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 | Program Number | Program Type |
| Pollock, Ashli | 000000993282392 | FCC - Type B Home |
| Address | | County |
| 1431 Schneider St NE | | STARK |
| | | |
| Canton | | |
| OH 44721 | | |

| Inspection Information | | | | |
|------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type | Inspection So | cope | Inspection Notice | |
| Compliance | Full | | Announced | |
| Inspection Date | Begin Time | | End Time | |
| 09/19/2022 | 2:00 PM | | 3:40 PM | |
| Reviewer: | | | | |
| Raquel Borsellino | | | | |
| Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 68 | 6 | 0 | 0 | 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) | | 1 | 0 | 1 |
| Young Toddler | | 0 | 0 | 0 |
| Total Under 2 Years | 3 | 1 | 0 | 1 |
| Older Toddler | | 1 | 0 | 1 |
| Preschool | | 1 | 0 | 1 |
| School Age | | 0 | 0 | 0 |
| Total Capacity/Enrollment | 6 | 2 | 0 | 3 |

| Staff-Child Ratios at the Time of Inspection | | | |
|--|-----------------|----------------|---------|
| Group | Age Group/Range | Ratio Observed | Comment |
| Ashli P | Mixed Age Group | 1 to 3 | |



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 | | | |
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| 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: 5101:2-13-13 Clean environment and equipment

Code: The program is required to clean and sanitize or send home any dishes provided by the parent.

Findings: During the inspection, it was determined that items in the kitchen were not being cleaned and sanitized after each use as noted in numbers 1 & 11 below:

- 1. Cups
- 2. Infant spoons
- 3. Bowls
- 4. Silverware
- 5. Individual containers for water
- 6. Sippy cups
- 7. Plates
- 8. Dishes
- 9. Containers
- 10. Bottles
- 11. high chair tray

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

Corrective Action Plan Due: 10/03/2022

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-13-11 Outdoor Equipment

Code: Outdoor equipment is required to be safe.

Findings: During the inspection, it was determined that outdoor play equipment was unsafe as noted in the numbers 4, 5 & 9 below:

- 1. There was rust exposed.
- 2. There were protruding bolts.
- 3. There were cracks.
- 4. There were holes.
- 5. There was splintering wood.
- 6. There were sharp edges or points.
- 7. There were toxic substances.
- 8. There were tripping hazards.
- 9. Lattice is being used as a barrier on the platform of the playset. This is not a safe barrier for a platform that is 6-8 ft off the ground.

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

Corrective Action Plan Due: 10/20/2022

Domain: 05 Health & Safety

Rule: 5101:2-13-22 Fluid Milk

Code: The program is to ensure that children are served age-appropriate fluid milk.



Findings: During the inspection, it was determined that the program did not have the type of milk on-site to ensure that all children were served age-appropriate fluid milk requirements. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/03/2022

Domain: 06 Program Information

Rule: 5101:2-13-24 On-site Pools

Code: The provider and program staff are required to make pools on the premises inaccessible to children.

Findings: During the inspection, it was determined a pool was located on the premises and was accessible to children in care as there was no fence or physical barrier as outlined in rule in that prevents access to the pool. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 10/20/2022

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 trainings listed in numbers 10 & 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
- 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: 10/20/2022

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 1.

- 1. The child care staff member 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 [].

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

Corrective Action Plan Due: 10/20/2022

Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-02 License Visible | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-02 Voluntary Temporary | Compliant | |
| Closure | | |

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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Information in OCLQS | Compliant | bootinenting statement(s), it approaches |
| 5101.2-13-02 information in OCLQS | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Provider Medical | Compliant | |
| 3101.2-13-02 FTOVIder Iviedical | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-03 Inspection | Compliant | |
| - | Compilant | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Building Requirements | Compliant | |
| for Type B Homes | | |
| Tot Type B Hoffles | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Fire Safety for Type B | Compliant | |
| Homes | ' | |
| Homes | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Flammable and | Compliant | |
| Combustible Materials in a Type B | | |
| Home | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Heaters in a Type B | Compliant | |
| Home | | |
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| Home | | |
| Home | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| | Status Compliant | Documenting Statement(s), If applicable |
| Rule | | Documenting Statement(s), If applicable |
| Rule | | Documenting Statement(s), If applicable |
| Rule | | Documenting Statement(s), If applicable |
| Rule 5101:2-13-07 Staff Records | Compliant | |
| Rule 5101:2-13-07 Staff Records Rule | Compliant | Documenting Statement(s), If applicable Documenting Statement(s), If applicable |
| Rule 5101:2-13-07 Staff Records | Compliant | |
| Rule 5101:2-13-07 Staff Records Rule | Compliant | |
| Rule 5101:2-13-07 Staff Records Rule | Compliant | |
| Rule 5101:2-13-07 Staff Records Rule | Compliant | |
| Rule 5101:2-13-07 Staff Records Rule 5101:2-13-08 Employee Requirements | Status Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-07 Staff Records Rule 5101:2-13-08 Employee Requirements Rule | Status Compliant Status Status | |
| Rule 5101:2-13-07 Staff Records Rule 5101:2-13-08 Employee Requirements | Status Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-07 Staff Records Rule 5101:2-13-08 Employee Requirements Rule 5101:2-13-08 Child Care Staff | Status Compliant Status Status | Documenting Statement(s), If applicable |
| Rule 5101:2-13-07 Staff Records Rule 5101:2-13-08 Employee Requirements Rule | Status Compliant Status Status | Documenting Statement(s), If applicable |

| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-08 Whistle Blower | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-09 Background Checks | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-11 Outdoor Space | Compliant | Documenting Statement(s), it applicable |
| 3101.2-13-11 Outdoor Space | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-11 Fall Zone | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-12 Safe Equipment | Compliant | |
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| Rule | Status | Decumenting Statement/s) If applicable |
| 5101:2-13-12 Safe Environment | | Documenting Statement(s), If applicable |
| 5101:2-13-12 Sale Environment | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Handwashing | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Smoke Free | Compliant | |
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| Rule | Status | Documenting Statement(s) If applicable |
| 5101:2-13-13 Toothbrushing | Status | Documenting Statement(s), If applicable |
| 3101.2-13-13 TOOLIIDIUSIIIIR | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Requirements for Field | Compliant | 0 477 |
| and Routine Trips | 1 2 1 | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-14 Ratio and Supervision | Compliant | - Comment of the control of the cont |
| for Field and Routine Trips | · · | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Driver Requirements | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Vehicle Inspections | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Vehicle Requirements | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-15 Child Medical and | Compliant | bodinenting statement(s), it applicable |
| Enrollment Records | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-15 Health Conditions | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-15 Child Records Retention | Compliant | Bocamenting statement(3), if applicable |
| and Confidentiality | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Medical, Dental, and | Compliant | |
| General Emergency Plan | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Emergency Drills | Compliant | bocamenting statement(s), it applicable |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 First Aid Kit/Standard | Compliant | |
| Precautions | | |
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| Rule | Status | Documenting Statement(s), If applicable |

| 5101:2-13-16 Communicable Diseases | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Incident/Injury | Compliant | 3 , , , , , , , , , , , , , , , , , , , |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Disaster Plan | Compliant | bocumenting statement(3), if applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-18 Attendance | Compliant | Documenting statement(3), if applicable |
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| 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 | Decumenting Chatemant/s) If annihable |
| 5101:2-13-19 Child Guidance | Compliant | Documenting Statement(s), If applicable |
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| 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 | , , , , , , , , , , , , , , , , , , , |
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| Rule 5101:2-13-21 Evening and Overnight Care | Status Compliant | Documenting Statement(s), If applicable |
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| Rule | Status | Documenting Statement(s), If applicable |

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| 5101:2-13-21 Sanitary Environment | Compliant | |
| and Hygiene | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-22 Meals and Snacks | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-22 Food Handling | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-23 Infant Daily Care | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-23 Infant Bottle and Food | Compliant | |
| Preparation | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-23 Diapering | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-24 Parent Permission for | Compliant | |
| Swimming | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-25 Medication | Compliant | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-07 Provider Responsibilities | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-18 Group Size and Ratios | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |

| 5101:2-13 Written Policies and | Compliant | |
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| Procedures | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-12 Carbon Monoxide | Compliant | |
| Detectors - Type B Only | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-11 Indoor Space | Compliant | |
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| Rule | Status | Documenting Statement(s) If applicable |
| 5101:2-13-17 Programming | Compliant | Documenting Statement(s), If applicable |
| 3101.2-13-17 Flogramming | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-12 Pets | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-24 Swimming Sites | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-17 Materials and | Compliant | |
| Equipment | | |
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