Family Child Care 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 Details | | |
|-----------------|----------------|-------------------|
| Program Name | Program Number | Program Type |
| THOMPSON, CARLA | 00000906782662 | FCC - Type B Home |
| Address | | County |
| 3732 CHELTON RD | | CUYAHOGA |
| | | |
| SHAKER HTS | | |
| OH 44120 | | |

| Inspection Information | | | | |
|------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type | Inspection Sc | cope | Inspection Notice | |
| Compliance | Full | | Unannounced | |
| Inspection Date | Begin Time | | End Time | |
| 11/19/2021 | 12:40 PM | | 3:17 PM | |
| Reviewer: | | | | |
| Susan Whatley | | | | |
| Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 68 | 1 | 0 | 0 | 1 |

| 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 Years | 3 | 0 | 0 | 0 |
| Older Toddler | | 0 | 0 | 0 |
| Preschool | | 0 | 0 | 0 |
| School Age | | 5 | 0 | 5 |
| Total Capacity/Enrollment | 6 | 5 | 0 | 5 |

| Staff-Child Ratios at the Time of Inspection | | | |
|--|--|--------|--------------------|
| Group Age Group/Range Ratio Observed Comment | | | |
| Carla Thompson | | 1 to 0 | No children |
| | | | present at the |
| | | | time of inspection |



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: 2-13-03 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 | | | | |
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| No Serious Risk Non-Compliances were observed during this inspection | | | | |
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| Moderate Risk Non-Compliances | | | | |
| No Moderate Risk Non-Compliances were observed during this inspection | | | | |
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Low Risk Non-Compliances

Domain: 09 Children's Files

Rule: 5101:2-13-15 Child Medical and Enrollment Records

Code: The program is required to have a completed JFS 01234 "Child Enrollment and Health Information for

Child Care" on file on the premises for each child.

Findings: In review 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) 04 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 []

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

Corrective Action Plan Due: 12/22/2021

Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-02 License Visible | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Voluntary Temporary | Compliant | |
| Closure | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Change of Location | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-02 Information in OCLQS | Compliant | bocumenting statement(s), it applicable |
| 3101.2-13-02 illioilliation ill Octos | Compliant | |
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| Rule | Status | Desumenting Statement/s) If applicable |
| 110110 | | Documenting Statement(s), If applicable |
| 5101:2-13-02 Provider Medical | Compliant | |
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| Dula | Chahua | Decumenting Statements of applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-03 Inspection | Compliant | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| Building Requirements for Type B | Compliant | |
| Homes | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Fire Safety for Type B | Compliant | |
| Homes | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Flammable and | Compliant | |
| Combustible Materials in a Type B | | |
| Home | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Heaters in a Type B | Compliant | , , , , , , , , , , , , , , , , , , , |
| Home | Compilation | |
| Home | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-05 Denial, Revocation, and | Compliant | |
| Suspension | Compilant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-07 Staff Records | Compliant | 2001 |
| Julia 15 07 Stall Recolus | Compilant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| | | bocumenting statement(s), if applicable |
| 5101:2-13-07 Type B Provider - Foster | Compliant | |
| Parent | | |
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| Rule | Status | Documenting Statement(s), If applicable |

| 5101:2-13-08 Employee Requirements | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-08 Child Care Staff Requirements | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-08 Whistle Blower | Compliant | Bocamenting statement(s), it applicable |
| Pod- | Ctatura | Decree of the Chater of the All of the Chater |
| Sule 5101:2-13-09 Background Checks | Status Compliant | Documenting Statement(s), If applicable |
| | l a | |
| Rule 5101:2-13-10 Health Training | Compliant | Documenting Statement(s), If applicable |
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| Rule 5101:2-13-10 Professional Development | Status Compliant | Documenting Statement(s), If applicable |
| Pod- | Chalina | Decree of the Chater of the All of the Chater |
| Rule 5101:2-13-11 Outdoor Space | Status Compliant | Documenting Statement(s), If applicable |
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| Rule 5101:2-13-11 Outdoor Equipment | Status Compliant | Documenting Statement(s), If applicable |
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| Rule 5101:2-13-11 Fall Zone | Status Compliant | Documenting Statement(s), If applicable |
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| Rule 5101:2-13-12 Safe Equipment | Status Compliant | Documenting Statement(s), If applicable |
| Rule | Status | Documenting Statement(s) If applies his |
| 5101:2-13-12 Safe Environment | Compliant | Documenting Statement(s), If applicable |

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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Clean environment and | Compliant | |
| equipment | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Handwashing | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Smoke Free | Compliant | bootimenting statement(s), in applicable |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Toothbrushing | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Requirements for Field | Compliant | |
| and Routine Trips | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Ratio and Supervision | Compliant | |
| for Field and Routine Trips | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Driver Requirements | Compliant | <u> </u> |
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| Rule | Status | Documenting Statement(s), If applicable |
| | | Documenting Statement(3), if applicable |
| 5101:2-13-14 Vehicle Inspections | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Vehicle Requirements | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-15 Health Conditions | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-15 Child Records Retention | Compliant | |
| and Confidentiality | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Medical, Dental, and | Compliant | |
| General Emergency Plan | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Emergency Drills | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 First Aid Kit/Standard | Compliant | |
| Precautions | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Communicable Diseases | Compliant | g and a square square |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Incident/Injury | Compliant | bocumenting statement(s), it applicable |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Disaster Plan | Compliant | bocumenting statement(s), if applicable |
| 5101.2-15-16 Disaster Plan | Compilant | |
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| Pulo | Status | Documenting Statement(s) If and itself |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-18 Attendance | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-19 Supervision | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-19 School Age Supervision | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-19 Child Guidance | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-20 Sleep and Nap | Compliant | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| | | bocumenting statement(3), if applicable |
| 5101:2-13-20 Crib and Playpen | Compliant | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-21 Evening and Overnight | Compliant | |
| Care | · | |
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| Rule | Status | Documenting Statement(s), If applicable |
| | | Documenting Statement(s), if applicable |
| 5101:2-13-21 Sanitary Environment | Compliant | |
| and Hygiene | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-22 Meals and Snacks | Compliant | , , , , , , , , , , , , , , , , , , , |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-22 Fluid Milk | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-22 Food Handling | Compliant | <u> </u> |
| 3101.2 13 22 1 000 Harlaning | Compilant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-23 Infant Daily Care | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-23 Infant Bottle and Food | Compliant | |
| Preparation | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-23 Diapering | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-24 Parent Permission for | Compliant | |
| Swimming | · · | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-25 Medication | Compliant | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-07 Provider Responsibilities | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-18 Group Size and Ratios | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13 Written Policies and | Compliant | |
| Procedures | | |
| Procedures | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-12 Carbon Monoxide | Compliant | |
| Detectors - Type B Only | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-11 Indoor Space | Compliant | , , , , , , , , |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-17 Programming | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-24 On-site Pools | Compliant | James (-), it approach |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-12 Pets | Compliant | |
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| Rule | Status | Documenting Statement(s) If applicable |
| nuie | Status | Documenting Statement(s), If applicable |



| 5101:2-13-24 Swimming Sites | Compliant | |
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| Rule 5101:2-13-17 Materials and Equipment | Status Compliant | Documenting Statement(s), If applicable |
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