



## 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 PERKINS, TIFFANI C	Program Number 000000969224528	Program Type FCC - Type B Home
Address 6819 STILLMORE DRIVE  ENGLEWOOD OH 45322		County MONTGOMERY

Inspection Information		
Inspection Type Compliance	Inspection Scope Full	Inspection Notice Announced
Inspection Date 05/06/2021	Begin Time 6:45 PM	End Time 8:00 PM
Reviewer: Avery Wynings		

Summary of Findings				
No. Rules Verified 79	No. Rules with Non-compliances 6	No. Serious Risk 0	No. Moderate Risk 0	No. Low Risk 6

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	0	0	0
Young Toddler		0	0	0
<b>Total Under 2 Years</b>		0	0	0
Older Toddler	6	0	0	0
Preschool		0	2	2
School Age		0	3	3
<b>Total Capacity/Enrollment</b>	6	0	5	5

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Honey Bees Group		1 to 0	Children normally in attendance were delayed in arriving from another Program



Department of Education  
Department of Job and Family Services

			at time of inspection.
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### 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**

[Empty box for serious risk non-compliance details]

[Empty box for serious risk non-compliance details]

#### Moderate Risk Non-Compliances

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

[Empty box for moderate risk non-compliance details]

[Empty box for moderate risk non-compliance details]

#### Low Risk Non-Compliances

**Domain: 00 License & Approvals**

Rule: 5101:2-13-04 Fire Safety for Type B Homes

Code: The program is required to maintain smoke detectors in the appropriate areas of the program building.

Findings: During the inspection, it was determined the following space did not contain a working smoke detector in child care area. Obtain a smoke detector and submit the purchase receipt as part of the program's corrective action plan to verify compliance with the requirement of the rule.



Corrective Action Plan Due: 06/06/2021

**Domain: 01 Ratio & Supervision**

Rule: 5101:2-13-18 Attendance

Code: The program is required to maintain attendance records.

Findings: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number- 2 below:

1. No attendance record was being maintained.
2. The attendance record was not being consistently completed.
3. The attendance documentation was not kept at the program for a period of one year.

Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/06/2021

**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)- 1, 2 & 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: 06/06/2021

**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 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: 06/06/2021

**Domain: 09 Children's Files**

Rule: 5101:2-13-15 JFS 01234 'Child Enrollment and Health Information'

Code: The program is required to have a completed JFS 01234 "Child Enrollment and Health Information for Child Care" on file on the premises for each child.

Findings: In review of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in number(s)- 2 & 13 below.

1. No enrollment form was completed for at least one child
2. The current JFS 01234 was not completed for at least one child
3. Complete parent information
4. Complete emergency contact information
5. Complete physician information
6. Information regarding the parent list
7. Health information
8. Additional information for all boxes checked "yes"
9. Emergency transportation information
10. Parent/guardian's signature
11. Diapering Statement
12. Acknowledgement of Policies and Procedures
13. Enrollment form for at least one child was not updated by either the parent or the administrator



14. Enrollment form for at least one child was not signed by the administrator

15. Other [ ]

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

Corrective Action Plan Due: 06/06/2021

**Domain: 09 Children's Files**

Rule: 5101:2-13-15 Child's Medical

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 & 2 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. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care
6. 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
7. Medical(s) were missing a record of immunizations the child has had specifying month, day and year
8. 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
9. 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
10. Other [ ]

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

Corrective Action Plan Due: 06/06/2021

**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	
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
5101:2-13-16 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	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-25 Topical Products and Lotions	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>
5101:2-13-17 Programming	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>
5101:2-13-24 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	





Rule	Status	Documenting Statement(s), If applicable
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	
5101:2-13-16 Incident/Injury	Compliant	
5101:2-13-23 Diapering	Compliant	
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	
5101:2-13-23 Infant Bottle and Food Preparation	Compliant	
5101:2-13-13 Toothbrushing	Compliant	
5101:2-13-17 Materials and Equipment	Compliant	
5101:2-13-19 Supervision	Compliant	
5101:2-13-13 Clean Environment and Equipment	Compliant	
5101:2-13-16 Communicable Diseases	Compliant	
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	



Rule	Status	Documenting Statement(s), If applicable
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	
5101:2-13-22 Meals and Snacks	Compliant	
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	
Rule	Status	Documenting Statement(s), If applicable



5101:2-13-11 Outdoor Space	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-02 Provider Medical	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>
5101:2-13-09 Background Checks	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>
5101:2-13-09 Background Checks	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-02 Change of Location	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-07 Provider Requirements	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-03 Inspection Requirements	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Transitional Pandemic Requirements	Compliant	