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 |
| THOMAS, DANEENE | 000000912387944 | FCC - Type B Home |
| Address | | County |
| 2194 E. 74TH STREET | | CUYAHOGA |
| | | |
| CLEVELAND | | |
| OH 44103 | | |

| | Inspection Information | | | | |
|---------------------|--------------------------------|------------------|-------------------|--------------|--|
| Inspection Type | Inspection So | cope | Inspection Notice | | |
| Compliance | Full | | Unannounced | | |
| Inspection Date | Begin Time | | End Time | | |
| 02/28/2022 | 9:28 AM | | 11:05 AM | | |
| Reviewer: | | | | | |
| Patricia Hill | | | | | |
| Summary of Findings | | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk | |
| 68 | 2 | 0 | 0 | 2 | |

| 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 | | 2 | 0 | 2 |
| Total Under 2 Years | 3 | 2 | 0 | 2 |
| Older Toddler | | 0 | 0 | 0 |
| Preschool | | 0 | 0 | 0 |
| School Age | | 2 | 0 | 2 |
| Total Capacity/Enrollment | 6 | 2 | 0 | 4 |

| Staff-Child Ratios at the Time of Inspection | | | |
|--|--------------------------|--------|--|
| Group Age Group/Range Ratio Observed Comment | | | |
| Group 1 | 18 months to < 30 months | 1 to 2 | |



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: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Pets

Code: The program is required to properly care for all pets.

Findings: During the inspection, it was determined that a pet at the program posed a threat to the safety or health of the children, in that proper licensing and inoculations were not on file. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/31/2022

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 14 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: 03/31/2022

Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(s), If applicable |
|------------------------------|-----------|---|
| 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 | 2004 menting ocacement(0)) if approache |
| | 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 |
| 5101:2-13-02 Information in OCLQS | Compliant | 2004 menting ocacement(0)) in approache |
| 5101.2-13-02 IIIIOIIIIatioii III OCLQ3 | 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 |
| | | Documenting Statement(s), if applicable |
| 5101:2-13-03 Inspection | Compliant | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Building Requirements | Compliant | |
| for Type B Homes | ' | |
| Tor Type B Homes | | |
| | l | |
| Rule | Ctatus | Decumenting Statement/s) If applicable |
| | 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 | Joniphane | |
| • • | | |
| Home | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Heaters in a Type B | Compliant | |
| Home | | |
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| Dulo | Ctatus | Decumenting Statement (a) If a well-rale la |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule 5101:2-13-07 Staff Records | Status Compliant | Documenting Statement(s), If applicable |
| | | Documenting Statement(s), If applicable |
| | | Documenting Statement(s), If applicable |

| Rule | Status | Documenting Statement(s), If applicable |
|---------------------------------------|-----------|---|
| 5101:2-13-07 Type B Provider - Foster | Compliant | J |
| 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 | Compliant | 5 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| Requirements | · | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-08 Whistle Blower | 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 |
| 5101:2-13-10 Health Training | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-10 Professional | Compliant | |
| Development | | |
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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 |
| 5101:2-13-11 Outdoor Equipment | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-11 Fall Zone | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-12 Safe Equipment | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-12 Safe Environment | Compliant | |
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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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| Dula | Chahua | Daniel Charles (A) 16 |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Smoke Free | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Toothbrushing | Compliant | |
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| D. J. | Chahara | D |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Requirements for Field | Compliant | |
| and Routine Trips | | |
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| Pulo | Status | Documenting Statement(s) If applicable |
| Rule 5101:2-13-14 Ratio and Supervision | Status | Documenting Statement(s), If applicable |
| - | Compliant | |
| for Field and Routine Trips | | |
| L | 1 | 1 |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Driver Requirements | Compliant | Social Chang State (16/14), it applicable |
| 3101.2-13-14 Driver Requirements | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Vehicle Inspections | Compliant | 2 damenting statement(s), it applicable |
| 3101.2 13 14 Vehicle hispections | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Vehicle Requirements | Compliant | 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 |
| 3101.2 13 17 venicie requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 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 |
| | | bocamenting statement(s), it 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 | |
| 3101.2 13 10 Emergency brins | Compilant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 First Aid Kit/Standard | Compliant | |
| Precautions | ' | |
| 1 recadions | | |
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| D. J. | Chatana | Described States and the life and include |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Communicable Diseases | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| | | boddinenting statement(s), it applicable |
| 5101:2-13-16 Incident/Injury | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Disaster Plan | Compliant | |
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| 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 |
| naic | Jacatas | bocumenting statement(s), if applicable |

| 5101:2-13-19 School Age Supervision | Compliant | |
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| Rule 5101:2-13-19 Child Guidance | Status Compliant | Documenting Statement(s), If applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-20 Sleep and Nap Requirements | Compliant | Documenting statement(s), if applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-20 Crib and Playpen Requirements | Compliant | |
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| Rule 5101:2-13-21 Evening and Overnight Care | Status Compliant | Documenting Statement(s), If applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-21 Sanitary Environment and Hygiene | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-22 Meals and Snacks | Compliant | bocamenting statement(s), it applicable |
| Rule | Status | Documenting Statement(c) If applicable |
| 5101:2-13-22 Fluid Milk | Compliant | Documenting Statement(s), If applicable |
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| Rule 5101:2-13-22 Food Handling | Status Compliant | Documenting Statement(s), If applicable |
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| Rule 5101:2-13-23 Infant Daily Care | Status Compliant | Documenting Statement(s), If applicable |
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| Rule 5101:2-13-23 Infant Bottle and Food Preparation | Status Compliant | Documenting Statement(s), If applicable |

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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 |
| 5101:2-13-24 Parent Permission for | Compliant | Documenting statement(3), it approach |
| Swimming | Compilant | |
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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 | Documenting statement(3), it applicable |
| 3101.2-13-10 Group Size and natios | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13 Written Policies and | Compliant | |
| 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 | Documenting statement(s), it applicable |
| 5101:2-15-11 illuooi space | Compnant | |
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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 | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-24 Swimming Sites | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-17 Materials and | Compliant | |
| Equipment | | |
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