



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 CALHOUN, NARVETTA | Program Number 000000941707653 | Program Type FCC - Type B Home |
| Address 886 ROCKDALE AVE CINCINNATI OH 45229 | | County HAMILTON |

| Inspection Information | | |
|-------------------------------|--------------------------|----------------------------------|
| Inspection Type Compliance | Inspection Scope Full | Inspection Notice Unannounced |
| Inspection Date 10/04/2021 | Begin Time 10:40 AM | End Time 11:25 AM |
| Reviewer: Eryn Hunt | | |

| Summary of Findings | | | | |
|--------------------------|-------------------------------------|-----------------------|------------------------|-------------------|
| No. Rules Verified 78 | No. Rules with Non-compliances 4 | No. Serious Risk 0 | No. Moderate Risk 0 | No. Low Risk 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 | | 0 | 0 | 0 |
| School Age | | 0 | 0 | 0 |
| Total Capacity/Enrollment | 6 | 0 | 0 | 0 |

| Staff-Child Ratios at the Time of Inspection | | | |
|--|-----------------|----------------|---------|
| Group | Age Group/Range | Ratio Observed | Comment |
| PLACEMENTS 10/4/21 | | 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

[Greyed out area]

[Empty area]

Moderate Risk Non-Compliances

No Moderate Risk Non-Compliances were observed during this inspection

[Greyed out area]

[Empty area]

Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5101:2-13-03 Inspection Requirements

Code: The program staff is required to cooperate with inspections and complaint investigations.

Findings: During the inspection, it was determined that the program did not provide a written or electronic notice of the serious risk noncompliance (SRNC), as noted in number(s)

1,3below:



1. The written notice was not provided to all parents of enrolled children within fifteen business days of receipt of the noncompliance.
2. A written notice was not provided to the parents of enrolled children within five business days of receipt of the decision of the finding being upheld following the request for review.
3. A copy of the written notice wasn't provided to ODJFS.
4. The written notice did not include a statement informing parents of the ODJFS web site and/or the location of further information regarding the SRNC.

Submit the program's corrective action plan which includes a copy of the written notification to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/04/2021

Domain: 00 License & Approvals

Rule: 5101:2-13-03 Inspection Requirements

Code: The program is required to address all non-compliances documented on the licensing inspection report.

Findings: During the inspection, it was determined the program had not responded to the non-compliances addressed in the inspection report dated []. The rule requires that the program provide materials to correct non-compliances detailed in written inspection reports within the timeframe outlined in the report. Submit the program's corrective action plan, which includes a statement that current and future corrective action plans will be submitted timely, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/04/2021

Domain: 03 Postings & Equipment

Rule: 5101:2-13-17 Programming

Code: The program is required to have a daily schedule posted in a visible place.

Findings: During the inspection, it was determined the daily schedule was not posted/in a visible place in the program. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 11/04/2021

Domain: 03 Postings & Equipment

Rule: 5101:2-13-16 Medical, Dental, and General Emergency Requirements

Code: The program is required to post the completed JFS 01201 "Dental First Aid" and implement as required by rule.



Findings: During the inspection, it was determined the JFS 01201 "Dental First Aid" was not [completed/posted]. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 11/04/2021

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) 1,5,10,14 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: 11/04/2021



| 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 | |
| 5101:2-13-16 Disaster Plan | Compliant | |
| 5101:2-13-18 Ratio and Group Size | Compliant | |
| 5101:2-13-18 Ratio and Group Size | Compliant | |
| 5101:2-13-07 Provider Requirements | Compliant | |
| 5101:2-13-11 Indoor Space | Compliant | |



| Rule | Status | Documenting Statement(s), If applicable |
|---|-----------|---|
| 5101:2-13-08 Child Care Staff Requirements | Compliant | |
| 5101:2-13-04 Flammable and Combustible Materials in Type B Home | Compliant | |
| 5101:2-13-25 Topical Products and Lotions | Compliant | |
| 5101:2-13-13 Handwashing | Compliant | |
| 5101:2-13-24 On-site Pools | Compliant | |
| 5101:2-13-12 Safe Equipment | Compliant | |
| 5101:2-13-04 Fire Safety for Type B Homes | Compliant | |
| 5101:2-13-24 Parent Permission for Swimming | Compliant | |
| 5101:2-13-20 Sleep and Napping Requirements for a Licensed Family Child Care Provider | Compliant | |
| 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 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-22 Fluid Milk | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-20 Crib and Playpen Requirements | Compliant | |
| 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 | |
| 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 |
| 5101:2-13-12 Pets | 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 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Heaters in a Type B Home | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Ratio and Supervision for Field and Routine Trips | Compliant | |



| Rule | Status | Documenting Statement(s), If applicable |
|--|-----------|---|
| 5101:2-13-16 Medical, Dental, and General Emergency Requirements | Compliant | |
| 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 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 | |
| 5101:2-13-15 Health Conditions | Compliant | |
| 5101:2-13-02 Information in OCLQS | Compliant | |
| 5101:2-13-11 Outdoor Space | Compliant | |
| 5101:2-13-02 Provider Medical | Compliant | |
| 5101:2-13-09 Background Checks | Compliant | |
| 5101:2-13-09 Background Checks | Compliant | |
| Rule: 5101:2-13-09 Background Checks | Compliant | <p>Documenting Statement: In review of the staff records, it was determined that background check requirements had not been followed, for the individual(s) listed on the Employee Record Chart, as noted in number(s) 4 below:</p> <ol style="list-style-type: none"> 1. The JFS 01176 "Program Notification of Background Check Review for Child Care" the program received from the Department was not on file and the individual was not left alone with children. |



| | | |
|--|--|--|
| | | <p>2. The JFS 01177 “Individual Notification of Background Check Review for Child Care” was on file instead of the JFS 01176.</p> <p>3. The JFS 01176 on file was for a different program.</p> <p>4. The JFS 01176 “Program Notification of Background check Review for Child Care” was not on file at the program, but was on file at the county agency and the individual is eligible.</p> <p>Submit the program’s corrective action plan, which includes a statement that the correct form is now on file, to verify compliance with the requirements of this rule.</p> |
|--|--|--|

| 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 | |