

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 |
| DEDICATED TO CHILDREN EARLY LEARNING | 000000306059 | | Child Care Center |
| CENTER | | | |
| Address | | | County |
| 6970 HEISLEY ROAD MENTOR | | | LAKE |
| OH 44060 | | | |
| | | | |
| | | | <u>,</u> |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ |
| | E | | |
| Fire Inspection Approval Date | Food Service Risk L | evel | |
| 08/09/2021 | Level III | | |

| Inspection Information | | | | |
|------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type | Inspection Sc | cope | Inspection Notice | |
| Annual | Full | | Unannounced | |
| Inspection Date | Begin Time 1 | 0:35 AM | End Time 1:30 PM | |
| 11/16/2021 | | | | |
| Reviewer: | | | | |
| Brittani Aloi | rittani Aloi | | | |
| | Summary of Findings | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58 | 8 | 0 | 3 | 9 |

| 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) | | 10 | 0 | 10 |
| Young Toddler | | 6 | 0 | 6 |
| Total Under 2 ½ Years | 37 | 16 | 0 | 16 |
| Older Toddler | | 8 | 0 | 8 |
| Preschool | | 11 | 1 | 12 |
| School Age | | 0 | 5 | 5 |
| Total Capacity/Enrollment | 83 | 19 | 6 | 41 |

| Staff-Child Ratios at the Time of Inspection | | | |
|--|------------------|----------------|---------|
| Group | Age Group/Range | Ratio Observed | Comment |
| Infants | 0 to < 12 months | 2 to 8 | |

| Infants | 0 to < 12 months | 2 to 8 | |
|-----------|--------------------------|---------|-------------------|
| Toddlers | 18 months to < 30 months | 1 to 6 | |
| Toddlers | 18 months to < 30 months | 2 to 12 | combined with |
| | | | Preschool for nap |
| Preschool | 30 months to < 36 months | 1 to 7 | |
| Preschool | 3 years to < 4 years | 2 to 12 | combined with |
| | | | toddlers for nap |
| PreK/SA | 3 years to < 4 years | 1 to 10 | |
| PreK/SA | 3 years to < 4 years | 1 to 10 | |

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 | | |
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Moderate Risk Non-Compliances

Domain: 07 Diapering & Infant Care

Rule: 5101:2-12-20 Cribs

<u>Code</u>: The program is required to place infants in cribs while sleeping.

<u>Finding</u>: During the inspection, it was determined that the equipment in number(s) 10 below had been used for sleeping infants and did not allow the infant to sleep on a firm mattress:

- 1. Mesh cribs;
- 2. Play pens;
- 3. Bassinets;
- 4. Cots;
- 5. Car seats;
- 6. Infant swing;
- 7. The floor;

- 8. Infant seats;
- 9. An infant placed in a car seat in a crib;
- 10. Other-infant bouncer seat.

Infants must be provided with a crib, which meets requirements specified in this rule, for resting and sleeping. Provide staff training. Submit the program's corrective action plan, which includes a statement that staff training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/26/2021

Domain: 09 Children's Files

Rule: 5101:2-12-25 Medication Administration

Code: 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, epi-pen, was within the reach of children in the PreK/SA 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: 12/26/2021

Domain: 09 Children's Files

Rule: 5101:2-12-15 Medical/Physical Care Plans

<u>Code</u>: The program is required to have a completed JFS 01236 "Child Medical/Physical Care Plan for Child Care" on file at the program for any child having a health condition. The program is required to implement and/or follow instructions on the JFS 01236 for a child with a health condition.

<u>Finding</u>: A written, signed and dated JFS 01236 "Child Medical/Physical Care Plan for Child Care" must be on file for any child having health conditions which require monitoring for symptoms, or a medical procedure be performed, or ongoing administration of medication or medical foods at the program. In review of the children's records, it was determined that the required written information was either not on file, implemented or followed, for at least one child indicated on the Children Records Review, as noted in number(s) 1, 3, 6, 7, 8, 10, 11, 13, 14, 20 below:

- 1. No plan was on file.
- 2. Child's name was missing.
- 3. Child's date of birth was missing.
- 4. Name of the condition was missing.
- 5. Indication if medication is required was missing.

- 6. Symptoms to watch for were missing.
- 7. Directions for when should the medication or medical food be administered were missing.
- 8. Instructions for administration were missing.
- 9. Conditions that trigger the need for medication or medical foods were missing.
- 10. Expected results of the medication or medical food were missing.
- 11. Actions to be taken if the symptoms do not subside were missing.
- 12. Activities, foods, environmental conditions to avoid were missing.
- 13. Training instructions were missing.
- 14. Directions for action to be taken if expected result of medication or medical food does not occur were missing.
- 15. Instructions regarding emergency evacuation, if applicable, were missing.
- 16. Dated signature of parent was missing.
- 17. Dated signature of certified professional who trained the program staff was missing, if parent was not the trainer.
- 18. Printed name(s)/Dated signature(s) of child care staff member(s) trained to perform the procedure were missing.
- 19. Dated signature(s) of administrator was missing.
- 20. Name of any applicable medication was missing.
- 21. Date medication was administered was missing.
- 22. Time medication was administered was missing.
- 23. Dosage administered was missing.
- 24. Signature of staff member who administered the medication was missing.
- 25. Medication listed in the procedures to follow was not onsite available to administer as instructed and alternate instructions for this situation were not included on the plan.
- 26. The plan was not implemented.
- 27. The plan was not able to be implemented due to conflicting information.
- 28. The plan was not followed.

Submit the program's corrective action plan, which includes a copy of the completed JFS 01236, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/26/2021

Low Risk Non-Compliances

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Sanitary Equipment and Environment

Code: The program is required to follow the cleaning schedule for equipment.



<u>Finding</u>: During the inspection, it was determined that the program was not providing a clean and healthy environment, furniture, materials and equipment as required by Appendix A, as noted in number(s) 7 below:

- 1. The changing table was not sanitized after each use.
- 2. Reusable cloths were not being cleaned daily or when visibly soiled.
- 3. Dividers were not cleaned when visibly soiled.
- 4. The food prep areas were not being cleaned and sanitized before and after food prep.
- 5. The food prep areas were not being cleaned and sanitized between preparing raw and cooked food.
- 6. Toilet seat(s), handle(s) and toilet bowl(s) were not being cleaned when visibly soiled and sanitized.
- 7. The sinks were not clean.
- 8. Diaper receptacles were not being cleaned and sanitized.
- 9. Potty chairs were not emptied and/or cleaned and sanitized after each use.
- 10. Wastebaskets/trash receptacles/rinse buckets were not being cleaned and sanitized when visibly soiled.
- 11. Other [].

Furniture, materials and equipment must be maintained according to the cleaning and sanitizing schedule in Appendix A 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: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Handwashing Requirements

Code: The program is required to have all children wash their hands as outlined in rule.

<u>Finding</u>: During the inspection, it was determined that at least one child in the Infant group did not wash his or her hands at the time listed in number(s) 3 below, as required in rule.

- 1. Upon arrival.
- 2. Prior to departure.
- 3. After toileting/diaper change.
- 4. After contact with bodily fluids.
- 5. After returning from outdoor play.
- 6. After handling pets, pet cages, or other pet objects that have come in contact with the pet, before moving on to another activity.
- 7. Before eating or assisting with food preparation.
- 8. After water activities.
- 9. When visibly soiled (must use soap and water)
- 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: 12/26/2021

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

Code: 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 below:

- 1. Cosmetics:
- 2. Disinfecting 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 [].

The potentially hazardous substance was determined to be accessible to children in the following area: Preschool.

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: 12/26/2021

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(s) 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: 12/26/2021

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) 4(a).

- 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: 12/26/2021

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: 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 a completed medical examination statement for the employee(s) listed on the Employee Record Chart was 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: 12/26/2021

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(s) 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: 12/26/2021

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: 12/26/2021

Domain: 09 Children's Files

Rule: 5101:2-12-25 Medication Administration

<u>Code</u>: The program is required to removed all medication, medical foods and topical products that are no longer being administered or have expired.

<u>Finding</u>: During the inspection, it was determined that medication, medical foods and/or topical products had not been removed from the program and were no longer needed or had expired. 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.

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 | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Building Department | Compliant | |
| Inspection | | |
| Rule | Status | Documenting Statement(s) If applicable |
| Rule: 5101:2-12-04 Fire Inspection | Compliant | Documenting Statement(s), If applicable Documenting Statement: Please Note: |
| Nule. 5101.2-12-04 Fire hispection | Compilant | Documentation of a fire inspection |
| | | without any uncorrected violations must |
| | | be secured for the program. Secure a |
| | | new fire inspection by 8/9/22. |
| | | , , , , |
| 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. |
| | | with the rule requirements. |
| | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Food Service | Compliant | |
| Requirements | | |
| Rule | Status | Documenting Statement(s) If applicable |
| 5101:2-12-07 Administrator | Compliant | Documenting Statement(s), If applicable |
| Qualifications | Compilation | |
| | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator | Compliant | |
| Responsibilities/Requirements | | |
| | | |
| 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 | bocumenting statement(s), if applicable |
| Whistle Blower Protection | Compilant | |
| This is a second of the second | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| | | 0 |

| 5101:2-12-09 Background Check | Compliant | |
|-------------------------------------|-----------|---|
| Requirements | Compliant | |
| печинения | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-10 Health Training | Compliant | Documenting Statement: The program |
| | Compliant | had at least one Child Care Staff Member |
| Requirements | | |
| | | 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. |
| | | |
| | To: . | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Indoor Space | Compliant | |
| Requirements | | |
| | l cu i | |
| 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 |
| 5101:2-12-12 Safe Equipment | Compliant | Documenting Statement(s), if applicable |
| 3101.2-12-12 Sale Equipment | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Smoke Free | Compliant | - |
| Environment | · | |
| | - | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-15 Child Medical and | Compliant | |
| Enrollment Records | | |
| | | <u> </u> |
| 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 | | |
| Pula | Chahua | Decomposition Chate |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Management of | Compliant | |
| Communicable Disease | | |
| Pulo | Ctatus | Documenting Statement(s) If a reliable |
| Rule | Status | Documenting Statement(s), If applicable |

| 5101:2-12-16 Incident/Injury | Compliant | |
|---|-------------|---|
| Reporting | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| | | Documenting Statement(s), if applicable |
| 5101:2-12-16 Written Disaster Plan | Compliant | |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Schedule | Compliant | |
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| Rule | Status | Decumenting Statement(s) If applicable |
| | | 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 | |
| J101.2-12-17 Daily Outdoor Flay | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 License Capacity | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 Ratio | Compliant | bountening statement(s), it approaches |
| 3101.2-12-18 Natio | Compliant | |
| | | |
| | | |
| 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 |
| 5101:2-12-18 Attendance Records | Compliant | z coamenanty oracement(o)) in approach |
| 3101.2-12-10 Attendance Records | Compliant | |
| | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Supervision | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Child Guidance | Compliant | 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - |
| JIOI.2 IZ IJ CIIIU GUIUAIICE | Compilant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-20 Cots and Napping | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Meal and Snack | Compliant | |
| DIOTISTICAL INIGAL ALIA SUACK | i voimunam | |
| Do autino managet a | Compilation | |
| Requirements | Compliant | |

| 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 | |
| Handling/Storage | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Infant Daily Care | Compliant | |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Infant Bottle and Food | Compliant | |
| Preparation | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Diapering and Toilet | Compliant | |
| Training | | |
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