

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	
BOYD, AURELIA	00000939876498	FCC - Type B Home	
Address		County	
2336 SCOTTWOOD AV		LUCAS	
TOLEDO			
ОН 43620			

Inspection Information					
Inspection Type	Inspection So	соре	Inspection Notice		
Compliance	Full		Unannounced	Unannounced	
Inspection Date	nspection Date Begin Time		End Time	End Time	
03/23/2022	9:52 AM		12:18 PM		
Reviewer:					
Gehan Kamel					
Summary of Findings					
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk	
68	8	0	1	8	

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		4	0	4
Total Capacity/Enrollment	6	6	0	6

Staff-Child Ratios at the Time of Inspection			
Group Age Group/Range Ratio Observed Comment			Comment
One	3 years to < 4 years	1 to 1	



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

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to refrain from using and storing potentially hazardous items, toxic substances, and outdoor machinery around children.

Findings: During the inspection, a potentially hazardous item or toxic substance was used or stored where children present had access to it as noted in number(s) 1 below. The potentially hazardous substance or item that posed a risk to children was determined to be accessible to children in the kitchen under the kitchen sink.

- 1. Bleach.
- 2. Cleaning agent.
- 3. Fish tank chemicals.
- 4. Gasoline.
- 5. Pesticide.
- 6. Poison, including insect/rodent poison.
- 7. Flammable substance.
- 8. Windshield washer fluid.
- 9. Aerosol cans.
- 10. A lawn mower.
- 11. A weed trimmer.
- 12. Hedge trimmers.
- 13. A snow blower.
- 14. Other potentially hazardous substance, equipment or machinery: [].

Provide staff training. Submit the program's corrective action plan, which includes a statement that the potentially hazardous substance or item is no longer accessible to children and/or children will not be outside



when machinery is in use and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/22/2022

Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5101:2-13-04 Fire Safety for Type B Homes Code: The program is required to meet all requirements for fire extinguishers.

Findings: During the inspection, it was determined the fire extinguisher was not meeting the requirements in the following number(s) 4 listed below:

- 1. There was no fire extinguisher.
- 2. The fire extinguisher was not working.
- 3. The fire extinguisher was not rated at the minimum rating.
- 4. The fire extinguisher had expired.
- 5. The fire extinguisher was not located in the kitchen where food is provided for child care or cooking area.

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

Corrective Action Plan Due: 04/22/2022

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to have running water below the temperature of 120 degrees Fahrenheit.

Findings: During the inspection, it was determined the water temperature was 130 degrees in the kitchen. This temperature exceeds the requirement of remaining below 120 degrees Fahrenheit. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 04/22/2022



Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-13-12 Safe Equipment

Code: The program is required to provide a safe environment that may include items such as fans, pipes, space heaters, and air conditioning units.

Findings: During the inspection, it was determined that the program's equipment was unsafe as noted in the following numbers 4 below:

- 1. A fan was unstable and could easily tip over;
- 2. A fan had openings a finger could enter;
- 3. Pipes from the heat pump felt hot to the touch;
- 4. The space heater felt hot to the touch;
- 5. The position of the space heater was a tripping hazard;
- 6. The air-conditioning unit was not enclosed and was accessible to children on the playground;
- 7. Other [].

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

Corrective Action Plan Due: 04/22/2022

Domain: 05 Health & Safety

Rule: 5101:2-13-16 First Aid Kit/Standard Precautions

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 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 listed in number(s) 2 below:

- 1. One roll of 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: 04/22/2022

Domain: 06 Program Information

Rule: 5101:2-13-14 Requirements for Field and Routine Trips Code: The program is required to update routine permission forms annually.

Findings: In review of the program's records, it was determined that permission forms for routine trips were not being updated annually, as required. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/22/2022

Domain: 08 Staff Files

Rule: 5101:2-13-07 Provider Responsibilities Code: The program is required to have the current licensing rules available in a noticeable area on the premises.

Findings: During the inspection, it was determined the most current licensing rules were not available on the premises. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 04/22/2022

Domain: 08 Staff Files

Rule: 5101:2-13-07 Staff Records

Code: The provider is required to maintain current employee, child care staff members and resident records in the Ohio Professional Registry.

Findings: During the inspection, it was determined that employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 11 below:

1. The provider had not created or updated their individual profile in the OPR.



2. The provider had not created or updated the program's organizational dashboard in the OPR.

3. At least one employee, child care staff member, or substitute child care staff member had not created or updated their individual profile in the OPR.

4. At least one employee, child care staff member, or substitute child care staff member had not created an employment record in the OPR for the program on or before the first day of employment, including date of hire.5. At least one employee, child care staff member, or substitute child care staff member had not updated changes to positions or roles in the OPR within five calendar days of the change.

6. The program's organizational dashboard in the OPR was not updated within five business days when at least one employee, child care staff member, or substitute child care staff member's scheduled days and hours changed.

7. The program's organizational dashboard in the OPR was not updated within five business days when at least one employee, child care staff member, or substitute child care staff member's group assignments changed, if applicable.

8. The program's organizational dashboard in the OPR was not updated with the employment end date within five business days when at least one employee, child care staff member, or substitute child care staff member ended employment.

9. At least one resident over the age of eighteen had not created a profile and employment record for the family child care provider within five days of becoming a resident or turning eighteen.

10. The program's organizational dashboard in the OPR was not updated within five calendar days of a change in residency for at least one resident over the age of eighteen.

11.Other: Provider's group needs to be created in OCCRRA

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

Corrective Action Plan Due: 04/22/2022

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(s)13 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



Department of Education Department of Job and Family Services

- 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: 04/22/2022

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 License Visible	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Voluntary Temporary	Compliant	boomenting statement(s), in apprease
Closure		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Change of Location	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Information in OCLQS	Compliant	
Dula	Chathan	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Provider Medical	Compliant	
L	1	1
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-03 Inspection	Compliant	
Requirements		



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Building Requirements	Compliant	
for Type B Homes		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Flammable and	Compliant	
Combustible Materials in a Type B		
Home		
	l]
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Heaters in a Type B	Compliant	
Home	compliant	
Tiome		
	•	•
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-07 Type B Provider - Foster	Compliant	
Parent	compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Employee Requirements	Compliant	
	compliant	
		1
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Child Care Staff	Compliant	
Requirements		
	•	·
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Whistle Blower	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-09 Background Checks	Compliant	
-		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-10 Health Training	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-10 Professional	Compliant	
Development		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Outdoor Space	Compliant	
	-	



Rule	Status	Decumenting Statement(s) If applicable
		Documenting Statement(s), If applicable
5101:2-13-11 Outdoor Equipment	Compliant	
Rule	Status	Decumenting Statement(s) If applicable
5101:2-13-11 Fall Zone		Documenting Statement(s), If applicable
5101:2-13-11 Fail Zone	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Clean environment and	Compliant	
	Compliant	
equipment		
L	1	I
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Handwashing	Compliant	
5101.2-13-13 Handwashing	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Smoke Free	Compliant	
5101.2 15 15 5110 80 1100	Compliant	
<u></u>		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Toothbrushing	Compliant	
		·
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
5101:2-13-14 Driver Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Vehicle Inspections	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Vehicle Requirements	Compliant	



<u>Status</u> Compliant	Documenting Statement(s), If applicable
compliant	
	I
Chatura	Desumenting Statement(a) If emplicable
Status	Documenting Statement(s), If applicable
Compliant	
	Documenting Statement(s), If applicable
Compliant	
Status	Documenting Statement(s), If applicable
Compliant	
Status	Documenting Statement(s), If applicable
Compliant	
Chatura	Desumenting Statement(s) If emplicable
	Documenting Statement(s), If applicable
Compliant	
	Documenting Statement(s), If applicable
Compliant	
Status	Documenting Statement(s), If applicable
	f
Status	Documenting Statement(s), If applicable
compliant	
Chatura	
	Documenting Statement(s), If applicable
Compliant	
Status	Documenting Statement(s), If applicable
	Compliant Status Status Compliant Status Status Status Status Status Statu



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



Status	Documenting Statement(s), If applicable
Compliant	
Status	Documenting Statement(s), If applicable
Compliant	
Status	Documenting Statement(s), If applicable
Compliant	
Status	Documenting Statement(s), If applicable
Compliant	
Status	Documenting Statement(s), If applicable
Compliant	
Status	Documenting Statement(s), If applicable
Compliant	
Status	Decumenting Statement(c) If applicable
Compliant	Documenting Statement(s), If applicable
Status Compliant	Documenting Statement(s), If applicable
Status Compliant	Documenting Statement(s), If applicable
Status	Documenting Statement(s), If applicable
	Status Compliant Status Compliant Status Compliant Status Compliant Status Compliant Status Compliant Status Compliant Status Compliant



Rule		Status	Documenting Statement(s), If applicable
5101:2-	13-17 Materials and	Compliant	
Equipme	ent		