

Center 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 Det	ails		
Program Name	Program Number		Program Type	
Champions at St. Susanna School	2180017393		Child Care Center	
Address 500 Reading Road Mason OH 45040			County WARREN	
Building Approval Date	Use Group/Code NA	Occupancy Limit	Maximum Under 2 ½	
Fire Inspection Approval Date	Food Service Risk L Exempt	Food Service Risk Level Exempt		

Inspection Information				
Inspection Type	Inspection So	cope	Inspection Notice	
Annual	Full		Unannounced	
Inspection Date 09/27/2021	Begin Time 3	9:00 PM	End Time 5:00 PM	
Reviewer: NANCY SCHMITT				
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
57	5	0	1	4

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)		0	0	0
Young Toddler		0	0	0
Total Under 2 ½ Years	0	0	0	0
Older Toddler		0	0	0
Preschool		0	0	0
School Age		0	37	37
Total Capacity/Enrollment	72	0	37	37

Staff-Child Ratios at the Time of Inspection			
Group Age Group/Range Ratio Observed Comment			Comment

School Age	School-Age to < 11 years	2 to 35	#1 + 1 staff no
			background check
School Age	School-Age to < 11 years	2 to 34	#2 + 1 staff no
			background check

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: 2-12-03 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	1
	_

Moderate Risk Non-Compliances

Domain: 08 Staff Files

Rule: 5101:2-12-09 Background Check Requirements

<u>Code</u>: The program is required to have all staff request background checks as required.

<u>Finding</u>: In review of the staff records, it was determined that a background check was not requested for the person listed on the Employee Record Chart as noted in number 1 below:

- 1. Submitting the JFS 01175 "Request for a Background Check for Child Care" to the Department or the OPR;
- 2. Submitting fingerprints electronically according to the process established by BCI.

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

Corrective Action Plan Due: 10/27/2021

Low Risk Non-Compliances

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Play Fall Zones

<u>Code</u>: The program is required to provide adequate fall surface for the outdoor play space.

<u>Finding</u>: During the inspection, it was determined that while there was adequate fall surface material in the outdoor play space, proper distribution had not been maintained under and around equipment as required. Submit the program's corrective action plan, which includes a statement that fall surface material has been properly redistributed, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/27/2021

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Space Requirements

Code: The program is required to have an outdoor play space free from general hazards.

<u>Finding</u>: During the inspection, it was determined that the following hazardous conditions existed in the outdoor play area, as noted in number 10 below:

- 1. There was broken glass.
- 2. There were tall weeds.
- 3. There was poison ivy.
- 4. There were tree branches.
- 5. There was mold visible.
- 6. There were thistles with prickers.
- 7. There were bird droppings.
- 8. There were bolts with more than two threads exposed along a fence line or gate on a playground.
- 9. The sandbox was contaminated.
- 10. Other: the following issued were tripping hazards: the mulch liner was exposed in several places and the black mats were broken/cracked.

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

Corrective Action Plan Due: 10/27/2021

Domain: 08 Staff Files

Rule: 5101:2-12-10 Health Training Requirements

<u>Code</u>: The program is required to maintain a staff schedule with coverage of the required health trainings.

<u>Finding</u>: In review of the staff records, it was determined the program did not have at least one child care staff member present/scheduled to be present during all hours of operation with currently valid documentation for the trainings listed in numbers 10 & 14 below:

- 1. First Aid child care staff members scheduled during the hours of [] and [] had expired training
- 2. First Aid child care staff members scheduled during the hours of [] and [] had not taken First Aid training
- 3. First Aid trained child care staff member was not present in each building used by the program.
- 4. First Aid child care staff member scheduled during the hours of [] and [] did not have verification of completion of First Aid
- 5. CPR child care staff members scheduled during the hours of [] and [] had expired training
- 6. CPR child care staff scheduled during the hours of [] and [] had not taken CPR training
- 7. CPR trained child care staff member was not present in each building used by children
- 8. CPR child care staff member scheduled during the hours of [] and [] did not have verification of completion of CPR
- 9. CPR training taken by staff did not include all age groups the program serves
- 10. Communicable Disease child care staff members scheduled had expired training
- 11. Communicable Disease child care staff scheduled during the hours of [] and [] had not taken Communicable Disease training
- 12. Communicable Disease trained child care staff member was not present in each building used by the program
- 13. Communicable Disease child care staff member scheduled during the hours of [] and [] did not have verification of completion of the full Communicable Disease training
- 14. Child Abuse child care staff members scheduled had expired training
- 15. Child Abuse trained child care staff was not in each building used by the program
- 16. Child Abuse child care staff scheduled during the hours of [] and [] had not taken Child Abuse training
- 17. Child Abuse child care staff member scheduled during the hours of [] and [] did not have verification of completion of the full six-hour Child Abuse training
- 18. Child Abuse child care staff considered to be providing coverage had only the ODJFS prescribed Child Abuse training, which does not meet this rule compliance

Refer to the Employee Record Chart for specific details. Submit the program's corrective action plan, which includes verification of complete coverage for any training listed, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/27/2021

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to include all information.

<u>Finding</u>: In review of the staff records, it was determined that the medical statement for the employee listed on the Employee Record Chart did not include the required information listed below in number 4 (a).

- 1. Date of examination;
- 2. Signature, business address, and telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination;
- 3. A statement that verifies that the employee is:
- a. Physically fit for employment in a program caring for children;
- b. Immunized against Tetanus, Diphtheria, Pertussis (Tdap);
- c. Immunized against Measles, Mumps, and Rubella (MMR);
- 4. Tuberculosis (TB) screening/test
- a. Documentation of the screening process to determine if the employee resided in a country identified by the World Health Organization as having a high burden of TB and arrived in the United States within the five years preceding the date of application for employment;
- b. Results of a TB test for employees meeting both criteria in 4a;
- c. Results of additional testing for employees with a positive TB test;
- d. Written statement, signed by a representative of the TB control unit, that the employee's TB is no longer infectious or the individual is receiving a TB treatment regimen for employees with a positive TB test.

Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, or TB results/documentation, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/27/2021

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Meal and Snack	Compliant	
Requirements		

Rule	Status	Documenting Statement(s), If applicable

Rule: 5101:2-12-13 Handwashing Requirements	Compliant	Documenting Statement: Staff and children were observed washing hands as required by the rule.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of Communicable Disease	Compliant	bocumenting statement(3), it applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free Environment	Compliant	bookinenting statement (a), mapping and
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator Qualifications	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements	Compliant	Documenting Statement: All Child Care Staff Members had verification of educational requirements on file at the program.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Written Disaster Plan	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Food License	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-13 Sanitary Equipment and Environment	Compliant	Documenting Statement: On the day of the inspection, the program provided a clean environment.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	Southerning states(s), sppsss:
		Decree the Chatera and a life and inclin
Rule 5101:2-12-16 First Aid/Standard Precautions	Status Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	Documenting statement(s), ii applicable
	-	



Rule	Status	Documenting Statement(s) If applicable
5101:2-12-22 Safe Food	Compliant	Documenting Statement(s), If applicable
Handling/Storage	Compilant	
Hallullig/Storage		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Written Program	Compliant	bocumenting statement(s), if applicable
Policies and Procedures	Compliant	
rolicles and riocedures		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space	Compliant	bocumenting statement(s), if applicable
Requirements	Compilant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Emergency Drills	Compliant	Documenting Statement: Documentation
		for completed fire, weather, and
		emergency/lockdown drills was verified
		during this inspection.
		,
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-17 Materials and	Compliant	Documenting Statement: Sufficient
Equipment		equipment was observed in all categories.
	T	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	Documenting Statement(s), it applicable
3101.2-12-02 License i Osted	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Supervision	Compliant	
·	,	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 Current Information	Compliant	
Rule	Ctatus	Decumenting Statement/s) If annies his
	Status	Documenting Statement(s), If applicable Documenting Statement: The daily
Rule: 5101:2-12-17 Daily Schedule	Compliant	schedule was observed posted.
		scriedule was observed posted.
	<u> </u>	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Child Medical and	Compliant	Documenting Statement: At the time of
Enrollment Records	20	the inspection, 25% of the children's
		records were reviewed, and the records
		were complete, as required by the rule.
	l	were complete, as required by the fulc.

Beginning!		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Medical/Physical	Compliant	Documenting Statement: At the time of
	Compliant	_
Care Plans		the inspection, there were no children
		currently enrolled who had health
		conditions.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Orientation and Staff	Compliant	
Records		
Necords		
Pula	Ctatus	Decumenting Statement(s) If applicable
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-10 Professional	Compliant	Documenting Statement: At the time of
Development Requirements		the inspection, all staff had completed the
		required amount of professional
		development training.
		·
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-12 Safe Environment	Compliant	Documenting Statement: A safe
	- Compilation	environment was observed during the
		inspection.
		inspection.
2.1	C	5 " 5 1 1/) 15 1: 11
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury	Compliant	
Reporting		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Medical, Dental,	Compliant	Documenting Statement: On the day of
and General Emergency Plan	'	the inspection, the complete prescribed
2		JFS 01242 "Medical, Dental, and General
		Emergency Plan For Child Care" were
		<i>o</i> ,
		posted in the program as required.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Attendance Records	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Group Size	Compliant	Documenting Statement: The group sizes
	·	observed on the day of the inspection
		were in compliance.
		were in compliance.

	.	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child
		ratios observed during the inspection
		were in compliance.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-25 Medication	Compliant	Documenting Statement: There were no
Administration and Food Supplements		children on medication at the time of the
		inspection.
	<u> </u>	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-03 Inspection	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	
Responsibilities/Requirements		
-		