

# **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
JUNIOR EXPLORERS CHILD DEVELOPMENT	000000500028		Child Care Center
CENTER			
Address	50		County
56 EXECUTIVE DR NORWALK			HURON
OH 44857			
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
11/19/2012	E	92	
Fire Inspection Approval Date	Food Service Risk L	evel	
07/27/2021	Exempt		

		Insp	ection Information		
Inspection Type		Inspection Sc	ope	Inspection Notice	
Annual		Full		Unannounced	
Inspection Date 07/14/2022		Begin Time 8	:45 AM	End Time 12:45 PM	
Reviewer:					
Brittani Aloi					
		Sur	nmary of Findings		
No. Rules Verified	No. Rules with Non-c	ompliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
58	9	74	0	0	10

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)		11	1	12
Young Toddler		3	2	5
Total Under 2 ½ Years	33	14	3	17
Older Toddler		7	0	7
Preschool		17	4	21
School Age		13	1	14
Total Capacity/Enrollment	65	37	5	59

Staff-Child Ratios at the Time of Inspection				
Group	Age Group/Range	Ratio Observed	Comment	

Infants	0 to < 12 months	2 to 6	
Infants	0 to < 12 months	3 to 8	
Toddlers	18 months to < 30 months	2 to 7	
Toddlers	18 months to < 30 months	3 to 8	
Preschool	30 months to < 36 months	2 to 21	Preschool/School age combined
Preschool	30 months to < 36 months	2 to 17	
School age	School-Age to < 11 years	1 to 8	

# **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.

Sovieus Dick Man Compliances
Serious Risk Non-Compliances
No Serious Risk Non-Compliances were observed during this inspection
Moderate Risk Non-Compliances
No Moderate Risk Non-Compliances were observed during this inspection



## **Low Risk Non-Compliances**

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

<u>Code</u>: 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.

<u>Finding</u>: 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: 08/13/2022

## Domain: 04 Indoor/Outdoor Space

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

<u>Code</u>: The program is required to have an outdoor play space free from immediate risk.

<u>Finding</u>: During the inspection, it was determined that an area was used which was not protected from traffic and other hazards by a fence in good repair, or other barrier. Although the fence or natural barrier was not meeting the rule requirements, it was determined to not present an immediate risk for a child to be able to leave the playground. The fence or gate was not in good repair and/or being used inappropriately as noted in number(s) 10 below:

- 1. The fencing had missing slat boards.
- 2. The fencing was broken.
- 3. The fencing was loose.
- 4. The fencing was rotting.
- 5. The gate was broken and did not close.
- 6. The gate was locked.
- 7. The latch on the gate was broken.
- 8. The latch was easily opened by children on the playground.
- 9. The gate had no latch.
- 10. The fencing shifted leaving small gaps between the fence and the ground.

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

Corrective Action Plan Due: 08/13/2022

#### Domain: 04 Indoor/Outdoor Space

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

Code: The program is required to provide adequate fall surface for the outdoor play space.

<u>Finding</u>: During the inspection, it was determined that while there was adequate fall surface material in the outdoor play space, proper distribution had not been maintained under and around equipment as required. Submit the program's corrective action plan, which includes a statement that fall surface material has been properly redistributed, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 08/13/2022

# Domain: 07 Diapering & Infant Care

Rule: 5101:2-12-23 Infant Bottle and Food Preparation

<u>Code</u>: The program staff is required to label and store bottles with breast milk following the requirements in rule.

<u>Finding</u>: During the inspection, it was determined that breast milk provided by the parent was not stored appropriately as noted in number(s) 1 below:

- 1. Not labeled with infant's name, date pumped, and date bottle was prepared;
- 2. Not immediately refrigerated or frozen;
- 3. Stored at room temperature longer than eight hours;
- 4. Stored at the program for more than five days after it was expressed;
- 5. Stored longer than two weeks in the freezer compartment of the refrigerator;
- 6. Stored longer than six months in the refrigerator/freezer;
- 7. Stored longer than twelve months in the deep freezer;
- 8. Other [ ].

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

Corrective Action Plan Due: 08/13/2022

Domain: 07 Diapering & Infant Care

Rule: 5101:2-12-20 Cribs

Code: The program is required to space cribs two feet apart when in use.

<u>Finding</u>: During the inspection, it was determined that cribs were not two feet apart when in use, as required by 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: 07 Diapering & Infant Care

Rule: 5101:2-12-20 Cribs

<u>Code</u>: The program staff is required to remove any items listed in rule that obstruct the staff's view of the infant

from cribs.

<u>Finding</u>: During the inspection, it was determined that a child had been placed in a crib with an object which could obstruct a child care staff member's view of the infant, but is not likely to create a potential suffocation risk, as indicated in number(s) 2 below:

- 1. Busy box or other toy attached to the side of the crib.
- 2. A blanket hanging over the side of the crib.
- 3. Stuffed animal that is not large/soft enough that it could conform to the shape of the child's face.
- 4. Other [].

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: 08/13/2022

#### **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(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: 08/13/2022

#### **Domain: 08 Staff Files**

Rule: 5101:2-12-07 Administrator Responsibilities/Requirements

<u>Code</u>: The program administrator is required to maintain current employee records in the Ohio Professional Registry.

<u>Finding</u>: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 2, 4, 5, 7 below:

- 1. At least one administrator, employee or child care staff member (including substitutes) had not created a profile.
- 2. At least one administrator, employee or child care staff member had not created an employment record for the program on or before their first day of employment.
- 3. At least one administrator, employee or child care staff member had not updated changes to positions or roles within five calendar days of the change.
- 4. The administrator had not assigned at least one employee or child care staff member to the program's organization dashboard.
- 5. At least one individual's schedule was not current.
- 6. At least one individual's position or role did not include an applicable group assignment.
- 7. At least one individual's employment had not been end dated.
- 8. Other: [ ]

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

Corrective Action Plan Due: 08/13/2022

#### **Domain: 08 Staff Files**

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

<u>Code</u>: The program is required to have all child care staff members complete training in child abuse and neglect recognition and prevention within sixty days of hire. Staff must complete training in first aid and CPR within the first ninety 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 required health and safety training as noted in number(s) 4 below:

- 1. Child abuse and neglect recognition and prevention training was not completed within sixty days of hire.
- 2. First aid training was not completed within ninety days of hire.
- 3. Cardiopulmonary resuscitation (CPR) training was not completed within ninety days of hire.
- 4. The child abuse and neglect recognition and prevention training was expired.
- 5. The first aid training was expired.
- 6. The CPR training was expired.

Refer to the Employee Record Chart for the name(s) of the child care staff member(s) who must complete the required health and safety training(s). Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 08/13/2022

## **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) 2, 3(b)(c), 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: 08/13/2022

# Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	
	Y	
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: Please Note: Documentation of a fire inspection without any uncorrected violations must be secured for the program. Secure a new fire inspection by 7/27/22.
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.
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Rule 5101:2-12-04 Food Service	Status	Documenting Statement(s), If applicable
Requirements	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	0
Qualifications		
	Pi-	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-07 Written Program	Compliant	Documenting Statement: No changes
Policies and Procedures	,	have been made to the written policies
		and procedures since it was last approved
		by this Department.
	C NORTH VICTORY	
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	Documenting Statement(s), it applicable
Whistle Blower Protection	Compnant	
Whistic blower i Totection	<u> </u>	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-09 Background Check	Compliant	3
Requirements	emented that the transfer of t	
Language Management and American		
Rule	Status	Documenting Statement(s), If applicable

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5101:2-12-11 Indoor Space	Compliant	
Requirements		
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	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Equipment	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Environment	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	Bodinening statement(s), it applicable
Requirements	Compilant	
Requirements		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free	Compliant	
Environment		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Child Medical and	Compliant	
Enrollment Records		
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	( ) 11
General Emergency Plan	ons as a second of the Control Mandators	
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Emergency Drills	Compliant	Documenting Statement: Documentation
Naie. 3101.2-12-10 Efficigency Drills	Compilant	
		for completed fire, weather, and
		emergency/lockdown drills was verified
		during this inspection.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 First Aid/Standard	Compliant	Documenting Statement: During the
Precautions	***	inspection, the program had complete
		first aid kits available as required.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of	Compliant	
Communicable Disease		
P. J.		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury	Compliant	
Reporting		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Written Disaster	Compliant	Documenting Statement(s), if applicable  Documenting Statement: No changes
Plan	Compliant	have been made to the disaster plan since
Fidit		it was last approved by this Department.
		it was last approved by this Department.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Schedule	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Materials and	Compliant	
Equipment		
	- Washington	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	
	1	
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child
		ratios observed during the inspection
		were in compliance.
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Group Size	Compliant	
L		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Supervision	Compliant	(-))
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Rule	Status	Documenting Statement(s), If applicable
		Documenting Statement(s), if applicable
5101:2-12-19 Child Guidance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cots and Napping	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Meal and Snack	Compliant	
Requirements		
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	27	
D. I.	C	D :: 6: 1 // ) If    :
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 Diapering and Toilet	Compliant	
Training		
	I -	
Rule	Status	Documenting Statement(s), If applicable
[101.2 12 25 Madiantian	Compliant	
5101:2-12-25 Medication Administration	Compilant	