

# **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 Details               |                         |                 |                   |  |
|-------------------------------|-------------------------|-----------------|-------------------|--|
| Program Name                  | Program Number          |                 | Program Type      |  |
| JOHNSTOWN CHRISTIAN PRESCHOOL | 000000401294            |                 | Child Care Center |  |
|                               |                         |                 |                   |  |
| Address                       |                         |                 | County            |  |
| 81 S MAIN STREET JOHNSTOWN    |                         |                 | LICKING           |  |
| OH 43031                      |                         |                 |                   |  |
|                               |                         |                 |                   |  |
|                               |                         |                 |                   |  |
| Building Approval Date        | Use Group/Code          | Occupancy Limit | Maximum Under 2 ½ |  |
|                               |                         |                 |                   |  |
| Fire Inspection Approval Date | Food Service Risk Level |                 |                   |  |
| 03/01/2021                    | Level II                |                 |                   |  |

| Inspection Information       |                                |                  |                   |              |
|------------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type              | Inspection Se                  | соре             | Inspection Notice |              |
| Annual                       | Full                           |                  | Unannounced       |              |
| Inspection Date 10/04/2021   | Begin Time S                   | 9:30 AM          | End Time 1:31 PM  |              |
| Reviewer:<br>ANNE BLANKESTYN |                                |                  |                   |              |
| Summary of Findings          |                                |                  |                   |              |
| No. Rules Verified           | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 57                           | 1                              | 0                | 1                 | 0            |

| License Capacity and Enrollment at the Time of Inspection |                  |            |           |       |
|---|------------------|------------|-----------|-------|
| Age Group   | License Capacity | Enrollment |           |       |
|   | Totals           | Full Time  | Part Time | Total |
| Infant ( Birth to < 18 m)                                 |                  | 0          | 0         | 0     |
| Young Toddler   |                  | 0          | 0         | 0     |
| Total Under 2 ½ Years                                     | 0                | 0          | 0         | 0     |
| Older Toddler   |                  | 0          | 0         | 0     |
| Preschool   |                  | 34         | 0         | 34    |
| School Age  |                  | 0          | 0         | 0     |
| Total Capacity/Enrollment                                 | 36               | 34         | 0         | 34    |

| Staff-Child Ratios at the Time of Inspection |                      |                |           |
|--|----------------------|----------------|-----------|
| Group  | Age Group/Range      | Ratio Observed | Comment   |
| AM-B   | 3 years to < 4 years | 2 to 18        | classroom |



| AM-B | 3 years to < 4 years | 1 to 8  | pictures         |
|------|----------------------|---------|------------------|
| AM-A | 3 years to < 4 years | 2 to 16 | classroom        |
| AM-A | 3 years to < 4 years | 3 to 27 | classes combined |
|      |                      |         | for picture day  |

### **Summary of Non-Compliances**

If the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited. Ohio Administrative Code 5101: 2-12-03 details the process for submitting a request for a review if a program disagrees with a licensing finding. The request for review must be submitted within seven days from the receipt of the licensing report.

### **Serious Risk Non-Compliances**

No Serious Risk Non-Compliances were observed during this inspection

### Moderate Risk Non-Compliances

### Domain: 08 Staff Files

<u>Rule</u>: 5101:2-12-09 Background Check Requirements <u>Code</u>: The program is required to have staff update their background checks every five years as required.

<u>Finding</u>: In review of the staff records, it was determined that background checks were not updated every five years for the individual(s) listed on the Employee Record Chart as noted in number(s) 3 below:

- 1. Owner;
- 2. Administrator;
- 3. Child Care Staff Member, employee.

Submit the program's corrective action plan, which includes a statement the background check update has been requested, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/03/2021



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

## Rules In-Compliance/Not Verified

| Rule                       | Status    | Documenting Statement(s), If applicable |
|----------------------------|-----------|---|
| 5101:2-12-13 Handwashing   | Compliant |   |
| Requirements               |           |   |
|                            |           |   |
| Rule                       | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-04 Fire Approval | Compliant |   |
|                            |           |   |
|                            |           |   |
| Rule                       | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-16 Management of | Compliant |   |
| Communicable Disease       |           |   |
|                            |           |   |
| Rule                       | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-13 Smoke Free    | Compliant |   |
| Environment                |           |   |
|                            |           |   |
| Rule                       | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator | Compliant |   |
| Qualifications             |           |   |



| 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 |
| 5101:2-12-16 Written Disaster Plan             | Compliant           |   |
|  |                     |   |
| Dula   | Chatura             | Desumenting Statement(s) If applicable  |
| Rule<br>5101:2-12-04 Food License              | Status<br>Compliant | Documenting Statement(s), If applicable |
| 5101.2-12-04 FOOd LICENSE                      | Compliant           |   |
|  |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-13 Sanitary Equipment and            | Compliant           |   |
| Environment                                    |                     |   |
|  |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-19 Child Guidance                    | Compliant           |   |
|  |                     |   |
| D. Is  | Chatura             |   |
| Rule   | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-16 First Aid/Standard<br>Precautions | Compliant           |   |
| Precautions                                    |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-18 License Capacity                  | Compliant           | bocumenting statement(s), it applicable |
| STOTIZ TZ TO Electrise cupacity                | compliant           |   |
|  | •                   |   |
| Rule   | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-07 Written Program                   | Compliant           |   |
| Policies and Procedures                        |                     |   |
|  |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-11 Indoor Space                      | Compliant           |   |
| Requirements                                   |                     |   |
| Dula   | Chatura             |   |
| Rule<br>5101:2-12-16 Emergency Drills          | Status<br>Compliant | Documenting Statement(s), If applicable |
| 5101.2-12-16 Emergency Drills                  | Compliant           |   |
| L  | 1                   | 1                                       |
| Rule   | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-17 Materials and                     | Compliant           |   |
| Equipment                                      |                     |   |
|  | •                   |   |
| Rule   | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-04 Building Approval                 | Compliant           |   |
|  |                     |   |
|  |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-02 License Posted                    | Compliant           |   |



| Pula                                       | Ctatus              | Desumenting Statement(s) If applicable  |
|--|---------------------|---|
| Rule<br>5101:2-12-19 Supervision           | Status<br>Compliant | Documenting Statement(s), If applicable |
| 5101.2-12-19 Supervision                   | Compliant           |   |
|  |                     |   |
| Rule                                       | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-02 Current Information           | Compliant           |   |
| Rule                                       | Status              | Documenting Statement(s) If applicable  |
| 5101:2-12-17 Daily Schedule                | Compliant           | Documenting Statement(s), If applicable |
| S101.2-12-17 Daily Schedule                | Compliant           |   |
| 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, 25% of the children's   |
|  |                     | records were reviewed, and the records  |
|  |                     | were complete, as required by the rule. |
|  |                     | were complete, as required by the fule. |
| Rule                                       | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Equipment                | Compliant           |   |
|  |                     |   |
| Rule                                       | Status              | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-15 Medical/Physical        | Compliant           | Documenting Statement: At the time of   |
| Care Plans                                 | compliant           | the inspection, there were no children  |
|  |                     | currently enrolled who had health       |
|  |                     | conditions.                             |
|  |                     |   |
| Rule                                       | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-08 Orientation and Staff Records | Compliant           |   |
|  |                     |   |
| Rule                                       | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-10 Health Training               | Compliant           |   |
| Requirements                               |                     |   |
| Rule                                       | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-10 Professional                  | Compliant           |   |
| Development Requirements                   |                     |   |
| Rule                                       | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Environment              | Compliant           |   |
|  |                     |   |
| Rule                                       | Status              | Documenting Statement(s), If applicable |



| 5101:2-12-16 Incident/Injury<br>Reporting                | Compliant |  |
|--|-----------|--|
| Rule   | Status    | Documenting Statement(s), If applicable    |
| 5101:2-12-16 Medical, Dental, and General Emergency Plan | Compliant |  |
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable    |
| 5101:2-12-18 Attendance Records                          | Compliant |  |
| Rule   | Status    | Documenting Statement(s), If applicable    |
| 5101:2-12-18 Group Size                                  | Compliant |  |
|  | I         |  |
| Rule   | Status    | Documenting Statement(s), If applicable    |
| 5101:2-12-18 Ratio                                       | Compliant |  |
| Rule   | Status    | Documenting Statement(s), If applicable    |
| Rule: 5101:2-12-25 Medication                            | Compliant | Documenting Statement: There were no       |
| Administration and Food Supplements                      |           | children on medication at the time of the  |
|  |           | inspection; however, the method of         |
|  |           | storage and practices for the              |
|  |           | administration were reviewed.              |
| Dula   | Status    | Decumenting (testernorst/s). If emplicable |
| Rule<br>5101:2-12-03 Inspection                          | Status    | Documenting Statement(s), If applicable    |
| Requirements   | Compliant |  |
| 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 Medical Statement                           | Compliant |  |
|  | 1         |  |
|  |           |  |