



## 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>BROWN, GERALDINE                          | Program Number<br>000000945077933 | Program Type<br>FCC - Type B Home |
| Address<br>31 WOODLAND AVENUE<br><br>CAMPBELL<br>OH 44505 |                                   | County<br>MAHONING                |

| Inspection Information        |                          |                                  |
|-------------------------------|--------------------------|----------------------------------|
| Inspection Type<br>Compliance | Inspection Scope<br>Full | Inspection Notice<br>Unannounced |
| Inspection Date<br>10/19/2021 | Begin Time<br>8:55 AM    | End Time<br>10:02 AM             |
| Reviewer:<br>Carla Coristin   |                          |                                  |

| Summary of Findings      |                                     |                       |                        |                   |
|--------------------------|-------------------------------------|-----------------------|------------------------|-------------------|
| No. Rules Verified<br>78 | No. Rules with Non-compliances<br>1 | No. Serious Risk<br>0 | No. Moderate Risk<br>0 | No. Low Risk<br>1 |

| 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)                                 | 3                | 1          | 0         | 1     |
| Young Toddler   |                  | 0          | 0         | 0     |
| <b>Total Under 2 Years</b>                                |                  | 1          | 0         | 1     |
| Older Toddler   | 6                | 0          | 0         | 0     |
| Preschool   |                  | 0          | 0         | 0     |
| School Age  |                  | 2          | 0         | 2     |
| <b>Total Capacity/Enrollment</b>                          | 6                | 2          | 0         | 3     |

| Staff-Child Ratios at the Time of Inspection |                 |                |         |
|--|-----------------|----------------|---------|
| Group  | Age Group/Range | Ratio Observed | Comment |
| Geraldine Brown                              | Mixed Age Group | 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: 02 Safe & Sanitary Environment**

Rule: 5101:2-13-12 Safe Equipment

Code: The program is required to refrain from using trampolines, inflatable bounce houses, and ball pits.

Findings: During the inspection, it was determined that the provider had the following equipment noted in number one below at the program for the children's use:



1. Trampoline;
2. Inflatable bounce house;
3. Inflatable slide;
4. Inflatable equipment used for climbing and bouncing;
5. Ball pits;
6. Other [ ].

The rule prohibits the use of this equipment. Submit the program's corrective action plan to verify compliance with this rule.

Corrective Action Plan Due: 11/18/2021

**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 |   |
| 5101:2-13-10 Health Training B                                   | 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     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-04 Fire Safety for Type B Homes   | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-24 Parent Permission for Swimming   | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-20 Sleep and Napping Requirements for a Licensed Family Child Care Provider | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-13 Smoke Free   | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-08 Employee Requirements  | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-16 Standard Precautions   | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-14 Vehicle Inspections  | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-08 Review Policies and Procedures   | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 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     |  |



| Rule                                       | Status    | Documenting Statement(s), If applicable |
|--|-----------|---|
| 5101:2-13-20 Crib and Playpen Requirements | Compliant |   |
| 5101:2-13-14 Vehicle Requirements          | Compliant |   |
| 5101:2-13-11 Fall Zone                     | Compliant |   |
| 5101:2-13-08 Staff Records                 | Compliant |   |
| 5101:2-13-16 Incident/Injury               | Compliant |   |
| 5101:2-13-23 Diapering                     | Compliant |   |
| 5101:2-13-12 Pets                          | Compliant |   |
| 5101:2-13-24 Swimming Sites                | Compliant |   |
| 5101:2-13-22 Food Handling                 | Compliant |   |
| 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 |
| 5101:2-13-16 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     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-13 Toothbrushing                            | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-17 Materials and Equipment                  | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-19 Supervision                              | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-13 Clean Environment and Equipment          | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-16 Communicable Diseases                    | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-21 Sanitary Environment and Hygiene         | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-25 Medication Requirements                  | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-02 Information in Provider Portal           | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-14 Requirements for Field and Routine Trips | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 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 |   |