



## 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 ABNER, STEPHANIE	Program Number 000000968078565	Program Type FCC - Type B Home
Address 111 CLEARBROOK DRIVE  FRANKLIN OH 45005		County WARREN

Inspection Information		
Inspection Type Compliance	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 03/14/2023	Begin Time 11:10 AM	End Time 2:10 PM
Reviewer: Ruth Stilgenbauer		

Summary of Findings				
No. Rules Verified 68	No. Rules with Non-compliances 6	No. Serious Risk 0	No. Moderate Risk 0	No. Low Risk 10

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	2	0	2
Preschool		1	0	1
School Age		1	0	1
<b>Total Capacity/Enrollment</b>	6	4	0	5

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
mixed group a	Mixed Age Group	1 to 5	



### Summary of Non-Compliances

If a program disagrees with a licensing finding, the program may request a review of the finding(s). Ohio Administrative Code 5101:2-12-03 and 5101:2-13-03 detail the process for submitting a request for review. The request for review must be submitted within seven business days from the receipt of the licensing report. In addition, if the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited.

#### Serious Risk Non-Compliances

No Serious Risk Non-Compliances were observed during this inspection


#### Moderate Risk Non-Compliances

No Moderate Risk Non-Compliances were observed during this inspection


#### Low Risk Non-Compliances

**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: 04/15/2023

**Domain: 08 Staff Files**

Rule: 5101:2-13-10 Health Training

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) 6, 12, 14 below:

1. First Aid - expired training
2. First Aid - did not have verification of the completion of First Aid training
3. First Aid - documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
4. CPR - expired training
5. CPR - had not taken CPR training
6. CPR - did not have verification of the completion of CPR training
7. CPR - training taken did not include all age groups and developmental levels of all children in care
8. CPR - documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
9. CPR- audiovisual or electronic media training taken did not include an in-person component of the training
10. Communicable Disease - expired training
11. Communicable Disease - had not taken CD training
12. Communicable Disease - did not have verification of the completion of CD training
13. Communicable Disease - documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
14. Child Abuse - expired training
15. Child Abuse - had not taken Child Abuse training
16. Child Abuse - 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: 04/15/2023

**Domain: 08 Staff Files**

Rule: 5101:2-13-10 Professional Development

Code: The program staff is required to complete at least six clock hours of training annually.



Findings: In review of records, it was determined the Child Care Staff Member(s) indicated on the Employee Record Chart did not meet the annual professional development requirement as noted in number(s) 1, 4, 6

1. The child care staff member(s) had not completed at least six hours of professional development.
2. Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.
3. Training topic did not meet the requirements listed in appendix A of this rule.
4. Documentation of training did not meet the requirements of this rule.
5. The substitute(s) had been used more than ninety days annually between July first and June thirtieth and had not completed at least six hours of professional development.
6. Other there are not enough training hours in the OPR or on file at the home. biennium requires 30 hours , at this point in biennium should have more than half of those hours complete..

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

Corrective Action Plan Due: 04/15/2023

**Domain: 08 Staff Files**

Rule: 5101:2-13-10 Professional Development

Code: The program staff is required to have copies of the training documentation on file at the program.

Findings: During the inspection, it was determined the provider did not provide current staff with copies of their training documentation within five business days upon request or separation from employment and the training was not available in the OPR. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 04/15/2023

**Domain: 08 Staff Files**

Rule: 5101:2-13-10 Health Training

Code: The program is required to meet the health training requirements.

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(s) 4, 10, 14 below:

1. First Aid - expired training
2. First Aid - did not have verification of completion of First Aid training
3. First Aid - documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
4. CPR - expired training
5. CPR - had not taken CPR training



6. CPR - did not have verification of the completion of CPR training
7. CPR - training taken did not include all age groups the program serves and developmental levels of all children in care
8. CPR - documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
9. CPR - audiovisual or electronic media training taken by staff did not include an in-person component of the training
10. Communicable Disease - expired training
11. Communicable Disease - had not taken CD training
12. Communicable Disease - did not have verification of the completion of the CD training
13. Communicable Disease - documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
14. Child Abuse - expired training
15. Child Abuse - had not taken Child Abuse training
16. Child Abuse - 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: 04/15/2023

**Domain: 08 Staff Files**

Rule: 5101:2-13-10 Professional Development

Code: The program staff is required to have documentation on file at the program of all trainings.

Findings: During the inspection, it was determined the provider did not have training documentation on file. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 04/15/2023

**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 current licensing rules were not [available/available in a noticeable area] 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: 04/15/2023



**Domain: 08 Staff Files**

Rule: 5101:2-13-07 Provider Responsibilities

Code: The provider is required to have hours of availability to meet with parents posted in a noticeable place.

Findings: During the inspection, it was determined that the provider did not have hours of availability to meet with parents a noticeable location. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 04/15/2023

**Domain: 09 Children's Files**

Rule: 5101:2-13-25 Medication Requirements

Code: The program is required to have a current and completed JFS 01217 on file.

Findings: During the inspection, it was determined that the program did not meet the requirements for the JFS 01217 "Request for Administration of Medication for Child Care" as noted in number(s) 4 below:

1. The JFS 01217 was missing or incomplete for a medical food that was not required by a JFS 01236 "Child Medical/Physical Care Plan for Child Care".
2. The program used an old version of the JFS 01217.
3. The signature date on the JFS 01217 exceeded more than 12 months.
4. The time period to administer medication on the JFS 01217 was exceeded.
5. The JFS 01217 included more than one child's name.
6. The JFS 01217 included more than one medication or medical food.
7. The prescription label was not current.

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

Corrective Action Plan Due: 04/15/2023

**Domain: 09 Children's Files**

Rule: 5101:2-13-15 Child Medical and Enrollment Records

Code: The program is required to have a completed medical on file for each child.

Findings: In review of of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in number(s) 1 & 8 below

:

1. No medical was on file for at least one child



2. Medical(s) on file was not updated every 13 months
3. Medical(s) were missing child's name and date of birth
4. Medical(s) were missing the date of the medical examination
5. The date of the exam was more than 13 months prior to the date the form was signed
6. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care
7. Medical(s) were missing the signature, business address and telephone number of the physician, physician's assistant(PA), advance practice nurse (APN) or certified nurse practitioner (CNP) who examined the child
8. Medical(s) were missing a record of immunizations the child has had specifying month, day and year
9. Medical(s) were missing a statement from the physician, PA, APN, or CNP that the child has been immunized or is in the process of being immunized against the diseases required by division 5104.014 of the Revised Code and found in appendix A to this rule
10. Medical(s) were missing a statement from the child's parent or guardian that he or she has declined to have the child immunized against the disease for reasons of conscience, including religious convictions
11. Other [ ]

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

Corrective Action Plan Due: 04/15/2023

**Rules In-Compliance/Not Verified**

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 License Visible	Compliant	
5101:2-13-02 Voluntary Temporary Closure	Compliant	
5101:2-13-02 Change of Location	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
5101:2-13-03 Inspection Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Building Requirements for Type B Homes	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
5101:2-13-04 Flammable and Combustible Materials in a Type B Home	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
5101:2-13-05 Denial, Revocation, and Suspension	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-07 Staff Records	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





5101:2-13-08 Child Care Staff Requirements	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-08 Whistle Blower	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-09 Background Checks	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-11 Outdoor Space	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>
5101:2-13-11 Fall Zone	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-12 Safe Equipment	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-12 Safe Environment	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>
5101:2-13-13 Handwashing	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-13 Smoke Free	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Toothbrushing	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
5101:2-13-14 Ratio and Supervision for Field and Routine Trips	Compliant	
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	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Health Conditions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Child Records Retention and Confidentiality	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Medical, Dental, and General Emergency Plan	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Emergency Drills	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 First Aid Kit/Standard Precautions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Communicable Diseases	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Incident/Injury	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 Attendance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 School Age Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 Child Guidance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-20 Sleep and Nap Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-20 Crib and Playpen Requirements	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-21 Evening and Overnight Care	Compliant	
5101:2-13-21 Sanitary Environment and Hygiene	Compliant	
5101:2-13-22 Meals and Snacks	Compliant	
5101:2-13-22 Fluid Milk	Compliant	
5101:2-13-22 Food Handling	Compliant	
5101:2-13-23 Infant Daily Care	Compliant	
5101:2-13-23 Infant Bottle and Food Preparation	Compliant	
5101:2-13-23 Diapering	Compliant	
5101:2-13-24 Parent Permission for Swimming	Compliant	
5101:2-13-18 Group Size and Ratios	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-13 Written Policies and Procedures	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Carbon Monoxide Detectors - Type B Only	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Indoor Space	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-24 Swimming Sites	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-17 Materials and Equipment	Compliant	