

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 Details | | |
|---------------------|----------------|-------------------|
| Program Name | Program Number | Program Type |
| PattyCake Childcare | 2200022295 | FCC - Type B Home |
| Address | | County |
| 1597 Tremont street | | HAMILTON |
| | | |
| Cincinnati | | |
| OH 45214 | | |

| Inspection Information | | | | |
|------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type | Inspection S | соре | Inspection Notice | |
| Provisional | Full | | Announced | |
| Inspection Date | Begin Time | | End Time | |
| 08/30/2021 | 3:00 PM | | 3:52 PM | |
| Reviewer: | | | | |
| Jenny Schloss | | | | |
| Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 78 | 1 | 0 | 0 | 1 |

| 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 | | 0 | 0 | 0 |
| Total Under 2 Years | 3 | 2 | 0 | 2 |
| Older Toddler | | 2 | 0 | 2 |
| Preschool | | 0 | 0 | 0 |
| School Age | | 5 | 0 | 5 |
| Total Capacity/Enrollment | 6 | 7 | 0 | 9 |

| Staff-Child Ratios at the Time of Inspection | | | |
|----------------------------------------------|-----------------|----------------|---------|
| Group | Age Group/Range | Ratio Observed | Comment |
| Placements 8/30/2021 | Mixed Age Group | 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: 2-13-03 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: 03 Postings & Equipment

Rule: 5101:2-13-16 Medical, Dental, and General Emergency Requirements 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 1 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: 09/30/2021

Rules In-Compliance/Not Verified

| 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 |
| 5101:2-13-21 Evening and Overnight | Compliant | |
| Care | | |
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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 |
| 5101:2-13-10 Health Training B | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 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 | bocumenting statement(s), it applicable |
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| Dula | Chatura | |
| Rule 5101:2-13-18 Ratio and Group Size | Status Compliant | Documenting Statement(s), If applicable |
| 5101.2-15-18 Katio 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 | |
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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 |
| 5101:2-13-04 Flammable and | Compliant | |
| Combustible Materials in Type B Home | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-25 Topical Products and | Compliant | |
| Lotions | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Handwashing | Compliant | bocamenting statement(3), ir applicable |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-17 Programming | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-24 On-site Pools | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-12 Safe Equipment | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Fire Safety for Type B | Compliant | |
| Homes | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-24 Parent Permission for | Compliant | Documenting statement(s), it applicable |
| Summing | | |
| Swittining | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-20 Sleep and Napping | Compliant | |
| Requirements for a Licensed Family | | |
| Child Care Provider | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Smoke Free | 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 |
| 5101:2-13-16 Standard Precautions | Compliant | |
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| 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 |
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| 5101:2-13-08 Review Policies and Procedures | Compliant | |
|-----------------------------------------------------|---------------------|-----------------------------------------|
| Pulo | Status | Decumenting Statement(c) If applicable |
| Rule 5101:2-13-02 Voluntary Temporary Closure | Compliant | Documenting Statement(s), If applicable |
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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 Requirements | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Vehicle Requirements | Compliant | |
| D. I. | Chatura | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-11 Fall Zone | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-08 Staff Records | Compliant | |
| | | |
| Rule 5101:2-13-16 Incident/Injury | Status Compliant | Documenting Statement(s), If applicable |
| 5101.2-13-10 incluent/injury | Compliant | |
| 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 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-24 Swimming Sites | Compliant | |
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| Rule 5101:2-13-22 Food Handling Rule 5101:2-13-12 Safe Environment | Status Compliant | Documenting Statement(s), If applicable |
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| 5101:2-13-22 Food Handling Rule | | Documenting Statement(s). If applicable |
| Rule | Compliant | |
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| 5101:2-13-12 Safe Environment | Status | Documenting Statement(s), If applicable |
| | 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 | |
| | compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 First Aid Kit | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Heaters in a Type B | Compliant | |
| Home | | |
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| | | Documenting Statement(s), If applicable |
| | Compliant | |
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| for Field and Routine Trips | | |
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| for Field and Routine Trips | Status | Documenting Statement(c) If applicable |
| for Field and Routine Trips Rule | Status Compliant | Documenting Statement(s), If applicable |
| for Field and Routine Trips Rule 5101:2-13-16 Medical, Dental, and | Status Compliant | Documenting Statement(s), If applicable |
| for Field and Routine Trips Rule | | Documenting Statement(s), If applicable |
| for Field and Routine Trips Rule 5101:2-13-16 Medical, Dental, and | | Documenting Statement(s), If applicable |
| for Field and Routine Trips Rule 5101:2-13-16 Medical, Dental, and | | |
| for Field and Routine Trips Rule 5101:2-13-16 Medical, Dental, and General Emergency Requirements Rule | Compliant Status | Documenting Statement(s), If applicable Documenting Statement(s), If applicable |
| for Field and Routine Trips Rule 5101:2-13-16 Medical, Dental, and General Emergency Requirements | Compliant | |
| for Field and Routine Trips Rule 5101:2-13-16 Medical, Dental, and General Emergency Requirements Rule | Compliant Status | |
| for Field and Routine Trips Rule 5101:2-13-16 Medical, Dental, and General Emergency Requirements Rule | Compliant Status | |
| for Field and Routine Trips Rule 5101:2-13-16 Medical, Dental, and General Emergency Requirements Rule | Compliant Status | |
| for Field and Routine Trips Rule 5101:2-13-16 Medical, Dental, and General Emergency Requirements Rule 5101:2-13-25 Medication Storage | Compliant Status Compliant | Documenting Statement(s), If applicable |
| for Field and Routine Trips Rule 5101:2-13-16 Medical, Dental, and General Emergency Requirements Rule 5101:2-13-25 Medication Storage Rule | Compliant Status Compliant Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Heaters in a Type B | | Documenting Statement(s), If applicable Documenting Statement(s), If applicable |



| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-07 Type B Provider - Foster | Compliant | |
| Parent | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-23 Infant Bottle and Food | Compliant | |
| Preparation | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Toothbrushing | Compliant | bocumenting statement(s), if applicable |
| 5101.2-15-15 100(hb) usining | compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-17 Materials and | Compliant | |
| Equipment | | |
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| Pulo | Status | Decumenting Statement(c) If applicable |
| Rule 5101:2-13-19 Supervision | Status Compliant | Documenting Statement(s), If applicable |
| 5101.2-15-19 Supervision | Compliant | |
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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 |
| 5101:2-13-16 Communicable Diseases | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-21 Sanitary Environment | Compliant | |
| and Hygiene | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-25 Medication | Compliant | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Information in Provider | Compliant | becamenting statement(s), it applicable |
| Portal | | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-14 Requirements for Field and Routine Trips | Compliant | |
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| Rule 5101:2-13-08 Whistle Blower | Status | Documenting Statement(s), If applicable |
| 5101.2-13-08 Whistle Blower | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Serious Incident | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-10 Professional | Compliant | |
| Development | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-20 Use of Crib and Playpen | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-15 Child's Medical | Compliant | Documenting statement(s), if applicable |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-22 Meals and Snacks | Compliant | |
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| Rule 5101:2-13-08 Substitute | Status Compliant | Documenting Statement(s), If applicable |
| Requirements | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-08 Substitute | Compliant | bocamenting statement(s), if applicable |
| 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 | |



| Rule | Status | Documenting Statement(s), If applicable |
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| 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 | |
| | compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-09 Background Checks | Compliant | |
| JIDI.2-13-05 Dackground Checks | compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-09 Background Checks | Compliant | bocumenting 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 | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-18 Attendance | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 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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