



## 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<br>AMISON, KAREN                          | Program Number<br>000000928103292 | Program Type<br>FCC - Type B Home |
| Address<br>733 BEECHWOOD<br><br>CINCINNATI<br>OH 45232 |                                   | County<br>HAMILTON                |

| Inspection Information        |                          |                                  |
|-------------------------------|--------------------------|----------------------------------|
| Inspection Type<br>Compliance | Inspection Scope<br>Full | Inspection Notice<br>Unannounced |
| Inspection Date<br>04/22/2021 | Begin Time<br>1:30 PM    | End Time<br>4:19 PM              |
| Reviewer:<br>Eryn Hunt        |                          |                                  |

| Summary of Findings      |                                     |                       |                        |                   |
|--------------------------|-------------------------------------|-----------------------|------------------------|-------------------|
| No. Rules Verified<br>79 | No. Rules with Non-compliances<br>2 | No. Serious Risk<br>0 | No. Moderate Risk<br>0 | No. Low Risk<br>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   |                  | 0          | 0         | 0     |
| <b>Total Under 2 Years</b>                                | 3                | 0          | 0         | 0     |
| Older Toddler   |                  | 0          | 0         | 0     |
| Preschool   |                  | 0          | 0         | 0     |
| School Age  |                  | 0          | 0         | 0     |
| <b>Total Capacity/Enrollment</b>                          | 6                | 0          | 0         | 0     |

| Staff-Child Ratios at the Time of Inspection |                 |                |         |
|--|-----------------|----------------|---------|
| Group  | Age Group/Range | Ratio Observed | Comment |
| PLACEMENTS 4/22/21                           |                 | 1 to 0         |         |



### 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: 05 Health & Safety**

Rule: 5101:2-13-16 First Aid Kit

Code: The program is required to meet the requirements for first aid kits.

Findings: During the inspection, it was determined that the program did not have a first aid kit onsite/ on the vehicle/ on a field trip as required, that included all items listed in the appendix A of the rule. The kit(s) were



missing the item(s) or the item(s) were not replaced after use, when expired or damaged listed in number(s) 11 below:

1. One roll of hypoallergenic first-aid tape;
2. Individually wrapped sterile gauze squares in assorted sizes;
3. Sterile adhesive bandages in assorted sizes;
4. Tweezers;
5. Gauze rolled bandage;
6. Triangular bandage;
7. Rounded end scissors;
8. Tooth preservation system or fresh chilled liquid milk in which to transport a lost permanent tooth, including a written reference indicating location of the refrigerator/freezer where milk is stored if a tooth preservation system is not part of the first aid kit (for programs serving school age children only);
9. A working digital thermometer;
10. Disposable non-latex gloves;
11. A working flashlight;
12. An instant cold pack that has not been activated or ice, including a written reference indicating location of the refrigerator/freezer where the ice is stored if an instant cold pack is not part of the first aid kit;
13. Sealable leak-proof plastic bags in assorted sizes or double bagged plastic bags that can be securely tied for materials soiled with blood or bodily fluids;
14. Pocket mask or face shield, appropriate; for all ages of children in care, for cardiopulmonary resuscitation (CPR) administration;
15. Soap or waterless sanitizer (field trip or transporting away from the program only);
16. Bottled water (field trip or transporting away from the program only).

Correct the violation and submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/22/2021

**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) 10,15 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. Management 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: 05/22/2021

**Rules In-Compliance/Not Verified**

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



| Rule  | Status    | Documenting Statement(s), If applicable |
|---|-----------|---|
| 5101:2-13-16 Disaster Plan                                      | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-18 Ratio and Group Size                               | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-18 Ratio and Group Size                               | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-07 Provider Requirements                              | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-11 Indoor Space                                       | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-08 Child Care Staff Requirements                      | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-04 Flammable and Combustible Materials in Type B Home | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-25 Topical Products and Lotions                       | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-13 Handwashing  | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-17 Programming  | Compliant |   |



| Rule  | Status    | Documenting Statement(s), If applicable |
|---|-----------|---|
| 5101:2-13-24 On-site Pools  | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-12 Safe Equipment   | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-04 Fire Safety for Type B Homes   | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-24 Parent Permission for Swimming   | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-20 Sleep and Napping Requirements for a Licensed Family Child Care Provider | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-13 Smoke Free   | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-08 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 |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-08 Review Policies and Procedures   | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |



|  |               |  |
|--|---------------|--|
| 5101:2-13-02 Voluntary Temporary Closure   | Compliant     |  |
| <b>Rule</b>                                | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-22 Fluid Milk                    | Compliant     |  |
| <b>Rule</b>                                | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-20 Crib and Playpen Requirements | Compliant     |  |
| <b>Rule</b>                                | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-14 Vehicle Requirements          | Compliant     |  |
| <b>Rule</b>                                | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-11 Fall Zone                     | Compliant     |  |
| <b>Rule</b>                                | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-08 Staff Records                 | Compliant     |  |
| <b>Rule</b>                                | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-16 Incident/Injury               | Compliant     |  |
| <b>Rule</b>                                | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-23 Diapering                     | Compliant     |  |
| <b>Rule</b>                                | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-12 Pets                          | Compliant     |  |
| <b>Rule</b>                                | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-24 Swimming Sites                | Compliant     |  |
| <b>Rule</b>                                | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-22 Food Handling                 | Compliant     |  |



| Rule   | Status    | Documenting Statement(s), If applicable |
|--|-----------|---|
| 5101:2-13-12 Safe Environment                                    | Compliant |   |
| 5101:2-13-11 Outdoor Equipment                                   | Compliant |   |
| 5101:2-13-19 Child Guidance                                      | Compliant |   |
| 5101:2-13-04 Heaters in a Type B Home                            | Compliant |   |
| 5101:2-13-14 Ratio and Supervision for Field and Routine Trips   | Compliant |   |
| 5101:2-13-16 Medical, Dental, and General Emergency Requirements | Compliant |   |
| 5101:2-13-16 Medical, Dental, and General Emergency Requirements | Compliant |   |
| 5101:2-13-25 Medication Storage                                  | Compliant |   |
| 5101:2-13-19 School Age Supervision                              | Compliant |   |
| 5101:2-13-07 Type B Provider - Foster Parent                     | Compliant |   |





| Rule  | Status    | Documenting Statement(s), If applicable |
|---|-----------|---|
| 5101:2-13-23 Infant Bottle and Food Preparation       | Compliant |   |
| Rule  | Status    | Documenting Statement(s), 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 |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-13 Clean Environment and Equipment          | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-16 Communicable Diseases                    | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-21 Sanitary Environment and Hygiene         | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-25 Medication Requirements                  | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-02 Information in Provider Portal           | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-14 Requirements for Field and Routine Trips | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-08 Whistle Blower                           | Compliant |   |



| Rule                                  | Status    | Documenting Statement(s), If applicable |
|---------------------------------------|-----------|---|
| 5101:2-13-16 Serious Incident         | Compliant |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-10 Professional Development | Compliant |   |
| 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 |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-22 Meals and Snacks         | Compliant |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-08 Substitute Requirements  | Compliant |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-08 Substitute Requirements  | Compliant |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-15 Health Conditions        | Compliant |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-02 Information in OCLQS     | Compliant |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-11 Outdoor Space            | Compliant |   |



| Rule                          | Status    | Documenting Statement(s), If applicable |
|-------------------------------|-----------|---|
| 5101:2-13-02 Provider Medical | Compliant |   |

| 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 |   |

| 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 |   |

| 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 |   |

| 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 Requirements | Compliant |   |

| Rule                               | Status    | Documenting Statement(s), If applicable |
|------------------------------------|-----------|---|
| Transitional Pandemic Requirements | Compliant |   |



Department of Education  
Department of Job and Family Services