

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 Details				
Program Name	Program Number		Pro	gram Type
Jump Start Preschool LLC	2190019977		Chi	ld Care Center
Address 11519 Wilson Mills Road Chardon OH 44024				unty AUGA
Building Approval Date	Use Group/Code	Occupancy Limit		Maximum Under 2 1/2
07/01/2019	E	57		0
Fire Inspection Approval Date	Food Service Risk Level			
06/10/2021	Exempt			

Inspection Information				
Inspection Type	Inspection So	cope	Inspection Notice	
Annual	Full		Unannounced	
Inspection Date 09/20/2021	Begin Time 9	:50 AM	End Time 11:59 PM	
Reviewer:				
Kathryn Noftz				
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
57	11	0	3	10

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	59	59
School Age		0	0	0
Total Capacity/Enrollment	57	0	59	59

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Pre-K Morning	3 years to < 4 years	1 to 20	



Pre-K Morning	3 years to < 4 years	2 to 20	
Pre-K Morning	3 years to < 4 years	1 to 18	
Pre-K Morning	3 years to < 4 years	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: 2-12-O3 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

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Ratio

<u>Code</u>: The program is required to maintain the appropriate staff to child ratio for each group served.

<u>Finding</u>: During the inspection, required staff/child ratios were not maintained for the same group on multiple occasions, as noted below:

The ratio determined for the Pre-K group was 1 Child Care Staff Member(s) for 20 children. Additionally, a ratio of 1 Child Care Staff Member(s) for 18 children was determined for the Pre-K group.

Additional staff members must be hired or current Child Care Staff Members must be rescheduled to maintain compliance. Provide staff training. 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: 10/22/2021



Domain: 08 Staff Files

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

<u>Code</u>: The program is required to have documentation from ODJFS, indicating the individual is eligible to be employed in child care, on file before allowing the staff to have sole responsibility of children.

<u>Finding</u>: During the inspection, it was determined that Child Care Staff Member(s) had sole responsibility of children in the Pre-K group(s) and the JFS 01176 "Program Notification of Background Check Review for Child Care" was not on file as required. Submit the program's corrective action plan, which includes a copy of the JFS 01176 or a statement that the Child Care Staff Member(s) no longer have sole responsibility of children, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/22/2021

Domain: 09 Children's Files

Rule: 5101:2-12-15 Medical/Physical Care Plans

<u>Code</u>: The program is required to have a completed JFS 01236 "Child Medical/Physical Care Plan" on file at the program for any child having a health condition. The program is required to implement and/or follow instructions on the JFS 01236 "Child Medical/Physical Care Plan" for a child with a health condition.

<u>Finding</u>: A written, signed and dated JFS 01236 "Child Medical/Physical Care Plan" must be on file for any child having health conditions which require monitoring for symptoms or a medical procedure be performed at the program. In review of the children's records, it was determined that the required written information was either not on file, implemented or followed, for at least one child indicated on the Children Records Review, as noted in number(s) 1 below:

- 1. No plan was on file.
- 2. Child's name was missing.
- 3. Child's date of birth was missing.
- 4. Name of the condition was missing.
- 5. Symptoms to watch for were missing.
- 6. Action to be taken if symptoms to occur were missing.
- 7. Activities/foods/environmental conditions to avoid, if applicable, were missing.
- 8. Medical procedures to be followed were missing.
- 9. Expected benefit was missing.
- 10. Name of any applicable medication was missing.
- 11. Medication listed in the procedures to follow was not onsite available to administer as instructed and alternate instructions for this situation were not included on the plan.
- 12. Instructions regarding emergency evacuation, if applicable, were missing.
- 13. Training instructions were missing.
- 14. Dated signature of parent or certified professional who trained the program staff was missing.
- 15. Dated signature(s) of child care staff member(s) trained to perform the procedure were missing.
- 16. Directions regarding additional services, if applicable, were missing.
- 17. Dated signature of parent giving permission to perform the procedure was missing.
- 18. Dated signature of program administrator was missing.
- 19. The plan was not implemented.



20. The plan was not able to be implemented due to conflicting information.21. The plan was not followed.

Submit the program's corrective action plan, which includes a copy of the completed JFS 01236 "Child Medical/Physical Care Plan", to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/22/2021

Low Risk Non-Compliances

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

<u>Code</u>: The program is required to have the information listed in rule on all attendance records.

<u>Finding</u>: During the inspection, it was determined that the attendance records did not include the required information listed in number(s) 1-5 below:

- 1. The name of the child.
- 2. The birth date of the child.
- 3. The assigned group.
- 4. The child's weekly schedule.
- 5. The time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.

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

Corrective Action Plan Due: 10/22/2021

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Sanitary Equipment and Environment

<u>Code</u>: The program is required to provide a clean restroom with the appropriate materials available.



<u>Finding</u>: During the inspection, it was determined that unsanitary conditions, as noted in number(s) 5 below, were in the boys restroom:

- 1. There was no liquid soap.
- 2. There was no toilet paper.
- 3. There were no paper towels.
- 4. The toilet cleaning brush was accessible to the children.
- 5. The plunger was accessible to the children.
- 6. The toilet(s) were not flushed.
- 7. The trash was not emptied from the day before.
- 8. There was a strong urine odor.
- 9. Other [].

The restroom(s) must be kept sanitary at all times. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

<u>Code</u>: The program is required to provide an environment that protects the children in care from any items and conditions that may threaten their health, safety, and well-being.

<u>Finding</u>: Children in care shall be protected from any items and conditions which threaten their health, safety, and well-being. During the inspection, it was determined that children were not protected from the following item(s) or condition(s) which may threaten their health, safety, or well-being as noted in number(s) 5 below: 1. Open pull cords that are not closed loop.

- 2. Telephone cords.
- 3. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
- 4. Stacked chairs.
- 5. Employee(s) purse(s).
- 6. Diaper bags.
- 7. Television not securely anchored.
- 8. Small or lightweight pieces of shelving units are not securely anchored to the wall.
- 9. Smoke detector needing batteries replaced.
- 10. Staff member stepped over a barrier/gate while holding a child.
- 11. Emergency exits were blocked by the following classroom furniture: [].
- 12. Other [].

Provide staff training. 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: 10/22/2021



Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

<u>Code</u>: 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 statements for those employees listed on the Employee Record Chart did not include the required information listed below in number(s) 3-b/c, 4.

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: 10/22/2021

Domain: 08 Staff Files

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

<u>Code</u>: The program is required to have staff complete the required one hour prescribed Child Abuse training.

<u>Finding</u>: In review of the staff records, it was determined that the requirement for the ODJFS one-hour prescribed Child Abuse Training was not met as noted in number(s) 3 below:

1. The training was not completed within sixty days of hire;



2. The training expired, as it is only valid for two years;

3. Not all administrators, Child Care Staff Members, and substitutes have completed the training.

Refer to the Employee Record Chart for the name(s) of the Child Care Staff Member(s) who must complete the ODJFS one-hour prescribed Child Abuse Training. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/22/2021

Domain: 08 Staff Files

<u>Rule</u>: 5101:2-12-07 Administrator Responsibilities/Requirements <u>Code</u>: The program administrator is required to maintain current employee records in the Ohio Professional Registry.

<u>Finding</u>: During the inspection, it was determined employment records were not entered or updated within five calendar days of the change in the Ohio Professional Registry (OPR) as noted in number(s) 2,3,4,5 below:

1. At least one administrator, employee or child care staff member (including substitutes) had not created an employment record in the OPR for the program.

2. The administrator had not assigned at least one employee or child care staff member to the program's organization dashboard in the OPR.

3. At least one individual's schedule was not current.

4. At least one individual's position or role was not current.

5. At least one individual's employment had not been end dated.

6. Other: []

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

Corrective Action Plan Due: 10/22/2021

Domain: 08 Staff Files

Rule: 5101:2-12-08 Orientation and Staff Records

<u>Code</u>: The program is required to have staff complete the online staff orientation training before they are permitted to have sole responsibility of children.

<u>Finding</u>: During the inspection, it was determined that Child Care Staff Member(s) listed on the Employee Record Chart had sole responsibility of children and had not completed the online orientation, as required by this rule.



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

Corrective Action Plan Due: 10/22/2021

Domain: 08 Staff Files

Rule: 5101:2-12-08 Orientation and Staff Records

<u>Code</u>: The program is required to maintain documentation onsite at the program for each employee.

<u>Finding</u>: During the inspection, it was determined that documentation was not on file at the program to meet the requirements of this rule for the employee(s) listed on the Employee Record Chart. The documentation was able to be verified as noted in number(s) 1,2 below:

1. The information had been verified at the previous inspection.

2. The information was provided from another location during the inspection.

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

Corrective Action Plan Due: 10/22/2021

Domain: 08 Staff Files

<u>Rule</u>: 5101:2-12-08 Child Care Staff Member Educational Requirements <u>Code</u>: The program staff is required to have educational verification on file at the program.

<u>Finding</u>: In review of the staff records, it was determined that verification of a high school education was not on file for Child Care Staff Member(s) listed on the Employee Record Chart, as required. Submit the program's corrective action plan, which includes a copy of the verification of a high school education, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/22/2021

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 training(s) listed in number(s) 13,17 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 during the hours of [] and [] 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 9-1130 and 1230-230 did not have verification of completion of the full Communicable Disease training

14. Child Abuse – child care staff members scheduled during the hours of [] and [] 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 9-1130 and 1230-230 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: 10/22/2021



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Handwashing	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Fire Approval	Compliant	Documenting Statement: Please Note: An
		annual fire inspection approval must be
		secured for the program. Secure a new
		approval by 6/10/22.
Rule: 5101:2-12-04 Fire Approval	Compliant	Documenting Statement: Although the
		program had a current fire approval at
		the time of the licensing inspection, the
		program did not have the fire inspection
		completed within 12 months from the
		date of the last fire approval. Please
		ensure that fire inspections are
		completed in accordance with the rule
		requirements.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of	Compliant	
Communicable Disease		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free	Compliant	
Environment		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	bocumenting statement(s), it applicable
Qualifications	compliant	
		I
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	
Dula	Chatura	Decumpating Statement (1) If any limit
Rule	Status Compliant	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	
Rule	Status	Documenting Statement(s) If applicable
Rule	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-12-16 First Aid/Standard Precautions	Status Compliant	Documenting Statement(s), If applicable



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Rule	Status	Documenting Statement(c) If applicable
5101:2-12-18 License Capacity	Compliant	Documenting Statement(s), If applicable
5101.2-12-10 LICENSE Capacity	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food	Compliant	
Handling/Storage		
<u> </u>		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Written Program	Compliant	
Policies and Procedures		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Emergency Drills	Compliant	
Pulo	Status	Documenting Statement(a) If applicable
Rule Rule: 5101:2-12-17 Materials and	Status Compliant	Documenting Statement(s), If applicable Documenting Statement: Sufficient
Equipment	Compliant	equipment was observed in all categories.
Equipment		equipment was observed in an categories.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Building Approval	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Supervision	Compliant	
	Compliant	
	I	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 Current Information	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Schedule	Compliant	
Dula	Chathar	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Child Medical and	Compliant	
Enrollment Records		
Dulo	Ctatus	Desumenting Statement() If any list is
Rule	Status	Documenting Statement(s), If applicable



Department of Education Department of Job and Family Services

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5101:2-12-12 Safe Equipment	Compliant	
	-	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-10 Professional	Compliant	
Development Requirements		
Dula	Chathara	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury	Compliant	
Reporting		
Rule	Status	Desumenting Statement/s) If and itself
	Status	Documenting Statement(s), If applicable
5101:2-12-16 Medical, Dental, and	Compliant	
General Emergency Plan		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Group Size	Compliant	
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; however, the method of
		storage and practices for the
		administration were reviewed.
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-03 Inspection	Compliant	
Requirements		
nequirements	1	