

# **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 <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. 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            | ils             |                   |
|-------------------------------------------------------------|-------------------------|-----------------|-------------------|
| Program Name                                                | Program Number          |                 | Program Type      |
| HEART OF VALLEY CHRISTIAN PRESCHOOL                         | 000000305584            |                 | Child Care Center |
| Address<br>17560 CHILLICOTHE ROAD CHAGRIN FALLS<br>OH 44023 |                         |                 | County<br>GEAUGA  |
| Building Approval Date<br>10/23/2000                        | Use Group/Code<br>A-4   | Occupancy Limit | Maximum Under 2 ½ |
| Fire Inspection Approval Date                               | Food Service Risk Level |                 |                   |
| 08/29/2017                                                  | Exempt                  |                 |                   |

| Inspection Information     |                                |                  |                   |              |
|----------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type            | Inspection Sc                  | cope             | Inspection Notice |              |
| Follow-up                  | Full                           |                  | Unannounced       |              |
| Inspection Date 04/04/2022 | Begin Time 9                   | :00 AM           | End Time 12:20 PM |              |
| Reviewer:                  |                                |                  | ·                 |              |
| Kathryn Noftz              |                                |                  |                   |              |
| Summary of Findings        |                                |                  |                   |              |
| No. Rules Verified         | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58                         | 6                              | 0                | 1                 | 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)                                  |                  | 0          | 0         | 0     |
| Young Toddler                                             |                  | 0          | 2         | 2     |
| Total Under 2 ½ Years                                     | 12               | 0          | 2         | 2     |
| Older Toddler                                             |                  | 0          | 8         | 8     |
| Preschool                                                 |                  | 0          | 37        | 37    |
| School Age                                                |                  | 0          | 0         | 0     |
| Total Capacity/Enrollment                                 | 107              | 0          | 45        | 47    |

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

| 3's         | 3 years to < 4 years | 1 to 7  |  |
|-------------|----------------------|---------|--|
| 4's         | 4 years to < 5 years | 2 to 12 |  |
| 4's         | 4 years to < 5 years | 2 to 12 |  |
| Pre-K       | 4 years to < 5 years | 2 to 11 |  |
| Pre-K       | 4 years to < 5 years | 2 to 11 |  |
| 3's M,T, TH | 3 years to < 4 years | 1 to 4  |  |
| 3's M,T, TH | 3 years to < 4 years | 1 to 4  |  |

### **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.

| Sovious Bick Non Compliances                                         |  |  |
|----------------------------------------------------------------------|--|--|
| Serious Risk Non-Compliances                                         |  |  |
| No Serious Risk Non-Compliances were observed during this inspection |  |  |
|                                                                      |  |  |
|                                                                      |  |  |
|                                                                      |  |  |
|                                                                      |  |  |
|                                                                      |  |  |
|                                                                      |  |  |
|                                                                      |  |  |
|                                                                      |  |  |
|                                                                      |  |  |

## **Moderate Risk Non-Compliances**

Domain: 09 Children's Files

Rule: 5101:2-12-25 Medication Administration

<u>Code</u>: The program is required to store medication out of the reach of children.

<u>Finding</u>: During the inspection, it was determined that a medication, Alka-seltzer tablets, was within the reach of children in the 3's room. All medications must be stored out of the reach of children. Create procedures that assure medications will always be inaccessible to children. 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: 05/04/2022

#### **Low Risk Non-Compliances**

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

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

<u>Finding</u>: 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(s) 2,11 below:

- 1. Cosmetics;
- 2. Disinfecting wipes; Clorox 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- Opti-free contact solution.

The potentially hazardous substance was determined to be accessible to children in the following area: 3's classroom.

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: 05/04/2022

#### **Domain: 04 Indoor/Outdoor Space**

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

Code: The program is required to conduct and document quarterly inspections of their outdoor play space.

<u>Finding</u>: During the inspection, it was determined that quarterly inspections of one or more outdoor play area(s) and equipment had not been completed and documented as required, using the JFS 01281 "Child Care Playground Inspection Report" form. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/04/2022

Domain: 04 Indoor/Outdoor Space

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

<u>Code</u>: The program is required to provide fall zones around equipment to prevent injury if a child were to fall.

<u>Finding</u>: During the inspection, it was determined that the little tikes castle/slide was positioned such that the fall zone requirement in number(s) 4 below was not met:

- 1. The fall zone was less than 3 feet from the fence for equipment used by children 23 months of age and younger.
- 2. The fall zone was less than 6 feet from the fence for equipment used by children 24 months of age and older.
- 3. There was not a fall zone of 3 feet in all directions from the perimeter of the equipment used by children 23 months of age and younger.
- 4. There was not a fall zone of 6 feet in all directions from the perimeter of the equipment used by children 24 months of age and older.
- 5. The fall zone was less than 4 1/2 feet from each piece of applicable equipment used by children 23 months of age and younger.
- 6. The fall zone was less than 9 feet from each piece of applicable equipment used by children 24 months of age and older.
- 7. Other [ ].

The program is required to provide equipment that is safe with adequate fall zones. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/04/2022

#### 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(s) 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: 05/04/2022

#### 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) 4,10,13 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.

Domain: 09 Children's Files

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

Code: 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) 6,7 below:

- 1. No medical was on file for at least one child
- 2. Medical(s) on file was 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. The date of the exam was more than 13 months prior to the date the form was signed.
- 6. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care
- 7. 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
- 8. Medical(s) were missing a record of immunizations the child has had specifying month, day and year
- 9. 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
- 10. 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

11. Other [ ]

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

Corrective Action Plan Due: 05/04/2022

## **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 5101:2-12-03 Inspection                               | Status Compliant    | Documenting Statement(s), If applicable                                                                                                                                                                                                                                                                                                                                                                                  |
| Requirements                                               |                     |                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Rule                                                       | Status              | Documenting Statement(s), If applicable                                                                                                                                                                                                                                                                                                                                                                                  |
| 5101:2-12-04 Building Department Inspection                | Compliant           |                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 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 7-8-22.                                                                                                                                                                                                                                       |
| Rule: 5101:2-12-04 Fire Inspection                         | Compliant           | Documenting Statement: Although the program had documentation of a current fire inspection without any uncorrected violations at the time of the licensing inspection, the program did not have the fire inspection completed within 12 months from the date of the last fire inspection without any uncorrected violations. Please ensure that fire inspections are completed in accordance with the rule requirements. |
| Dula                                                       | Chahara             | Decree of the Chateron of the Indian Indian                                                                                                                                                                                                                                                                                                                                                                              |
| Rule: 5101:2-12-04 Food Service                            | Status<br>Compliant | Documenting Statement(s), If applicable  Documenting Statement: The program                                                                                                                                                                                                                                                                                                                                              |
| Requirements                                               | Compliant           | has obtained a food service exemption status from the local health department.                                                                                                                                                                                                                                                                                                                                           |
| Rule                                                       | Status              | Documenting Statement(s), If applicable                                                                                                                                                                                                                                                                                                                                                                                  |
| 5101:2-12-07 Administrator<br>Qualifications               | Compliant           |                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Rule                                                       | Status              | Documenting Statement(s), If applicable                                                                                                                                                                                                                                                                                                                                                                                  |
| 5101:2-12-07 Administrator Responsibilities/Requirements   | Compliant           |                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 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.                                                                                                                                                                                                                                                                                   |

| Deglinating:                            |           |                                         |
|-----------------------------------------|-----------|-----------------------------------------|
|                                         |           |                                         |
|                                         |           |                                         |
| Rule                                    | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-08 Medical Statement          | Compliant |                                         |
|                                         |           |                                         |
| <br>                                    |           |                                         |
| Rule                                    | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-08 Child Care Staff Member    | Compliant |                                         |
| Educational Requirements                |           |                                         |
| ·                                       |           |                                         |
| Rule                                    | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-08 Orientation Training &     | Compliant | 0                                       |
| Whistle Blower Protection               |           |                                         |
| *************************************** | <u> </u>  |                                         |
| Rule                                    | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-09 Background Check           | Compliant | bocumenting statement(s), it applicable |
| Requirements                            | Compliant |                                         |
| Requirements                            |           |                                         |
| Dula                                    | Chahus    | Decumenting Statement(s) If applicable  |
| Rule                                    | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-11 Indoor Space               | Compliant |                                         |
| Requirements                            |           |                                         |
|                                         | T         |                                         |
| 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 |
| 5101:2-12-11 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     | Compliant |                                         |
| Environment                             |           |                                         |
|                                         |           | ·                                       |
| Rule                                    | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-13 Handwashing                | Compliant |                                         |
| Requirements                            | ,         |                                         |
|                                         | <u> </u>  |                                         |
| Rule                                    | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-13 Smoke Free                 | Compliant | Documenting statement(s), it approach   |
| Environment                             | Compilant |                                         |
| Elivironinent                           |           |                                         |
|                                         | Chatana   | Danier State and on the line has        |
| Rule                                    | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-15 Medical/Physical Care      | Compliant |                                         |
| Plans                                   |           |                                         |
|                                         |           |                                         |

|                                    |                     | ,                                       |
|------------------------------------|---------------------|-----------------------------------------|
| 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 |
| 5101:2-12-16 Emergency Drills      | Compliant           |                                         |
|                                    | •                   |                                         |
|                                    |                     |                                         |
| Rule                               | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-16 First Aid/Standard    | Compliant           |                                         |
| Precautions                        |                     |                                         |
|                                    | -                   |                                         |
| Rule                               | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-16 Management of         | Compliant           | 3 (" 11                                 |
| Communicable Disease               |                     |                                         |
|                                    |                     |                                         |
| Rule                               | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-16 Incident/Injury       | Compliant           | bounding statement(s), it applicable    |
| Reporting                          | Compilation         |                                         |
| I reporting                        |                     |                                         |
| Rule                               | Status              | Documenting Statement(c) If applicable  |
| 5101:2-12-16 Written Disaster Plan | Status<br>Compliant | Documenting Statement(s), If applicable |
| 2101.2-12-10 WHITTEH DISASTEL HALL | Compliant           |                                         |
|                                    |                     |                                         |
| Rule                               | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Schedule        | Compliant           | bocumenting statement(s), it applicable |
| Jioi.2-12-1/ Daily Schedule        | Compliant           |                                         |
|                                    | 1                   |                                         |
| Rule                               | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-17 Materials and         | Compliant           | 2 out the state months), it applies to  |
| Equipment                          | 30                  |                                         |
|                                    |                     |                                         |
| Rule                               | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-18 License Capacity      | Compliant           | Documenting Statement(s), it applicable |
| JIOI.Z-IZ-IO LICENSE CAPACILY      | Compliant           |                                         |
|                                    |                     |                                         |
| Rule                               | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-18 Ratio                 | Compliant           | bocumenting statement(s), it applicable |
| 3101.2 12 10 Natio                 | Compliant           |                                         |
|                                    | 1                   |                                         |
| Rule                               | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-18 Group Size            | Compliant           | bounding statement(s), it applicable    |
| 3101.2 12 10 Group 512C            | Compilation         |                                         |
|                                    |                     |                                         |
| Rule                               | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-18 Attendance Records    | Compliant           | bounding statement(s), it applicable    |
| 3101.2 12 10 Attendance Records    | Compilant           |                                         |
|                                    | 1                   |                                         |
| Rule                               | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-19 Supervision           | Compliant           | 2 out the state months), it applies to  |
|                                    |                     |                                         |
| -                                  | į                   |                                         |



| DI-                              | Chahua    |                                         |
|----------------------------------|-----------|-----------------------------------------|
| 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 Safe Food           | Compliant |                                         |
| Handling/Storage                 |           |                                         |
|                                  |           |                                         |
| Rule                             | Status    | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-23 Diapering and | Compliant | Documenting Statement: No children in   |
| Toilet Training                  |           | diapers were present during the         |
|                                  |           | inspection. There was discussion        |
|                                  |           | concerning diapering routines.          |
|                                  |           |                                         |
|                                  | •         |                                         |