



## 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>GERCHY, JILL                      | Program Number<br>000000963769385 | Program Type<br>FCC - Type B Home |
| Address<br>160 WEST MAIN STREET ASHVILLE OH 43103 |                                   | County<br>PICKAWAY                |

### Inspection Information

|                                |                          |                                  |
|--------------------------------|--------------------------|----------------------------------|
| Inspection Type<br>Compliance  | Inspection Scope<br>Full | Inspection Notice<br>Unannounced |
| Inspection Day 1<br>06/26/2018 | Begin Time<br>1:00 PM    | End Time<br>3:30 PM              |
| Reviewer:                      |                          |                                  |

### Summary of Findings

|                          |                                     |                       |                        |                   |
|--------------------------|-------------------------------------|-----------------------|------------------------|-------------------|
| No. Rules Verified<br>77 | No. Rules with Non-compliances<br>5 | No. Serious Risk<br>0 | No. Moderate Risk<br>0 | No. Low Risk<br>5 |
|--------------------------|-------------------------------------|-----------------------|------------------------|-------------------|

### License Capacity and Enrollment at the Time of Inspection

| Age Group                        | License Capacity | Enrollment |           | Total |
|----------------------------------|------------------|------------|-----------|-------|
|                                  | Totals           | Full Time  | Part Time |       |
| Infant ( Birth to < 18 m)        |                  | 0          | 0         | 0     |
| Young Toddler                    |                  | 0          | 0         | 0     |
| <b>Total Under 2 ½ Years</b>     |                  | 0          | 0         | 0     |
| Older Toddler                    |                  | 0          | 0         | 0     |
| Preschool                        |                  | 2          | 0         | 2     |
| School Age                       |                  | 4          | 0         | 4     |
| <b>Total Capacity/Enrollment</b> |                  | 6          | 0         | 6     |

### Staff-Child Ratios at the Time of Inspection

| Group   | Age Group/Range | Ratio Observed | Comment   |
|---------|-----------------|----------------|---|
| Primary | Mixed Age Group | 1 to 6         | Group consisted of preschoolers and school agers. |



### 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**

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#### Moderate Risk Non-Compliances

**No Moderate Risk Non-Compliances were observed during this inspection**

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#### Low Risk Non-Compliances

**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 in the following room(s) Kitchen Sink. 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: 07/27/2018

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**Domain: 04 Indoor/Outdoor Space**

Rule: 5101:2-13-11 Outdoor Space

Code: The program staff is required to protect the children from hazardous conditions in the outdoor play area.

Findings: he following hazardous conditions existed in the outdoor play area, as noted in number(s) 2 below:

1. There was broken glass.
2. There were tall weeds.
3. There was poison ivy.
4. There were protruding bolts.
5. There were tree branches.
6. There was mold visible.
7. The sandbox was contaminated.
8. There were thistles with pricklers.
9. There were bird droppings.
10. Other [ ].

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

Corrective Action Plan Due: 07/27/2018

**Domain: 05 Health & Safety**

Rule: 5101:2-13-22 Meals and Snacks

Code: The program is required to post a current menu for the week.

Findings: During this inspection, it was observed that the current menu for this week was not 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: 07/27/2018

**Domain: 05 Health & Safety**

Rule: 5101:2-13-16 Disaster Plan

Code: The program is required to have a completed written disaster plan.

Findings: On the day of the inspection, it was determined the program's written disaster plan was not provided to all child care staff and employees and was missing the information in number(s) 1-16below:

Procedures:

1. Weather emergencies and natural disasters which include severe thunderstorms, tornadoes, flash flooding, major snowfall, blizzards, ice storms or earthquakes;
2. Emergency outdoor and indoor lockdown or evacuation due to threats of violence which includes active shooter, bioterrorism or terrorism;
3. Emergency or disaster evacuations due to hazardous materials and spills, gas leaks or bomb threats;



4. Outbreaks, epidemics or other infectious disease emergencies;
5. Loss of power, water, or heat;
6. Other threatening situations that may pose a health or safety hazard to the children in the provider.

Details:

7. Shelter in place or evacuation, how the provider will care for and account for the children until they can be reunited with the parent;
8. Assisting infants and children with special needs and/or health conditions;
9. Emergency contact information for parents and the provider;
10. Procedures for notifying and communicating with parents regarding the location of the children if evacuated;
11. Procedures for communicating with parents during loss of communications, no phone or internet service available;
12. The location of supplies and procedures for gathering necessary supplies for staff and children if required to shelter in place;
13. What to do if a disaster occurs during the transport of children or when on a field trip or routine trip;
14. Training of staff or reassignment of staff duties as appropriate;
15. Updating the plan on a yearly basis;
16. Contact with local emergency management officials.

Add the missing information to the disaster plan and submit a copy and a written statement verifying corrective action.

Corrective Action Plan Due: 07/27/2018

**Domain: 05 Health & Safety**

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

Code: The program is required to complete and document the required drills.

Findings: During the inspection, it was determined that the required drills were not completed for item number(s) 3 below:

1. Monthly fire drills
2. Monthly weather emergency drills (March through September)
3. Quarterly emergency/lockdown drills.

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

Corrective Action Plan Due: 07/27/2018

**Rules In-Compliance/Not Verified**



| Rule   | Status    | Documenting Statement(s), If applicable |
|--|-----------|---|
| 5101:2-13-14 Driver Requirements                                 | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-21 Evening and Overnight Care                          | Compliant |   |
| 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 Enrollment and Health Information' | 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                                    | Compliant |   |



| Requirements  |           |   |
|---|-----------|---|
| 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 |   |
| 5101:2-13-16 Standard Precautions           | Compliant |   |
| 5101:2-13-14 Vehicle Inspections            | Compliant |   |
| 5101:2-13-08 Review Policies and Procedures | Compliant |   |
| 5101:2-13-02 Voluntary Temporary Closure    | Compliant |   |
| 5101:2-13-22 Fluid Milk                     | Compliant |   |
| 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 |   |
| Rule  | Status    | Documenting Statement(s), If applicable |



|   |               |  |
|---|---------------|--|
| 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     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-11 Outdoor Equipment  | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-19 Child Guidance   | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-16 First Aid Kit  | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-04 Heaters in a Type B Home   | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-03 Compliance Inspection and Complaint Investigation of a Licensed Family Child Care Provider | Compliant     |  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-14 Ratio and Supervision  | Compliant     |  |





| Rule   | Status    | Documenting Statement(s), If applicable |
|--|-----------|---|
| for Field and Routine Trips                                      |           |   |
| 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 |   |
| 5101:2-13-25 Medication Requirements                  | Compliant |   |
| 5101:2-13-02 Information in Provider Portal           | Compliant |   |
| 5101:2-13-14 Requirements for Field and Routine Trips | Compliant |   |
| 5101:2-13-08 Whistle Blower                           | Compliant |   |
| 5101:2-13-16 Serious Incident                         | Compliant |   |
| 5101:2-13-10 Professional Development                 | Compliant |   |
| 5101:2-13-20 Use of Crib and Playpen                  | Compliant |   |
| 5101:2-13-15 Child's Medical                          | Compliant |   |
| 5101:2-13-08 Substitute Requirements                  | Compliant |   |
| 5101:2-13-08 Substitute                               | Compliant |   |



| Requirements                       |           |   |
|------------------------------------|-----------|---|
| 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 |
| 5101:2-13-02 Provider Medical      | Compliant |   |
| Rule                               | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-07 Provider Requirements | Compliant |   |
| Rule                               | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-09 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 |   |