

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 Deta | ils | |
|---|-------------------|-----------------|-------------------|
| Program Name | Program Number | | Program Type |
| Diana's Little Ducklings | 2190019859 | | FCC - Type A Home |
| Address | | | County |
| 6626 Henderson rd | | | PORTAGE |
| | | | |
| Ravenna | | | |
| OH 44266 | | | |
| Building and Fire Approvals apply to Type A Family Chil | d Care Homes only | | |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ |
| 04/04/2019 | NA | | |
| Fire Inspection Approval Date | | | |
| 03/01/2019 | | | |

| Inspection Information | | | | |
|------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type | Inspection Sc | cope | Inspection Notice | |
| Compliance | Full | | Unannounced | |
| Inspection Date | n Date Begin Time | | End Time | |
| 10/27/2021 | 9:10 AM | | 11:30 AM | |
| Reviewer: | | | | |
| Diane Rogers | Diane Rogers | | | |
| Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 79 | 2 | 0 | 0 | 2 |

| 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) | | 2 | 0 | 2 |
| Young Toddler | | 2 | 1 | 3 |
| Total Under 2 Years | 3 | 4 | 1 | 5 |
| Older Toddler | | 0 | 0 | 0 |
| Preschool | | 4 | 2 | 6 |
| School Age | | 10 | 4 | 14 |
| Total Capacity/Enrollment | 12 | 14 | 6 | 25 |

| Staff-Child Ratios at the Time of Inspection | | | |
|--|-----------------|--------|--|
| Group Age Group/Range Ratio Observed Comment | | | |
| Group A | Mixed Age Group | 2 to 5 | |



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

Moderate Risk Non-Compliances

No Moderate Risk Non-Compliances were observed during this inspection

Low Risk Non-Compliances

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: 11/27/2021

Domain: 08 Staff Files

Rule: 5101:2-13-10 Health Training

Code: The program staff is required to complete the prescribed child abuse and neglect course within the required timeframe.

Findings: In review of records, it was determined the CCSM was left alone with children and did not have current valid documentation for training(s) listed in numbers 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. Managment 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 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: 11/27/2021



Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(c) If applicable |
|------------------------------------|-----------|---|
| | | Documenting Statement(s), If applicable |
| 5101:2-13-14 Driver Requirements | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-21 Evening and Overnight | Compliant | |
| Care | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 License Posted | 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 |
| 5101:2-13-15 JFS 01234 'Child | Compliant | |
| Enrollment and Health Information' | | |
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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 Ratio and Group Size | Compliant | |
| 5101.2-15-18 Natio and Group 512e | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-18 Ratio and Group Size | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-07 Provider Requirements | Compliant | |
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| 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 | |
| Dula | Chatura | Desumporting Statement(s) If emplicable |
| Rule 5101:2-13-25 Topical Products and Lotions | Status Compliant | Documenting Statement(s), If applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Fire Inspection for Type A Homes | Compliant | |
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| Rule 5101:2-13-13 Handwashing | Status Compliant | Documenting Statement(s), If applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-17 Programming | Compliant | Documenting Statement(5), if applicable |
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| Rule 5101:2-13-24 On-site Pools | Status Compliant | Documenting Statement(s), If applicable |
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| Rule 5101:2-13-12 Safe Equipment | Status Compliant | Documenting Statement(s), If applicable |
| Rule | Status | Desumanting Statement(s) If applicable |
| 5101:2-13-24 Parent Permission for Swimming | Compliant | Documenting Statement(s), If applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-20 Sleep and Napping Requirements for a Licensed Family Child Care Provider | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Smoke Free | Compliant | |



| Rule | Status | Documenting Statement(s), If applicable | | |
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| 5101:2-13-08 Employee Requirements | Compliant | | | |
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| Rule | Status | Documenting Statement(s), If applicable | | |
| 5101:2-13-16 Standard Precautions | Compliant | | | |
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| Dula | Status | Desumenting Statement(s) If emplicable | | |
| 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 | | |
| 5101:2-13-02 JFS 00598 'Owner's | Compliant | bocumenting statement(s), it applicable | | |
| Authorized | | | | |
| Reqpresentative/Partnership Form for | | | | |
| Child Care' | | | | |
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| Rule | Status | Documenting Statement(s), If applicable | | |
| 5101:2-13-08 Review Policies and | Compliant | Documenting statement(s), if applicable | | |
| Procedures | 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 | | |
| 5101:2-13-22 Fluid Milk | Compliant | | | |
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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 | | |
| | | bocamenting statement(s), if applicable | | |
| 5101:2-13-14 Vehicle Requirements | Compliant | | | |
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| Rule | Status | Documenting Statement(s), If applicable | | |
| 5101:2-13-11 Fall Zone | Compliant | 2 counciling statement(s), it applicable | | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-08 Staff Records | 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 |
| 5101:2-13-04 Building Inspections for | Compliant | |
| Type A Homes | | |
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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 |
| 5101:2-13-12 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 |
| 5101:2-13-22 Food Handling | Compliant | |
| 5101.2-13-22 F000 Handling | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-12 Safe Environment | 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 |
| 5101:2-13-19 Child Guidance | Compliant | |
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| Rule | Status | Documenting Statement/c) If applicable |
| Nule | Jiaius | Documenting Statement(s), If applicable |



| 5101:2-13-16 First Aid Kit | Compliant | |
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| Rule 5101:2-13-04 Heaters in a Type B Home | Status Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-14 Ratio and Supervision for Field and Routine Trips | Status Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-16 Medical, Dental, and General Emergency Requirements | Status Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-16 Medical, Dental, and General Emergency Requirements | Status Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-25 Medication Storage | Status Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-19 School Age Supervision | Status Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-23 Infant Bottle and Food Preparation | Status Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-13 Toothbrushing | Status Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-17 Materials and Equipment | Status Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-13-19 Supervision | Status Compliant | Documenting Statement(s), If applicable |



| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-13 Clean Environment and Equipment | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Communicable Diseases | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-21 Sanitary Environment and Hygiene | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-25 Medication Requirements | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 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 | |
| Rule | Status | Desumenting Statement(c) If employed |
| 5101:2-13-08 Whistle Blower | Status Compliant | Documenting Statement(s), If applicable |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Serious Incident | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-10 Professional Development | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-20 Use of Crib and Playpen | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-15 Child's Medical | Compliant | |
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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 |
| 5101:2-13-08 Substitute | Compliant | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-08 Substitute | Compliant | |
| Requirements | | |
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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 |
| 5101:2-13-02 Information in OCLQS | Compliant | |
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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 |
| 5101:2-13-02 Provider Medical | 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 |
| 5101:2-13-09 Background Checks | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-09 Background Checks | Compliant | |
| JIJII CHECKS | Compliant | |



| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-09 Background Checks | Compliant | |
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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 |
| 5101:2-13-07 Provider Requirements | 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 |
| 5101:2-13-14 Vehicle Inspections | Compliant | |
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