

# 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      |
| CECIL, CAROLYN           | 00000929091268  | FCC - Type B Home |
| Address                  |                 | County            |
| 10320 WESTCHESTER AVENUE |                 | CUYAHOGA          |
|                          |                 |                   |
| CLEVELAND                |                 |                   |
| OH 44108                 |                 |                   |

|                    | Insp                           | ection Information |                   |              |
|--------------------|--------------------------------|--------------------|-------------------|--------------|
| Inspection Type    | Inspection So                  | соре               | Inspection Notice |              |
| Compliance         | Full                           |                    | Unannounced       |              |
| Inspection Date    | Begin Time                     |                    | End Time          |              |
| 05/03/2021         | 10:10 AM                       |                    | 11:00 AM          |              |
| Reviewer:          |                                |                    |                   |              |
| Renee Darling      |                                |                    |                   |              |
|                    | Sui                            | mmary of Findings  |                   |              |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk   | No. Moderate Risk | No. Low Risk |
| 79                 | 2                              | 0                  | 0                 | 2            |

| License Capacity and Enrollment at the Time of Inspection |                  |            | nspection |       |
|---|------------------|------------|-----------|-------|
| Age Group   | License Capacity | Enrollment |           |       |
|   | Totals           | Full Time  | Part Time | Total |
| Infant (Birth to < 18 m)                                  |                  | 0          | 0         | 0     |
| Young Toddler   |                  | 1          | 0         | 1     |
| Total Under 2 Years                                       | 3                | 1          | 0         | 1     |
| Older Toddler   |                  | 1          | 0         | 1     |
| Preschool   |                  | 1          | 0         | 1     |
| School Age  |                  | 3          | 0         | 3     |
| Total Capacity/Enrollment                                 | 6                | 5          | 0         | 6     |

| S             | taff-Child Ratios at the Time of Ins | pection        |         |
|---------------|--------------------------------------|----------------|---------|
| Group         | Age Group/Range                      | Ratio Observed | Comment |
| Carolyn Cecil | Mixed Age Group                      | 1 to 5         |         |



#### **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: 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/or inoculations not on file/ children exposed to other safety



Department of Education Department of Job and Family Services

concerns, and the provider does not have current shot records for a cat, that was present in her household. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/02/2021

### Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-20 Crib and Playpen Requirements

Code: The program is required to remove objects from cribs/playpens that could block the child.

Findings: During the inspection, it was determined that a child had been place in a crib or playpen with the following number 4 below which could obstruct a provider or child care staff member's view of the infant:

- 1. Busy box or other toy attached to the side of the crib or playpen.
- 2. A blanket hanging over the side of the crib or playpen.
- 3. Stuffed animal that is not large/soft enough that it could conform to the shape of the child's face.
- 4. Other The child was place in a playpen with a bottle, IPad, and small toy and thick blanket

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

Corrective Action Plan Due: 06/02/2021

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

| Rule                                       | Status              | Documenting Statement(s), If applicable |
|--|---------------------|---|
| 5101:2-13-14 Driver Requirements           | Compliant           |   |
| Rule                                       | Status              | Desumenting (tatement(s) If emplicable  |
| 5101:2-13-21 Evening and Overnight<br>Care | Status<br>Compliant | Documenting Statement(s), If applicable |
| Rule                                       | Status              | 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 |
|--------------------------------------|-----------|---|
| 5101:2-13-10 Health Training B       | Compliant |   |
|                                      |           |   |
|                                      |           |   |
|                                      | •         |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
|                                      |           |   |
| 5101:2-13-15 JFS 01234 'Child        | Compliant |   |
| Enrollment and Health Information'   |           |   |
|                                      |           |   |
|                                      |           |   |
| 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 |   |
|                                      |           |   |
|                                      |           |   |
|                                      |           |   |
| Dula                                 | Chatura   | Desumenting Statement(s) If emplicable  |
| 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 |   |
|                                      | compliant |   |
|                                      |           |   |
| L                                    |           | 1                                       |
| Dula                                 | Status    | Desumenting Statement(s) If emplicable  |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-08 Child Care Staff        | Compliant |   |
| Requirements                         |           |   |
|                                      |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-04 Flammable and           | Compliant |   |
| Combustible Materials in Type B Home |           |   |
| сопризные матената п туре в поше     |           |   |
|                                      |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-25 Topical Products and    | Compliant |   |
| Lotions                              |           |   |
|                                      |           |   |



| 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 | Compliant |   |
| Homes                               |           |   |
|                                     |           |   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-24 Parent Permission for  | Compliant |   |
| Swimming                            |           |   |
| 9                                   |           |   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-20 Sleep and Napping      | Compliant |   |
| Requirements for a Licensed Family  |           |   |
| Child Care Provider                 |           |   |
|                                     | 1         |   |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-13 Smoke Free             | Compliant |   |
| 5101.2 13 13 SHOKE LICE             |           |   |
|                                     |           |   |
|                                     | 1         |   |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-08 Employee Requirements  | Compliant |   |
| 5101.2-15-00 Employee Requirements  |           |   |
|                                     |           |   |
|                                     | 1         |   |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-16 Standard Precautions   | Compliant |   |
| 2101.2-12-10 Standard Frecautions   |           |   |
|                                     |           |   |
|                                     | 1         |   |
|                                     |           |   |
| 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            | Compliant           |   |
| Closure                                     |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-22 Fluid Milk                     | Compliant           |   |
|   | Compilant           |   |
|   |                     |   |
| Rule  | Status<br>Compliant | 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           |   |
|   |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-08 Staff Records                  | Compliant           |   |
|   |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-16 Incident/Injury                | Compliant           |   |
|   |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-23 Diapering                      | Compliant           |   |
|   |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-24 Swimming Sites                 | Compliant           |   |
|   |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-22 Food Handling                  | Compliant           |   |



|                                     | -                   |   |
|-------------------------------------|---------------------|---|
| Rule                                | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-12 Safe Environment       | Compliant           |   |
|                                     |                     |   |
|                                     |                     |   |
|                                     |                     |   |
| 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           |   |
|                                     |                     |   |
|                                     |                     |   |
|                                     |                     |   |
| Rule                                | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-16 First Aid Kit          | Compliant           |   |
|                                     |                     |   |
|                                     |                     |   |
| Dula                                | Chatura             | Decumenting Statement(s) If emplicable  |
| Rule                                | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-04 Heaters in a Type B    | Compliant           |   |
| Home                                |                     |   |
|                                     |                     |   |
| Rule                                | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-14 Ratio and Supervision  | Compliant           |   |
| for Field and Routine Trips         |                     |   |
| ·                                   |                     |   |
|                                     |                     |   |
| Rule                                | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-16 Medical, Dental, and   | Compliant           |   |
| General Emergency Requirements      |                     |   |
|                                     |                     |   |
| Rule                                | Status              | Documenting Statement(c) If applicable  |
| 5101:2-13-16 Medical, Dental, and   | Status<br>Compliant | Documenting Statement(s), If applicable |
|                                     | Compliant           |   |
| General Emergency Requirements      |                     |   |
|                                     | 1                   |   |
| Rule                                | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-25 Medication Storage     | Compliant           |   |
|                                     |                     |   |
|                                     |                     |   |
|                                     |                     |   |
| Rule                                | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-19 School Age Supervision | Compliant           |   |
|                                     |                     |   |
|                                     |                     |   |



| Rule                                  | Status    | Documenting Statement(s), If applicable |
|---------------------------------------|-----------|---|
| 5101:2-13-07 Type B Provider - Foster | Compliant |   |
| Parent                                |           |   |
|                                       |           |   |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-23 Infant Bottle and Food   | Compliant |   |
| Preparation                           |           |   |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-13 Toothbrushing            | Compliant | bocumenting statement(s), if applicable |
| 5101.2 15 15 100(10) usining          | compliant |   |
|                                       |           |   |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-17 Materials and            | Compliant |   |
| Equipment                             |           |   |
|                                       |           |   |
| Dula                                  | Status    |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-19 Supervision              | Compliant |   |
|                                       |           |   |
|                                       | 1         |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-13 Clean Environment and    | Compliant |   |
| Equipment                             |           |   |
|                                       |           |   |
|                                       | 1 -       |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-16 Communicable Diseases    | Compliant |   |
|                                       |           |   |
|                                       | 1         | 1                                       |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-21 Sanitary Environment     | Compliant |   |
| and Hygiene                           |           |   |
|                                       |           |   |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-25 Medication               | Compliant |   |
| Requirements                          |           |   |
|                                       | 1         | 1                                       |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-02 Information in Provider  | Compliant | Bocamenting statement(s), it applicable |
| Portal                                |           |   |
|                                       |           |   |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable |
|                                       |           |   |



| 5101:2-13-14 Requirements for Field and Routine Trips | Compliant           |   |
|---|---------------------|---|
|   | -                   |   |
| Rule<br>5101:2-13-08 Whistle Blower                   | Status              | Documenting Statement(s), If applicable |
| 5101.2-15-08 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                             | 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           |   |
|   |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-22 Meals and Snacks                         | Compliant           |   |
|   |                     |   |
| Dule  | Ctatus              | Decumenting (tetement(c)) if applicable |
| Rule<br>5101:2-13-08 Substitute                       | Status<br>Compliant | Documenting Statement(s), If applicable |
| Requirements  | Compliant           |   |
| Rule  | Statuc              | Decumenting Statement(c) If applicable  |
| 5101:2-13-08 Substitute                               | Status<br>Compliant | Documenting Statement(s), If applicable |
| Requirements  | Compliant           |   |
|   |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable |
| 5101:2-13-15 Health Conditions                        | Compliant           |   |
|   | I                   | ۱                                       |
| 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   |   |
| 6  |   |   |
|  |   |   |
|  |   |   |
| 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   |   |
| 5101.2-15-09 Background Checks   | Compliant   |   |
|  |   |   |
|  |   |   |
|  |   | 1   |
| Rule   | Status  | Documenting Statement(s), If applicable   |
| Rule<br>5101:2-13-09 Background Checks   | Status<br>Compliant   | Documenting Statement(s), If applicable   |
|  |   | Documenting Statement(s), If applicable   |
|  |   | Documenting Statement(s), If applicable   |
| 5101:2-13-09 Background Checks   | Compliant   |   |
| 5101:2-13-09 Background Checks Rule  | Compliant<br>Status   | Documenting Statement(s), If applicable Documenting Statement(s), If applicable   |
| 5101:2-13-09 Background Checks   | Compliant   |   |
| 5101:2-13-09 Background Checks<br>Rule   | Compliant<br>Status   |   |
| 5101:2-13-09 Background Checks<br>Rule   | Compliant<br>Status   |   |
| 5101:2-13-09 Background Checks Rule 5101:2-13-18 Attendance  | Compliant<br>Status<br>Compliant  | Documenting Statement(s), If applicable   |
| 5101:2-13-09 Background Checks Rule 5101:2-13-18 Attendance Rule   | Compliant Status Compliant Status Status  |   |
| 5101:2-13-09 Background Checks<br>Rule<br>5101:2-13-18 Attendance  | Compliant<br>Status<br>Compliant  | Documenting Statement(s), If applicable   |
| 5101:2-13-09 Background Checks Rule 5101:2-13-18 Attendance Rule   | Compliant Status Compliant Status Status  | Documenting Statement(s), If applicable   |
| 5101:2-13-09 Background Checks Rule 5101:2-13-18 Attendance Rule   | Compliant Status Compliant Status Status  | Documenting Statement(s), If applicable   |
| 5101:2-13-09 Background Checks         Rule         5101:2-13-18 Attendance         Rule         5101:2-13-02 Change of Location         Rule         Rule         Rule                  | Compliant          Status         Compliant         Status         Compliant         Status         Status         Status         Status         Status         Status         Status         Status         Status | Documenting Statement(s), If applicable   |
| 5101:2-13-09 Background Checks         Rule         5101:2-13-18 Attendance         Rule         5101:2-13-02 Change of Location   | Compliant Status Compliant Status Compliant Status Compliant  | Documenting Statement(s), If applicable Documenting Statement(s), If applicable   |
| 5101:2-13-09 Background Checks         Rule         5101:2-13-18 Attendance         Rule         5101:2-13-02 Change of Location         Rule         Rule         Rule                  | Compliant          Status         Compliant         Status         Compliant         Status         Status         Status         Status         Status         Status         Status         Status         Status | Documenting Statement(s), If applicable Documenting Statement(s), If applicable   |
| 5101:2-13-09 Background Checks         Rule         5101:2-13-18 Attendance         Rule         5101:2-13-02 Change of Location         Rule         Rule         Rule                  | Compliant          Status         Compliant         Status         Compliant         Status         Status         Status         Status         Status         Status         Status         Status         Status | Documenting Statement(s), If applicable Documenting Statement(s), If applicable   |
| 5101:2-13-09 Background Checks         Rule         5101:2-13-18 Attendance         Rule         5101:2-13-02 Change of Location         Rule         5101:2-13-07 Provider Requirements | Compliant         Status         Compliant         Status         Compliant         Status         Compliant         Status         Compliant         Status         Compliant                                      | Documenting Statement(s), If applicable         Documenting Statement(s), If applicable         Documenting Statement(s), If applicable         Documenting Statement(s), If applicable |
| 5101:2-13-09 Background Checks Rule 5101:2-13-18 Attendance Rule 5101:2-13-02 Change of Location Rule 5101:2-13-07 Provider Requirements Rule Rule Rule                                  | Compliant Status Compliant Status Compliant Status Compliant Status Compliant Status Status Status Status Status  | Documenting Statement(s), If applicable Documenting Statement(s), If applicable   |
| 5101:2-13-09 Background Checks Rule 5101:2-13-18 Attendance Rule 5101:2-13-02 Change of Location Rule 5101:2-13-07 Provider Requirements Rule 5101:2-13-03 Inspection                    | Compliant         Status         Compliant         Status         Compliant         Status         Compliant         Status         Compliant         Status         Compliant                                      | Documenting Statement(s), If applicable         Documenting Statement(s), If applicable         Documenting Statement(s), If applicable         Documenting Statement(s), If applicable |
| 5101:2-13-09 Background Checks Rule 5101:2-13-18 Attendance Rule 5101:2-13-02 Change of Location Rule 5101:2-13-07 Provider Requirements Rule Rule Rule                                  | Compliant Status Compliant Status Compliant Status Compliant Status Compliant Status Status Status Status Status  | Documenting Statement(s), If applicable         Documenting Statement(s), If applicable         Documenting Statement(s), If applicable         Documenting Statement(s), If applicable |



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