



## 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>REDDAE, NEGHESTI                          | Program Number<br>000000967622129 | Program Type<br>FCC - Type B Home |
| Address<br>5641 FOXGLOVE LN<br><br>CINCINNATI<br>OH 45239 |                                   | County<br>HAMILTON                |

| Inspection Information        |                          |                                |
|-------------------------------|--------------------------|--------------------------------|
| Inspection Type<br>Compliance | Inspection Scope<br>Full | Inspection Notice<br>Announced |
| Inspection Date<br>07/01/2021 | Begin Time<br>11:15 AM   | End Time<br>11:46 AM           |
| Reviewer:<br>Jacob Downard    |                          |                                |

| Summary of Findings      |                                     |                       |                        |                   |
|--------------------------|-------------------------------------|-----------------------|------------------------|-------------------|
| No. Rules Verified<br>78 | No. Rules with Non-compliances<br>2 | No. Serious Risk<br>0 | No. Moderate Risk<br>1 | No. Low Risk<br>1 |

| 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)                                 | 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  |                  | 0          | 0         | 0     |
| <b>Total Capacity/Enrollment</b>                          | 6                | 0          | 0         | 1     |

| Staff-Child Ratios at the Time of Inspection |                  |                |         |
|--|------------------|----------------|---------|
| Group  | Age Group/Range  | Ratio Observed | Comment |
| 7/1/2021                                     | 0 to < 12 months | 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: 08 Staff Files**

Rule: 5101:2-13-09 Background Checks

Code: The individual is required to update background checks every five years.

Findings: In review of the staff records, it was determined that background checks were not updated every five years for the individual(s) listed on the Employee Record Chart as noted in number 3 below:

1. Provider;
2. Administrator;
3. Child care staff member, employee;
4. Substitute child care staff member;
5. Resident.

Submit the program's corrective action plan, which includes a statement the background check update has been requested, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 08/05/2021



**Low Risk Non-Compliances**

**Domain: 08 Staff Files**

Rule: 5101:2-13-10 Health Training B

Code: The program staff is required to complete the prescribed child abuse and neglect course within the required timeframe.

Findings: In review of records, it was determined the CCSM or Substitute CCSM was left alone with children and did not have current valid documentation for training(s) listed in number 10 and 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 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: 08/05/2021

**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 |   |
| 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 |   |
| 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 |   |
| 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 |   |



| 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 |   |
| 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 |   |
| 5101:2-13-11 Outdoor Equipment                                 | Compliant |   |
| 5101:2-13-19 Child Guidance                                    | Compliant |   |
| 5101:2-13-16 First Aid Kit                                     | Compliant |   |
| 5101:2-13-04 Heaters in a Type B Home                          | Compliant |   |
| 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     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-16 Medical, Dental, and General Emergency Requirements | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-25 Medication Storage                                  | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-19 School Age Supervision                              | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-07 Type B Provider - Foster Parent                     | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 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     |  |





| 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 |   |
| 5101:2-13-22 Meals and Snacks                         | Compliant |   |



| Rule                                 | Status    | Documenting Statement(s), If applicable |
|--------------------------------------|-----------|---|
| 5101:2-13-08 Substitute Requirements | Compliant |   |
| 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 |   |
| 5101:2-13-09 Background Checks       | Compliant |   |
| 5101:2-13-18 Attendance              | Compliant |   |
| 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 |   |