/Enrollment | 131 | 34 | 10 | 69 |

| Staff-Child Ratios at the Time of Inspection | | | |
|--|------------------|----------------|---------|
| Group | Age Group/Range | Ratio Observed | Comment |
| Infant 1 | 0 to < 12 months | 2 to 6 | 1st |

| Infant 1 | 0 to < 12 months | 4 to 6 | 2nd |
|----------------------|--------------------------|---------|---|
| Infant 2 | 0 to < 12 months | 1 to 4 | 1st |
| Infant 2 | 0 to < 12 months | 2 to 4 | 2nd |
| Toddler 1 | 18 months to < 30 months | 1 to 5 | 1st |
| Toddler 1 | 18 months to < 30 months | 2 to 12 | 2nd - combined with Toddler 2 for lunch |
| Toddler 2 | 18 months to < 30 months | 1 to 5 | 1st |
| Toddler 3 | 18 months to < 30 months | 1 to 7 | 1st |
| Toddler 3 | 18 months to < 30 months | 1 to 6 | 2nd - nap |
| Preschool (room 107) | 3 years to < 4 years | 1 to 10 | 1st |
| Pre-K (room 108) | 4 years to < 5 years | 2 to 17 | 1st - outside |
| Pre-K (room 108) | 4 years to < 5 years | 2 to 14 | 2nd - nap |

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 Sorious Disk Non Compliances were observed during this inspection | | | |
| No Serious Risk Non-Compliances were observed during this inspection | | | |
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Low Risk Non-Compliances

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 numbers 1 & 2

- 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: 04/29/2022

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.

<u>Finding</u>: 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: 04/29/2022

Domain: 08 Staff Files

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

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

<u>Finding</u>: 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: 04/29/2022

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: 04/29/2022

Domain: 09 Children's Files

Rule: 5101:2-12-25 Medication Administration

<u>Code</u>: The program is required to use the appropriate form and retain current documentation to administer medications, medical foods and topical products. The program is also required to obtain separate documentation for each medication/product and child.

<u>Finding</u>: During the inspection, it was determined the program did not meet the requirements for the JFS 01217 "Request for Administration of Medication for Child Care" as noted in number 2 & 6 below:

- 1. The program used an old version of the JFS 01217.
- 2. The signature date on the JFS 01217 exceeded more than 12 months.
- 3. The time period to administer the medication or medical food on the JFS 01217 was exceeded.
- 4. The JFS 01217 included more than one medication or medical food.
- 5. The JFS 01217 included more than one child's name.
- 6. The prescription label was not current.

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

Corrective Action Plan Due: 04/29/2022

Domain: 09 Children's Files

Rule: 5101:2-12-25 Medication Administration

<u>Code</u>: The program staff is required to obtain signed written permission prior to administering topical products and lotions other than hand sanitizer to be used by children older than twenty-four months and lip balm.

<u>Finding</u>: During the inspection, it was determined the program did not obtain signed written permission from the parent prior to administering topical products and lotions, other than hand sanitizer to be used by children older than twenty-four months and lip balm. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/29/2022

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 |
| 110.10 | 510100 | Documenting Statement(s), if applicable |
| 5101:2-12-03 Inspection | Compliant | |
| Requirements | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Building Department | Compliant | Documenting Statement(s), if applicable |
| | Compilant | |
| Inspection | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Fire Inspection | Compliant | Documenting Statement: Please Note: |
| Naic. 5101.2 12 04 Fire inspection | Compliant | Documentation of a fire inspection |
| | | without any uncorrected violations must |
| | | be secured for the program. Secure a |
| | | new fire inspection by 5/17/22. |
| | | new life inspection by 5/17/22. |
| | | |
| 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. Following is date of expiration: 3/1/23. |
|---|-----------|---|
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-05 Denial, Revocation and Suspension | Compliant | Documenting Statement(s), if applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator Qualifications | Compliant | , , , , , , , , , , , , , , , , , , , |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator Responsibilities/Requirements | Compliant | <u> </u> |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-07 Written Program Policies and Procedures | Compliant | Documenting Statement: No changes have been made to the written policies and procedures since it was last approved by this Department. |
| | | |
| 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. |
| P. J. | Chahara | |
| Rule: 5101:2-12-09 Background Check Requirements | Compliant | Documenting Statement(s), If applicable Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed. |
| 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 |
| 5101:2-12-11 Outdoor Space Requirements | Compliant | Documenting Statement(3), ii applicable |

| Rule | Status | Documenting Statement(s), If applicable |
|--------------------------------------|-----------|---|
| Rule: 5101:2-12-11 Outdoor Play | Compliant | Documenting Statement: All equipment in |
| Equipment | oopa | the outdoor play space was observed to |
| Equipment | | be anchored and stable. |
| | | be anchored and stable. |
| Rule: 5101:2-12-11 Outdoor Play | Compliant | Documenting Statement: Outdoor |
| Equipment | Compliant | equipment was viewed to be safe and |
| Equipment | | free of rust, sharp points, and other |
| | | hazards. |
| | | Hazarus. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Play Fall | Compliant | Documenting Statement: The protective |
| Zones | Compilant | material used under outdoor equipment |
| Zones | | was poured rubber. |
| | | was poureu rubber. |
| L | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Equipment | Compliant | bocumenting statement(3), ii applicable |
| 3101.2 12 12 3are Equipment | Compilant | |
| | <u> </u> | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Environment | Compliant | |
| | F | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Sanitary Equipment and | Compliant | |
| Environment | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Handwashing | Compliant | |
| Requirements | | |
| | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Smoke Free | Compliant | - |
| Environment | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Toothbrushing | Compliant | , , , |
| Requirements | | |
| • | 1 | ı |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-15 Child Medical and | Compliant | Documenting Statement: At the time of |
| Enrollment Records | | the inspection, 20 of the children's |
| | | records were reviewed, and the records |
| | | were complete, as required by the rule. |
| | | were complete, as required by the rule. |
| L | | <u> </u> |
| Rule | Status | Documenting Statement(s), If applicable |
| Nuic | Status | bocamenting statement(s), if applicable |

| Designating: | 1 | |
|---------------------------------------|-----------|---|
| Rule: 5101:2-12-15 Medical/Physical | Compliant | Documenting Statement: During the |
| Care Plans | | inspection, the requirements of the rule |
| | | regarding caring for children with a |
| | | specific health condition were discussed. |
| | | · |
| | | <u>.</u> |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Medical, Dental, | Compliant | Documenting Statement: On the day of |
| and General Emergency Plan | | the inspection, the complete prescribed |
| | | JFS 01242 "Medical, Dental, and General |
| | | Emergency Plan For Child Care" were |
| | | posted in the program as required. |
| | | posted in the program as required |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Emergency Drills | Compliant | Documenting Statement: Documentation |
| 3 = 5 = | F 1 | for completed fire, weather, and |
| | | emergency/lockdown drills was verified |
| | | during this inspection. |
| | | during this hispection. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 First Aid/Standard | Compliant | Documenting Statement: During the |
| Precautions | Compliant | inspection, the program had complete |
| riecautions | | first aid kits available as required. |
| | | ilist alu kits avallable as required. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Management of | Compliant | Documenting Statement: The JFS 08087 |
| Communicable Disease | ' | "Communicable Disease Chart" was |
| | | posted and was readily available to staff |
| | | and parents. |
| | | and parents. |
| L | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Incident/Injury | Compliant | (-/// |
| Reporting | | |
| <u> </u> | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Written Disaster Plan | Compliant | and a series of the series of |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-17 Daily Schedule | Compliant | Documenting Statement: Daily schedules |
| , | · . | were observed posted. |
| | | p |
| Rule: 5101:2-12-17 Daily Schedule | Compliant | Documenting Statement: During the |
| | | inspection, developmentally-appropriate |
| | | practices were observed in the |
| | | classroom(s). |
| | | ciassiouiii(s). |

| Beginning! | | |
|---------------------------------------|-----------|---|
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-17 Materials and | Compliant | Documenting Statement: Sufficient |
| Equipment | | equipment was observed in all categories. |
| | | |
| | _ | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-17 Daily Outdoor Play | Compliant | Documenting Statement: Outdoor play |
| | | was observed for the Pre-K group. |
| | | |
| | T | |
| 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 | Decumenting Statement(s) If applicable |
| Rule: 5101:2-12-18 Ratio | | 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 |
| Nuie. 5101.2-12-18 Natio | Compliant | ratios observed during the inspection |
| | | were in compliance. |
| | | were in compliance. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 Group Size | Compliant | Documenting Statement: The group sizes |
| | | observed on the day of the inspection |
| | | were in compliance. |
| | | |
| | L | |
| 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 |
| Rule: 5101:2-12-19 Supervision | Compliant | Documenting Statement: Child Care Staff |
| | | Members were supervising the children |
| | | and were able to intervene as needed. |
| | | |
| | | |
| 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. |
|---|-----------|--|
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-20 Cots and Napping | Compliant | Documenting Statement: The rest area had adequate lighting, which allowed for the visual supervision of children. |
| Rule: 5101:2-12-20 Cots and Napping | Compliant | Documenting Statement: Cots were placed appropriately and safely during nap time. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-20 Cribs | Compliant | Documenting Statement: All cribs were placed 2 feet apart. |
| Rule: 5101:2-12-20 Cribs | Compliant | Documenting Statement: Cribs were separated from the play space by a safe and sturdy and physical barrier. |
| Rule: 5101:2-12-20 Cribs | Compliant | Documenting Statement: All cribs were labeled with the assigned infant's name. |
| Dula | Chahua | Design orting (total results) If an alicela |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-22 Meal and Snack Requirements | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding meals and snacks were discussed. |
| | | |
| 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 | bocamenting statement(s), it applicable |
| Handling/Storage | Compilant | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-23 Infant Daily Care | Compliant | Documenting Statement: An appropriate program of activities with infants was observed. |
| Rule | Status | Documenting Statement(s), If applicable |
| Nule | Status | Documenting statement(s), if applicable |



| umenting Statement(s), If applicable |
|--|
| |
| umenting Statement: During the ection, there was discussion cerning diapering routines. Child-care findicated diapers were changed at ropriate intervals throughout the day. |
| F |