

# **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 <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. 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 Deta      | ils             |                   |
|--|-------------------|-----------------|-------------------|
| Program Name   | Program Number    |                 | Program Type      |
| Mr. Dan's Daycare LLC                                    | 2180017612        |                 | FCC - Type A Home |
| Address  |                   |                 | County            |
| 937 Dover Ave  |                   |                 | SUMMIT            |
|  |                   |                 |                   |
| Akron  |                   |                 |                   |
| OH 44320   |                   |                 |                   |
| Building and Fire Approvals apply to Type A Family Child | d Care Homes only |                 |                   |
| Building Approval Date                                   | Use Group/Code    | Occupancy Limit | Maximum Under 2 ½ |
|  |                   |                 |                   |
| Fire Inspection Approval Date                            |                   |                 |                   |
| 11/23/2021   |                   |                 |                   |

| Inspection Information |                                |                  |                   |              |
|------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type        | Inspection S                   | cope             | Inspection Notice |              |
| Compliance             | Full                           |                  | Unannounced       |              |
| Inspection Date        | Begin Time                     |                  | End Time          |              |
| 01/19/2022             | 10:20 AM                       |                  | 12:04 PM          |              |
| Reviewer:              |                                |                  |                   |              |
| Kelly Sferra           |                                |                  |                   |              |
| Summary of Findings    |                                |                  |                   |              |
| No. Rules Verified     | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 67                     | 2                              | 0                | 0                 | 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)                                  |                  | 1          | 0         | 1     |
| Young Toddler   |                  | 3          | 3         | 6     |
| Total Under 2 Years                                       | 6                | 4          | 3         | 7     |
| Older Toddler   |                  | 2          | 2         | 4     |
| Preschool   |                  | 2          | 1         | 3     |
| School Age  |                  | 2          | 2         | 4     |
| Total Capacity/Enrollment                                 | 11               | 6          | 5         | 18    |

| Staff-Child Ratios at the Time of Inspection |                 |                |         |
|--|-----------------|----------------|---------|
| Group  | Age Group/Range | Ratio Observed | Comment |
| Mr. Dan's Daycare                            | Mixed Age Group | 2 to 8         |         |

### **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  |  |
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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: 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 number(s) 7 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: 02/18/2022

#### **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 01201 "Dental First Aid" and implement as required by rule.

Findings: During the inspection, it was determined the JFS 01201 "Dental First Aid" current version was not posted. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 02/18/2022

#### 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(s) 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. 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: 02/18/2022

#### Domain: 09 Children's Files

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

Code: The program is required to have a completed 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 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 child information
- 4. Complete parent information
- 5. Complete emergency contact information
- 6. Complete physician information
- 7. Information regarding the parent list
- 8. Health information
- 9. Additional information for all boxes checked "yes"
- 10. Emergency transportation information
- 11. Parent/guardian's signature
- 12. Diapering Statement
- 13. Acknowledgement of Policies and Procedures
- 14. Enrollment form for at least one child was not updated by either the parent or the administrator

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

16. Other [ ]

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

Corrective Action Plan Due: 02/18/2022

## **Rules In-Compliance/Not Verified**

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|---|------------|--|
| Rule                                    | Status     | Documenting Statement(s), If applicable      |
| 5101:2-13-02 License Visible            | Compliant  |  |
|   |            |  |
|   |            |  |
|   |            |  |
| Rule                                    | Status     | Documenting Statement(s), If applicable      |
| 5101:2-13-02 Voluntary Temporary        | Compliant  |  |
| Closure                                 |            |  |
|   |            |  |
|   |            |  |
| 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      |
| 5101:2-13-02 Information in OCLQS       | Compliant  | , , , , , , , , , , , , , , , , , , ,        |
| 0-0-1-1-0-0-1-1-1-1-1-1-1-1-1-1-1-1-1-1 | 33p        |  |
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| Rule                                    | Status     | Documenting Statement(s), If applicable      |
| 5101:2-13-02 Provider Medical           | Compliant  | - Common Gordon Constant                     |
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| Rule                                    | Status     | Documenting Statement(s), If applicable      |
| 5101:2-13-02 Type A Ownership           | Compliant  | Documenting Statement(3), it applicable      |
| 3101.2-13-02 Type A Ownership           | Compliant  |  |
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| Dulo                                    | Ctatus     | Decumenting Statement(s) If anni-sala        |
| 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 Inspections for  | Compliant  |  |
| Type A Homes   |  |  |
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| Rule   | Status   | Documenting Statement(s), If applicable  |
| 5101:2-13-04 Fire Inspections for Type   | Compliant  |  |
| A Homes  |  |  |
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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  |
| 5101:2-13-08 Employee Requirements   | Compliant  |  |
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| Rule   | Status   | Documenting Statement(s), If applicable  |
| 5101:2-13-08 Child Care Staff  | Compliant  |  |
| 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  |
|  |  | Documenting Statement(s), If applicable  |
| 5101:2-13-09 Background Checks   | Status Compliant                                     | Documenting Statement(s), If applicable  |
|  |  | Documenting Statement(s), If applicable  |
|  |  | Documenting Statement(s), If applicable  |
|  |  | Documenting Statement(s), If applicable  Documenting Statement(s), If applicable |
| 5101:2-13-09 Background Checks  Rule   | Compliant  |  |
| 5101:2-13-09 Background Checks   | Compliant  |  |
| 5101:2-13-09 Background Checks  Rule   | Compliant  |  |
| 5101:2-13-09 Background Checks  Rule   | Compliant  |  |
| 5101:2-13-09 Background Checks  Rule   | Compliant  |  |
| S101:2-13-09 Background Checks  Rule  5101:2-13-10 Health Training   | Status Compliant                                     | Documenting Statement(s), If applicable  |
| Rule 5101:2-13-09 Background Checks  Rule 5101:2-13-10 Health Training  Rule 5101:2-13-10 Professional             | Status Compliant Status Status                       | Documenting Statement(s), If applicable  |
| S101:2-13-09 Background Checks  Rule  5101:2-13-10 Health Training  Rule   | Status Compliant Status Status                       | Documenting Statement(s), If applicable  |
| Rule 5101:2-13-09 Background Checks  Rule 5101:2-13-10 Health Training  Rule 5101:2-13-10 Professional             | Status Compliant Status Status                       | Documenting Statement(s), If applicable  |
| Rule 5101:2-13-09 Background Checks  Rule 5101:2-13-10 Health Training  Rule 5101:2-13-10 Professional             | Status Compliant Status Status                       | Documenting Statement(s), If applicable  |
| Rule 5101:2-13-10 Health Training  Rule 5101:2-13-10 Professional Development  Rule                                | Status Compliant  Status Compliant  Status Compliant | Documenting Statement(s), If applicable  Documenting Statement(s), If applicable |
| Rule 5101:2-13-09 Background Checks  Rule 5101:2-13-10 Health Training  Rule 5101:2-13-10 Professional Development | Status Compliant  Status Compliant  Status Compliant | Documenting Statement(s), If applicable  Documenting Statement(s), If applicable |
| Rule 5101:2-13-10 Health Training  Rule 5101:2-13-10 Professional Development  Rule                                | Status Compliant  Status Compliant  Status Compliant | Documenting Statement(s), If applicable  Documenting Statement(s), If applicable |

| 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    | Decumenting Statement(s) If applicable      |
| 5101:2-13-12 Safe Equipment              | Compliant | Documenting Statement(s), If applicable     |
| 3101.2-13-12 Sale Equipment              | Compliant |   |
|  |           |   |
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| Rule                                     | Status    | Documenting Statement(s), If applicable     |
| 5101:2-13-12 Safe Environment            | Compliant | <u> </u>                                    |
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| Rule                                     | Status    | Documenting Statement(s), If applicable     |
| 5101:2-13-13 Clean environment and       | Compliant |   |
| equipment                                |           |   |
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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 | 3 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \     |
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| Rule                                     | Status    | Documenting Statement(s), If applicable     |
| 5101:2-13-13 Toothbrushing               | Compliant |   |
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| L  |           |   |
| Dula                                     | Chahua    | Decimanting Chatage and (1) If any limit    |
| Rule E101:2 12 14 Paguiroments for Field | Status    | Documenting Statement(s), If applicable     |
| 5101:2-13-14 Requirements for Field      | Compliant |   |
| and Routine Trips                        |           |   |
|  | 1         |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable     |
| 5101:2-13-14 Ratio and Supervision       | Compliant | , , , , , , , , , , , , , , , , , , ,       |
| for Field and Routine Trips              | ,         |   |
|  |           |   |
|  |           |   |
| 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 |   |
|                                      |           |   |
|                                      |           |   |
|                                      |           | <u> </u>                                |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
|                                      |           | Documenting Statement(3), it applicable |
| 5101:2-13-14 Vehicle Requirements    | Compliant |   |
|                                      |           |   |
|                                      |           |   |
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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 |
|                                      |           | bocumenting statement(s), if applicable |
| 5101:2-13-15 Child Records Retention | Compliant |   |
| and Confidentiality                  |           |   |
|                                      |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-16 Emergency Drills        | Compliant | <u> </u>                                |
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|                                      | 1         |   |
| D. I                                 | C         | 2 6                                     |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-16 First Aid Kit/Standard  | Compliant |   |
| Precautions                          |           |   |
|                                      |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-16 Communicable Diseases   | Compliant | , , , , , , , , , , , , , , , , , , ,   |
| 5101.2 15 10 communicable biseases   | Compilant |   |
|                                      |           |   |
|                                      | 1         |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-16 Incident/Injury         | Compliant |   |
|                                      |           |   |
|                                      |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
|                                      |           | bocumenting statement(s), if applicable |
| 5101:2-13-16 Disaster Plan           | Compliant |   |
|                                      |           |   |
|                                      |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-18 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  |
|                                     |             | bocamenting statement(s), it applicable  |
| 5101:2-13-19 Child Guidance         | Compliant   |  |
|                                     |             |  |
|                                     |             |  |
|                                     |             |  |
| Rule                                | Status      | Documenting Statement(s), If applicable  |
| 5101:2-13-20 Sleep and Nap          | Compliant   | ( ) ( )                                  |
|                                     | Compliant   |  |
| Requirements                        |             |  |
|                                     |             |  |
|                                     |             |  |
| Rule                                | Status      | Documenting Statement(s), If applicable  |
| 5101:2-13-20 Crib and Playpen       | Compliant   |  |
| Requirements                        | oop.iia.ii  |  |
| Requirements                        |             |  |
|                                     |             |  |
| - 1                                 | 1-          |  |
| Rule                                | Status      | Documenting Statement(s), If applicable  |
| 5101:2-13-21 Evening and Overnight  | Compliant   |  |
| Care                                |             |  |
|                                     |             |  |
|                                     | -           |  |
| Rule                                | Status      | Documenting Statement/s) If applicable   |
|                                     |             | Documenting Statement(s), If applicable  |
| 5101:2-13-21 Sanitary Environment   | Compliant   |  |
| and Hygiene                         |             |  |
|                                     |             |  |
|                                     | <del></del> |  |
| Rule                                | Status      | Documenting Statement(s), If applicable  |
| 5101:2-13-22 Meals and Snacks       | Compliant   | bookinenting statement(s), it applicable |
| 5101.2-15-22 iviedis and Shacks     | Compliant   |  |
|                                     |             |  |
|                                     |             |  |
|                                     |             |  |
| Rule                                | Status      | Documenting Statement(s), If applicable  |
| 5101:2-13-22 Fluid Milk             | Compliant   |  |
| 3131.2 13 22 Haid Willin            |             |  |
|                                     |             |  |
|                                     |             |  |
|                                     |             |  |
| Rule                                | Status      | Documenting Statement(s), If applicable  |
| 5101:2-13-22 Food Handling          | Compliant   |  |
|                                     |             |  |
|                                     |             |  |
|                                     | I           |  |
|                                     |             |  |
| Rule                                | Status      | Documenting Statement(s), If applicable  |

| 5101:2-13-23 Infant Daily Care                       | Compliant           |   |
|--|---------------------|---|
| Rule 5101:2-13-23 Infant Bottle and Food Preparation | Status<br>Compliant | Documenting Statement(s), If applicable |
| Rule<br>5101:2-13-23 Diapering                       | Status<br>Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-24 Parent Permission for Swimming     | Status<br>Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-25 Medication Requirements            | Status<br>Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-07 Provider Responsibilities          | Status<br>Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-18 Group Size and Ratios              | Status<br>Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13 Written Policies and Procedures       | Status<br>Compliant | Documenting Statement(s), If applicable |
| Rule<br>5101:2-13-11 Indoor Space                    | Status<br>Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-17 Programming                        | Status<br>Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-08 Review Policies and Procedures     | Status<br>Compliant | Documenting Statement(s), If applicable |

| Rule                        | Status    | Documenting Statement(s), If applicable |
|-----------------------------|-----------|---|
| 5101:2-13-24 Swimming Sites | Compliant |   |
|                             |           |   |
|                             |           |   |
| Rule                        | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-16 First Aid Kit  | Compliant |   |
|                             |           |   |
|                             |           |   |
| Rule                        | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-17 Materials and  | Compliant |   |
| Equipment                   |           |   |