

# **Center Complaint Inspection Summary 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 Details						
Program Name	Program Number	Program Type				
FUTURE KIDS ACTIVITY CENTER	00000308484	Child Care Center				
Address		County				
16940 & 16930 LORAIN AVE CLEVELAND OH	CUYAHOGA					

Inspection Information									
Inspection Type				Inspection Scope		Inspection Notice			
Complaint				Partial		Unannounced			
Reviewer(s) Brittani Aloi		Inspection Day		Begin Time		End Time			
06/21/20		06/21/20	22	11:00 AM		12:30 PM			
Summary of Findings									
No. Rules Verified	No. Rules with Non-con	mpliances	No. Serious Risk		No. Moderate Risk	No. Low Risk			
9	5		0		1	5			

Staff-Child Ratios at the Time of Inspection						
Group	Age Group/Range	Ratio Observed	Comment			
Infants	0 to < 12 months	2 to 11				
Toddlers	30 months to < 36 months	1 to 8				
Preschool	3 years to < 4 years	1 to 24	Nap			
School age	5 years to < Kindergarten	1 to 26				



# **Complaint Allegations**

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.

# Domain:01 Ratio & Supervision Rule: 5101:2-12-18 Group Size Code: The program may combine all age groups when there are twelve or fewer children in the center. Allegation: A child less than two and one half years was combined with school age children when there were more than 12 children in the center. Determination: Substantiated Findings: During the inspection, it was determined groups which included children less than two and one half years were combined with groups of children two and one half years and older and there were more than 12 children in the center. 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 required at this time. Risk Level: Low

Corrective Action Plan Due: 08/14/2022

# Summary of Additional Non-Compliances

# **Serious Risk Non-Compliances**

No Additional Serious Risk Non-Compliances were observed during this inspection

## **Moderate Risk Non-Compliances**

Domain:01 Ratio & Supervision

Rule: 5101:2-12-18 Ratio

Code: The program is required to maintain the appropriate staff to child ratio for each group served.

Findings: During the inspection, a ratio of 1 child care staff member(s) for 26 children was determined to have occurred for the school age group when the situation in number(s) 15 below occurred:



- A child care staff member stepped out of the room.
   A child care staff member had not arrived at work on time.
- 3. Children were present who were not scheduled to be there.
- 4. A child care staff member was unable to work.
- 5. A child was injured in that group.
- 6. A child arrived in the group before a second staff member was scheduled to arrive with the group.
- 7. Two groups were combined, and the program did not follow the ratio for the youngest child in the group.

8. A child was transitioning to the next older age group, and the program did not follow the ratio for the youngest child in the group.

9. Ratio was doubled for more than two hours while children were napping.

10. Ratio was doubled while children were napping for a group that included at least one infant.

11. Ratio was doubled while children were napping and there were not enough staff members in the building to meet staff/child ratio.

12. Ratio was doubled in the school age group to allow access to the program, however, the program does not serve only school age children.

13. Both child care staff members did not have a working communication device when one staff member left the group to allow access to the school age only program.

14. The child care staff member did not return to the group after allowing access to the school age only program.

15. Other- the program was following a ratio of 1:30.

Additional child care staff members must be hired or current child care staff members must be rescheduled to maintain compliance. 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: 08/14/2022

# Low Risk Non-Compliances

## Domain:01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

Code: The program is required to maintain a record of the arrival and departure of each child. The program is also required to retain the original attendance record at the center for a period of one year.

Findings: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number(s) 2 below:

- 1. No attendance record was being maintained.
- 2. The attendance record was not being consistently completed.
- 3. The original attendance documentation was not kept at the program for a period of one year.

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: 08/14/2022



### Domain:01 Ratio & Supervision

### Rule: 5101:2-12-20 Cots and Napping

Code: The program is required to provide sufficient lighting when the children rest, nap, or sleep.

Findings: During the inspection, it was determined that the area used when children rest, nap or sleep was not lighted sufficiently to allow child care staff visual supervision of the children at all times. 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 required at this time.

Corrective Action Plan Due: 08/14/2022

Domain:05 Health & Safety

Rule: 5101:2-12-16 Incident/Injury Reporting

Code: The program is required to complete the JFS 01299 "Incident/Injury Report" for injuries and incidents at the program.

Findings: During the inspection, it was determined that a JFS 01299 "Incident/Injury Report" was not completed by child care staff for the situation(s) listed in number(s) 4 below:

1. A child became ill or received an injury which required first aid treatment.

2. A child was transported for emergency medical care.

3. A child received a bump or blow to the head.

4. An unusual or unexpected incident which jeopardized the safety of a child or employee of a program.

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 required at this time.

Corrective Action Plan Due: 08/14/2022

## Domain:05 Health & Safety

Rule: 5101:2-12-16 Incident/Injury Reporting

Code: The program is required to submit notification of a serious incident in OCLQS by the next business day.

Findings: During the inspection, it was determined that a Serious Incident was not reported in the Ohio Child Licensing and Quality System (OCLQS), as required, by the program administrator or designee for an incident(s) as listed in number(s) 2 below:

1. An incident, injury or illness that required professional medical consultation or treatment.

2. An unusual or unexpected incident which jeopardizes the safety of a child, child care staff member or employee of the program.

3. An incident defined as a serious risk non-compliance in appendix A to rule 5101:2-12-03 of the Administrative Code.

4. The program did not submit the report in OCLQS by the next business day as required by rule.

Submit the program's corrective action plan, which includes a statement that the program administrator or designee has completed the Serious Incident Report in OCLQS, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 08/14/2022

