



Center Complaint Inspection Summary 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 charming hearts childcare	Program Number 2200021485	Program Type Child Care Center
Address 5734 ridge rd south parma OH 44129		County CUYAHOGA

Inspection Information			
Inspection Type Complaint		Inspection Scope Partial	Inspection Notice Unannounced
Reviewer(s) RENADA FITCH	Inspection Day 12/09/2021	Begin Time 11:00 AM	End Time 11:30 AM

Summary of Findings				
No. Rules Verified 7	No. Rules with Non-compliances 4	No. Serious Risk 0	No. Moderate Risk 2	No. Low Risk 2

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Infants	0 to < 12 months	2 to 6	
Mixed Age	18 months to < 30 months	1 to 13	ratio observed out



Complaint Allegations

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.

Domain:01 Ratio & Supervision

Rule: 5101:2-12-20 Cots and Napping

Code: The program is required to have child sleep only on cots/mats.

Allegation: it was alleged that a child slept on the floor/ carpet

Determination: Substantiated

Findings: During the inspection, it was determined that a child was sleeping as noted in number(s) 1 below:

1. On the floor.
2. At the table.
3. On a bean bag chair.
4. On a couch or chair.
5. Other [].

Children shall be provided a cot or mat to rest, nap, or sleep. 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 required at this time.

Risk Level: Low

Corrective Action Plan Due: 01/22/2022

Summary of Additional Non-Compliances

Serious Risk Non-Compliances

No Additional Serious Risk Non-Compliances were observed during this inspection

Moderate Risk Non-Compliances

Domain:01 Ratio & Supervision



Rule: 5101:2-12-18 Ratio

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

Findings: During the inspection, a ratio of 1 child care staff member(s) for 13 children was determined to have occurred for the mixed age(which contained toddler and preschool aged children) group when the situation in number(s) 1 below occurred:

1. A child care staff member stepped out of the room.
10. Ratio was doubled while children were napping for a group that included at least one infant.
11. Ratio was doubled while children were napping and there were not enough staff members in the building to meet staff/child ratio.
12. Ratio was doubled in the school age group to allow access to the program, however, the program does not serve only school age children.
13. Both child care staff members did not have a working communication device when one staff member left the group to allow access to the school age only program.
14. The child care staff member did not return to the group after allowing access to the school age only program.
15. Other [].

Additional child care 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: 01/22/2022

Domain:02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to store chemicals and machinery in a place that is inaccessible to children. The program is required to provide an outdoor play area away from machinery in operation.

Findings: During the inspection, a potentially hazardous item or toxic substance was used or stored in the Toddler/ Mixed Age classroom where children had access to it, as noted in number(s) 1&9 below.

1. Bleach.
2. Cleaning agent.
3. Fish tank chemicals.
4. Gasoline.
5. Pesticide.
6. Poison, including insect/rodent poison.
7. Flammable substance.
8. Windshield washer fluid.
9. Aerosol cans.
10. A lawn mower.
11. A weed trimmer.
12. Hedge trimmers.
13. A snow blower.
14. Other potentially hazardous substance, equipment or machinery: [].

Provide staff training. Submit the program's corrective action plan, which includes a statement that the potentially hazardous substance or item is no longer accessible to children and/or children will not be outside when machinery is in use and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/22/2022



Low Risk Non-Compliances

Domain:01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

Code: The program is required to have a method for tracking the children in each group. The tracking method must be updated throughout the day and kept with the group at all times.

Findings: During the inspection, it was determined that the method for tracking children in each group did not meet the requirements of the rule as noted in number(s) 4 below:

1. There was no method in place;
2. The method did not include each child's name;
3. The method did not include each child's date of birth;
4. The tracking method did not remain with the group at all times;
5. The tracking method was not updated throughout the day as children entered or left the group.

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

Corrective Action Plan Due: 01/22/2022