# **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 <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
MCALLISTER, KIMBERLY	000000909754658	FCC - Type B Home
Address	•	County
4719 BEECHGROVE AVE		CUYAHOGA
GARFIELD HTS		
OH 44125		

Inspection Information					
Inspection Type	Inspection Sc	cope	Inspection Notice		
Compliance	Full		Unannounced	Unannounced	
Inspection Date	Begin Time		End Time	End Time	
05/15/2021	10:18 AM	10:18 AM		12:32 PM	
Reviewer:					
Susan Whatley					
Summary of Findings					
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk	
79	4	0	0	5	

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		2	0	2
School Age		6	0	6
Total Capacity/Enrollment	6	8	0	8

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Kimberly McAllister	Mixed Age Group	1 to 4	Four children in care 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
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: 00 License & Approvals** 

**Rule: Transitional Pandemic Requirements** 

Code: The program is required to ensure safe health practices to prevent the spread of COVID-19.

Findings: During the inspection, it was determined that the program did not follow the requirements for ensuring safe practices to prevent the spread of COVID-19 as noted in number(s) 1 below:

- 1. At least one employee, child care staff member or child was not assessed for temperature and symptoms listed in appendix A to this rule prior to, or as soon as they arrived each day.
- 2. The provider was not assessed for temperature and symptoms listed in appendix A to this rule prior to the start of the day.
- 3. At least one resident was not assessed for temperature and symptoms listed in appendix A to this rule prior to the start of the day.
- 4. The program did not immediately send home any child, child care staff member or employee who had a temperature of one hundred degrees or higher.
- 5. The program did not immediately send home any child, child care staff member or employee who had at least one symptom listed in appendix A to this rule and has had known contact with someone confirmed or suspected to have COVID-19.
- 6. The individual was allowed to return to the family child care home prior to being fever free without the use of fever-reducing medication for at least twenty-four hours.
- 7. An individual who had a temperature of one hundred degrees or higher, or had at least one symptom listed in appendix A to this rule, and had known contact with someone confirmed or suspected to have COVID-19 did not complete isolation or quarantine procedures for COVID-19 in coordination with the local health department, or in compliance with the Ohio Department of Health and CDC guidelines, prior to returning to the family child care home.
- 8. The provider or resident had a temperature of 100 degrees or higher and the provider did not stop providing care until the individual was fever-free without the use of medication for at least twenty-four hours.
- 9. The provider or resident had at least one symptom listed in appendix A to this rule, and had known contact with someone confirmed or suspected to have COVID-19 did not complete isolation or quarantine procedures for COVID-19 in coordination with the local health department or Ohio Department of Health and CDC guidelines prior to resuming care.

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: 06/16/2021

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-13 Handwashing

Code: The program is required to use a separate sink for meal prep.

Findings: During the inspection, it was determined that an individual in the program/home washed his or her hands in a sink that is used for meal preparation or clean-up or is near the food serving area. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/16/2021

**Domain: 02 Safe & Sanitary Environment** 

Rule: 5101:2-13-13 Handwashing



Code: The program is required to provide a permanent hand washing sink.

Findings: During the inspection, it was determined the handwashing sink requirements were not met as noted in number(s) 2 below:

- 1. There was no handwashing sink available.
- 2. The handwashing sink was out of order and not able to be used.
- 3. The handwashing sink was not a permanent fixture meeting the Ohio plumbing standards of division 4101:3 in that [].
- 4. The handwashing sink did not have running water.
- 5. Other [].

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

Corrective Action Plan Due: 06/16/2021

#### Domain: 05 Health & Safety

Rule: 5101:2-13-16 Incident/Injury

Code: The program is required to retain the JFS 01299 'incident/Injury Report' on file at the program for at least one year.

Findings: In review of the program's records, it was determined that completed JFS 01299 'Incident/Injury Report' forms were not being kept on file at the program for at least one year, as required. Submit the program's corrective action plan, which includes a statement that all Incident/Injury Report forms will be maintained on file at the provider for a minimum of one year, to verify compliance with the requirements of the rule.

Corrective Action Plan Due: 06/16/2021

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

Rule: 5101:2-13-10 Health Training B

Code: The program is required to meet the health training requirements.

Findings: In review of records, it was determined the provider did not have current valid documentation for training(s) listed in number(s)1,5 below:

- 1. First Aid expired training
- 2. First Aid not taken First Aid training
- 3. First Aid not have verification of completion of First Aid
- 4. First Aid Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.
- 5. CPR expired training
- 6. CPR not taken CPR training
- 7. CPR not have verification of CPR training

- 8. CPR training taken did not include all age groups the program serves
- 9. CPR Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.
- 10. Management of Communicable Disease expired training
- 11. Management of Communicable Disease not taken CD training
- 12. Managment of Communicable Disease not have verification of completion of the full CD training
- 13. Management of Communicable Disease Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.
- 14. Child Abuse Recognition and Prevention expired training
- 15. Child Abuse Recognition and Prevention not taken Child Abuse six-hour training
- 16. Child Abuse Recognition and Prevention Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.

Correct the violation and submit the documentation of current certification with the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 06/16/2021

## **Rules In-Compliance/Not Verified**

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Driver Requirements	Compliant	
'	'	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-21 Evening and Overnight	Compliant	
Care		
Rule	Status	Desumenting Statement/s) If applicable
110110	0.00.00	Documenting Statement(s), If applicable
5101:2-13-02 License Posted	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Infant Daily Care	Compliant	-
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 JFS 01234 'Child	Compliant	
Enrollment and Health Information'		

Rule Status 5101:2-13-16 Disaster Plan Complia  Rule Status	Documenting Statement(s), If applicable ant
5101:2-13-16 Disaster Plan Complia	
5101:2-13-16 Disaster Plan Complia	
	ant
Rule Status	
Rule Status	
Rula	
Rule   Status	
	Documenting Statement(s), If applicable
5101:2-13-18 Ratio and Group Size Complia	ant
Rule Status	Documenting Statement(s), If applicable
5101:2-13-18 Ratio and Group Size Complia	ant
Rule Status	Documenting Statement(s), If applicable
5101:2-13-07 Provider Requirements Complia	ant
Rule Status	Documenting Statement(s), If applicable
5101:2-13-11 Indoor Space Complia	ant
Rule Status	Documenting Statement(s), If applicable
5101:2-13-08 Child Care Staff Complia	ant
Requirements	
Rule Status	Documenting Statement(s), If applicable
5101:2-13-04 Flammable and Complia	ant
Combustible Materials in Type B Home	
Rule Status	Documenting Statement(s), If applicable
5101:2-13-25 Topical Products and Complia	ant
Lotions	
Rule Status	Documenting Statement(s), If applicable
5101:2-13-17 Programming Complia	
Rule Status	Documenting Statement(s). If applicable
	Documenting Statement(s), If applicable ant
Rule Status 5101:2-13-24 On-site Pools Complia	
Status  S101:2-13-08 Child Care Staff Requirements  Complia  Status	Documenting Statement(s), If applicable

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Safe Equipment	Compliant	
Rule	Status	Decumenting Statement/s) If applicable
5101:2-13-04 Fire Safety for Type B	Compliant	Documenting Statement(s), If applicable
Homes	Compliant	
Homes		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-24 Parent Permission for	Compliant	
Swimming		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-20 Sleep and Napping	Compliant	bocamenting statement(3), if applicable
Requirements for a Licensed Family	30	
Child Care Provider		
		,
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Smoke Free	Compliant	
Pulo	Ctatus	Decumenting Statement/s\ If applicable
Rule 5101:2-13-08 Employee Requirements	Status Compliant	Documenting Statement(s), If applicable
3101.2-13-08 Employee Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Standard Precautions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Vehicle Inspections	Compliant	2 cosmoning ocacement(s), it applicable
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Review Policies and	Compliant	
Procedures		
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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
5101:2-13-22 Fluid Milk	Compliant	

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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-20 Crib and Playpen	Compliant	
Requirements		
		1
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Vehicle Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Fall Zone	Compliant	
		1
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Staff Records	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Diapering	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Pets	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-24 Swimming Sites	Compliant	
D. I.	Chabina	December 5 Chataman 1 / 1 / 1 / 1
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-22 Food Handling	Compliant	
Dula	Chahira	Decrees which the beautiful of the beaut
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Safe Environment	Compliant	
D. I.	Chabina	Decree of the Chateman (1) (5)
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Outdoor Equipment	Compliant	

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
5101:2-13-16 First Aid Kit	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Heaters in a Type B	Compliant	
Home	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Ratio and Supervision	Compliant	(2), app
for Field and Routine Trips		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Medical, Dental, and	Compliant	bootinenting statement(s)) if applicable
General Emergency Requirements	Compilant	
deficial Efficiency Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Medical, Dental, and	Compliant	bocumenting statement(3), if applicable
General Emergency Requirements	Compilant	
General Linergency Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-25 Medication Storage	Compliant	bocamenting statement(s), it applicable
3101.2 13 23 Wedication Storage	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 School Age Supervision	Compliant	2 dodnienting diatement(s), it applicable
3101.2 13 13 3chool Age Supervision	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-07 Type B Provider - Foster	Compliant	bocamenting statement(s), it applicable
Parent	Compilant	
	1	L
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Infant Bottle and Food	Compliant	bocamenting statement(s), it applicable
	Compliant	
Preparation		
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Rule	Status	Documenting Statement(s), If applicable
naic	Julius	Documenting statement(3), if applicable

5101:2-13-13 Toothbrushing	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-17 Materials and Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 Supervision	Compliant	Documenting Statement(s), ii applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Clean Environment and Equipment	Compliant	Documenting Statement(s), ii applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Communicable Diseases	Compliant	Documenting statement(s), ii applicable
S101:2-13-21 Sanitary Environment and Hygiene	Status   Compliant	Documenting Statement(s), If applicable
D. d.	Chahara	December 5to to set of the set of
Rule 5101:2-13-25 Medication Requirements	Status   Compliant	Documenting Statement(s), If applicable
Dula	Chahara	December 64-4- and (a) If any live black
Rule 5101:2-13-02 Information in Provider Portal	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-13-14 Requirements for Field and Routine Trips	Status   Compliant	Documenting Statement(s), If applicable
S101:2-13-08 Whistle Blower	Status   Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement/s) If a validable
5101:2-13-16 Serious Incident	Status Compliant	Documenting Statement(s), If applicable

Beginning!		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-10 Professional	Compliant	
Development		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-20 Use of Crib and Playpen	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Child's Medical	Compliant	
	T.	
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
5101:2-13-08 Substitute	Compliant	
Requirements		
Dula	Chahus	Decumenting Statement(s) If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Substitute	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Health Conditions	Compliant	Documenting Statement(s), it applicable
3101.2-13-13 Health Conditions	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Information in OCLQS	Compliant	bootinenting statement(s), it applicable
5101.2 15 02 illioimation ill octos	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Outdoor Space	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Provider Medical	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-09 Background Checks	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-09 Background Checks	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-09 Background Checks	Compliant	bocumenting statement(s), it applicable
3101.2 13 03 Background Checks	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-09 Background Checks	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-18 Attendance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Change of Location	Compliant	bocumenting statement(s), it applicable
5101.2 15 02 Change of Location	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-07 Provider Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-03 Inspection	Compliant	
Requirements		
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