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 |
| SAAVEDRA, MARIA | 000000996896085 | FCC - Type B Home |
| Address | | County |
| 3528 WEST 100TH STREET | | CUYAHOGA |
| | | |
| CLEVELAND | | |
| OH 44111 | | |

| Inspection Information | | | | |
|------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type | Inspection So | cope | Inspection Notice | |
| Compliance | Full | | Unannounced | |
| Inspection Date | Begin Time | | End Time | |
| 08/22/2022 | 8:58 AM | | 11:02 AM | |
| Reviewer: | | | | |
| Patricia Hill | | | | |
| 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 | | 2 | 0 | 2 |
| Total Under 2 Years | 3 | 3 | 0 | 3 |
| Older Toddler | | 0 | 0 | 0 |
| Preschool | | 2 | 0 | 2 |
| School Age | | 4 | 1 | 5 |
| Total Capacity/Enrollment | 6 | 6 | 1 | 10 |

| Staff-Child Ratios at the Time of Inspection | | | | |
|--|--|--------|--|--|
| Group | Group Age Group/Range Ratio Observed Comment | | | |
| Group 1 | Mixed Age Group | 1 to 2 | | |

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 Smoke Free

Code: The program is required to provide notification to parents if smoking occurs on the premises outside of

operating hours.

Findings: During the inspection, it was determined that smoking had occurred in the program building or vehicle during hours the program was not in operation; however, parents had not been given written notice of this. Correct the violation and submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/21/2022

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Pets

Code: The program is required to properly care for all pets.

Findings: During the inspection, it was determined that a pet at the program posed a threat to the safety or health of the children, in that proper inoculations were not on file. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/21/2022

Domain: 03 Postings & Equipment

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

Code: The program is required to post the completed JFS 01242 "Medical, Dental, and General Emergency Plan for Child Care" and implement as required by rule.

Findings: During the inspection, it was determined the requirements for the JFS 01242 "Medical, Dental and General Emergency Plan" were not followed as noted in numbers 3 and 6 below:

- 1. The plan was not posted on each level of the home used for child care.
- 2. The name, address and telephone number of the program were not complete.
- 3. The location of the first aid kit, fire extinguisher and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.
- 4. The telephone number for emergency squad, fire department hospital, poison control program, public children services agency, local health department, local emergency management agency and police department were not complete.
- 5. Location of children's records was not complete.
- 6. Emergency information including any medications or supplies needed i the event of an evacuation was not complete.
- 7. The current version of the prescribed form was not used.
- 8. The plan was not implemented when necessary in that [].

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

Corrective Action Plan Due: 09/21/2022

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 a wading pool was partially filled with water due to excessive rain. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 09/21/2022

Domain: 08 Staff Files

Rule: 5101:2-13-09 Background Checks

Code: The program is required to have the applicable JFS 01176 "Program Notification of Background Check

Review for Child Care" on file.

Findings: In review of the staff records, it was determined that background check requirements had not been followed, for the individual(s) listed on the Employee Record Chart, as noted in number 2 below:

- 1. The JFS 01176 "Program Notification of Background Check Review for Child Care" the program received from the Department was not on file and the individual was not left alone with children.
- 2. The JFS 01177 "Individual Notification of Background Check Review for Child Care" was on file instead of the JFS 01176.
- 3. The JFS 01176 on file was for a different program.

Submit the program's corrective action plan, which includes a statement that the correct form is now on file, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/21/2022

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 2 below

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- 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.

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Corrective Action Plan Due: 09/21/2022

Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(s), If applicable |
|----------------------------------|-----------|---|
| 5101:2-13-02 License Visible | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Voluntary Temporary | Compliant | |
| Closure | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Change of Location | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 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 | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-03 Inspection | Compliant | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Building Requirements | Compliant | |
| for Type B Homes | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Fire Safety for Type B | Compliant | |
| Homes | | |
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| Rule | Ctatus | Decumenting Statement(s) If applicable |
| | 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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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-07 Staff Records | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-07 Type B Provider - Foster | Compliant | bocamenting statement(s), if applicable |
| Parent | Compliant | |
| raient | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-08 Employee Requirements | Compliant | Documenting Statement(s), if applicable |
| 3101.2-13-00 Limployee Requirements | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-08 Child Care Staff | Compliant | 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-08 Whistle Blower | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-10 Health Training | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-10 Professional | Compliant | |
| Development | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-11 Outdoor Space | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-11 Outdoor Equipment | 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 | Documenting Statement(s), If applicable |
| 5101:2-13-12 Safe Environment | Compliant | |
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| Dulo | Ctatus | Decumenting Statement/s) If and State |
| Rule 5101:2-13-13 Clean environment and | Status | Documenting Statement(s), If applicable |
| | Compliant | |
| equipment | | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-13 Handwashing | Compliant | |
|--|--------------------|--|
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Toothbrushing | Compliant | Bocumenting statement(3), if applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Requirements for Field and Routine Trips | Compliant | Described in the second in the |
| 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 | Documenting statement(s), if applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Vehicle Inspections | Compliant | bocumenting statement(3), if applicable |
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| Rule 5101:2-13-14 Vehicle Requirements | Status Compliant | Documenting Statement(s), If applicable |
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| Rule 5101:2-13-15 Health Conditions | Status Compliant | Documenting Statement(s), If applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-15 Child Records Retention and Confidentiality | Compliant | Documenting otacement(a), in applicable |
| Rule | Status | Documenting Statement/c) If applicable |
| 5101:2-13-16 Emergency Drills | Compliant | Documenting Statement(s), If 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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| Pulo | Ctatus | Decumenting Statement(s) If applicable |
| Rule 5101:2-13-16 Communicable Diseases | Status Compliant | Documenting Statement(s), If applicable |
| 3101.2-13-10 Communicable Diseases | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Incident/Injury | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Disaster Plan | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-18 Attendance | Compliant | Documenting Statement(s), if applicable |
| 3101.2-13-16 Attendance | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-19 Supervision | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-19 School Age Supervision | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-19 Child Guidance | Compliant | , , , , , , , , , , , , , , , , , , , |
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| Rule 5101:2-13-20 Sleep and Nap | Status Compliant | Documenting Statement(s), If applicable |
| Requirements | Compilant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-20 Crib and Playpen | Compliant | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-21 Evening and Overnight | Compliant | |
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| Care | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 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 Fluid Milk | Compliant | Documenting Statement(s), it applicable |
| STOTIZ TO ZZ FIGIGIVIIIK | Compilant | |
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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 | Section 1 New Physics |
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| D. J. | Chahara | Decree while Chaham and A If an alicable |
| Rule 5101:2-13-23 Infant Bottle and Food | Status Compliant | Documenting Statement(s), If applicable |
| Preparation | Compilant | |
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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 | |

| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-18 Group Size and Ratios | Compliant | See |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13 Written Policies and | Compliant | |
| Procedures | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-12 Carbon Monoxide | Compliant | Totaliana otaccinent(s)) ii applicable |
| Detectors - Type B Only | Compliant | |
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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 | bocamenting statement(s), if applicable |
| 310112 10 17 1 108 41 11 11 11 | 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 | z cosmoning otalement(s)) ii applicable |
| Equipment | -3 | |
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