



## 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 Treasured Moments Childcare II	Program Number 2200023275	Program Type Child Care Center	
Address 1787 e.55th st. cleveland OH 44103		County CUYAHOGA	
Building Approval Date 12/04/2020	Use Group/Code E	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date 11/18/2020	Food Service Risk Level Level III		

Inspection Information		
Inspection Type Provisional	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 09/21/2021	Begin Time 1:00 PM	End Time 6:58 PM
Reviewer: REBECCA KOTEWICZ		

Summary of Findings				
No. Rules Verified 57	No. Rules with Non-compliances 12	No. Serious Risk 0	No. Moderate Risk 1	No. Low Risk 15

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)		11	0	11
Young Toddler		3	0	3
<b>Total Under 2 ½ Years</b>	25	14	0	14
Older Toddler		4	0	4
Preschool		11	0	11
School Age		0	21	21
<b>Total Capacity/Enrollment</b>	53	15	21	50

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Infants	0 to < 12 months	2 to 6	Arrival



Infants	0 to < 12 months	2 to 7	PM Snack
Toddlers	18 months to < 30 months	1 to 7	Arrival/nap time
Toddlers	18 months to < 30 months	1 to 6	PM snack
Preschool	3 years to < 4 years	1 to 6	Arrival/nap
Preschool	3 years to < 4 years	1 to 8	PM snack, including 3 SA

**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: 2-12-03 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**

**Domain: 09 Children's Files**

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

Finding: 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) 6, 17, 18 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: 10/21/2021

### Low Risk Non-Compliances

#### Domain: 00 License & Approvals

**Rule:** 5101:2-12-02 Current Information

**Code:** The rule requires the program to keep their information current in OCLQS.

**Finding:** During the inspection, it was determined the information in number(s) 4 below was not up to date in the Ohio Child Licensing and Quality System (OCLQS):

- 1) Mailing Address
- 2) Telephone Number
- 3) Email Address
- 4) Days and Hours of Operation
- 5) Services Offered
- 6) Name of Program

Technical assistance was provided, and as discussed, log on to OCLQS and update the information, as required. Please submit a statement verifying compliance.



Corrective Action Plan Due: 10/21/2021

**Domain: 00 License & Approvals**

Rule: 5101:2-12-03 Inspection Requirements

Code: The program staff is required to provide true and accurate information.

Finding: During the inspection, it was determined that the program provided false information, in that an employee medical could not be verified. The rule requires the program to provide accurate and truthful information to the Department. 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: 10/21/2021

**Domain: 01 Ratio & Supervision**

Rule: 5101:2-12-18 Attendance Records

Code: The program is required to maintain a record of the arrival and departure of each child. The program is also required to retain the attendance record for a period of one year.

Finding: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number(s) 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: 10/21/2021

**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.

**Finding:** 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) 1 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: 10/21/2021

**Domain: 02 Safe & Sanitary Environment**

**Rule:** 5101:2-12-12 Safe Equipment

**Code:** The program is required to provide equipment that is safe and hazard free.

**Finding:** During the inspection, equipment was determined to be unsafe or hazardous to children and in need of repair as noted in number(s) 6 below:

1. The equipment had sharp points or corners;
2. The equipment had splinters;
3. The equipment had protruding nails;
4. The equipment had loose or rusty parts;
5. The equipment had paint which contains lead or other poisonous materials;
6. The equipment had hazardous features; printer shelf in hallway is not stable or anchored to the wall.
7. Other [ ].

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

Corrective Action Plan Due: 10/21/2021

**Domain: 02 Safe & Sanitary Environment**



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

**Code:** The program is required to provide a clean restroom with the appropriate materials available.

**Finding:** During the inspection, it was determined that unsanitary conditions, as noted in number(s) 4 below, were in the children's 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 required at this time. Please submit a statement verifying compliance.

Corrective Action Plan Due: 10/21/2021

**Domain: 05 Health & Safety**

**Rule:** 5101:2-12-22 Fluid Milk Requirements

**Code:** The program is required to obtain documentation from a licensed physician if a child between 12 and 24 months of age is to be served anything other than whole homogenized Vitamin D fortified milk.

**Finding:** During the inspection, it was determined that there was no documentation from a licensed physician, physician's assistant, or certified nurse practitioner as required by the rule, when children between 12 and 24 months of age were served anything other than whole homogenized Vitamin D fortified fluid milk. 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.

Corrective Action Plan Due: 10/21/2021

**Domain: 05 Health & Safety**

**Rule:** 5101:2-12-22 Fluid Milk Requirements



Code: The program is required to obtain documentation from a licensed physician if a child over 24 months of age is to be served anything other than one percent or skim milk that is Vitamin A and D fortified.

Finding: During the inspection, it was determined that there was no documentation from a licensed physician, physician's assistant, or certified nurse practitioner as required by the rule, when children over 24 months of age were served anything other than one percent or skim milk that is Vitamin A and D fortified. 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.

Corrective Action Plan Due: 10/21/2021

**Domain: 06 Program Information**

Rule: 5101:2-12-21 Evening and Overnight Care

Code: The program is required to provide children with hygiene items.

Finding: During the inspection, it was determined that children were not provided with the item(s) noted in number(s) 1, 2 below, as required:

1. A clean, individual, individually labeled washcloths.
2. Towels.
3. Toothbrushes.

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. Please submit a statement verifying compliance.

Corrective Action Plan Due: 10/21/2021

**Domain: 08 Staff Files**

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to be completed and on file at the program.

Finding: In review of the staff records, it was determined that completed medical examination statement(s) for the employee(s) listed on the Employee Record Chart [was/were] not on file, as required by this rule. Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/21/2021



**Domain: 08 Staff Files**

Rule: 5101:2-12-07 Administrator Responsibilities/Requirements

Code: The program administrator is required to maintain current employee records in the Ohio Professional Registry.

Finding: 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) 3, 6 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: not assigned to group

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

Corrective Action Plan Due: 10/21/2021

**Domain: 08 Staff Files**

Rule: 5101:2-12-07 Administrator Responsibilities/Requirements

Code: The program administrator is required to complete the rules course review within the defined time period.

Finding: During the inspection, it was determined that the administrator had not completed the required rules review course provided by this Department for program administrators within the time period defined in this rule. 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.

Corrective Action Plan Due: 10/21/2021





**Domain: 08 Staff Files**

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to include all information.

Finding: 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) 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: 10/21/2021

**Domain: 08 Staff Files**

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

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

Finding: 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: 10/21/2021



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**Rules In-Compliance/Not Verified**

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Meal and Snack Requirements	Compliant	
Rule: 5101:2-12-13 Handwashing Requirements	Compliant	Documenting Statement: Staff and children were observed washing hands as required by the rule.
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 11/18/21.
5101:2-12-16 Management of Communicable Disease	Compliant	
Rule: 5101:2-12-13 Smoke Free Environment	Compliant	Documenting Statement: No smoking was allowed on the premises, and the notice stating that smoking is prohibited was observed posted in a conspicuous place.
5101:2-12-07 Administrator Qualifications	Compliant	
Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements	Compliant	Documenting Statement: All Child Care Staff Members had verification of educational requirements on file at the program.



Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-14 Transportation - Driver Requirements	Compliant	Documenting Statement: The driver(s) had completed the required ODJFS driver training.
Rule: 5101:2-12-16 Written Disaster Plan	Compliant	
Rule: 5101:2-12-04 Food License	Compliant	Documenting Statement: The food service license was observed posted. Following is the audit number and date of expiration: AANSC4WPV4; MARCH 1, 22.
Rule: 5101:2-12-19 Child Guidance	Compliant	
Rule: 5101:2-12-16 First Aid/Standard Precautions	Compliant	Documenting Statement: During the inspection, 2 first aid kits were reviewed and available as required.
Rule: 5101:2-12-11 Outdoor Play Fall Zones	Compliant	Documenting Statement: The protective material used under outdoor equipment was rubber mulch.
Rule: 5101:2-12-18 License Capacity	Compliant	
Rule: 5101:2-12-22 Safe Food Handling/Storage	Compliant	
Rule: 5101:2-12-07 Written Program Policies and Procedures	Compliant	
Rule: 5101:2-12-11 Indoor Space Requirements	Compliant	



Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Emergency Drills	Compliant	Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-17 Materials and Equipment	Compliant	Documenting Statement: Sufficient equipment was observed in all categories.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Play Equipment	Compliant	Documenting Statement: Outdoor equipment was viewed to be safe and free of rust, sharp points, and other hazards.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Building Approval	Compliant	Documenting Statement: On the day of the inspection, the program was operating in compliance with the current building approval(s).
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-02 License Posted	Compliant	Documenting Statement: The license was posted in a visible location as required.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Space Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-19 Supervision	Compliant	Documenting Statement: Child Care Staff Members were supervising the children and were able to intervene as needed.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-23 Infant Bottle and Food Preparation	Compliant	



Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-17 Daily Schedule	Compliant	Documenting Statement: Daily schedules were observed posted.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-20 Cots and Napping	Compliant	Documenting Statement: Cots were placed appropriately and safely during nap time.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-23 Infant Daily Care	Compliant	Documenting Statement: Appropriate daily written records for all infants were viewed.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Child Medical and Enrollment Records	Compliant	Documenting Statement: At the time of the inspection, 25% of the children's records were reviewed, and the records were complete, as required by the rule.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Toothbrushing Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-20 Cribs	Compliant	Documenting Statement: All cribs were placed 2 feet apart.
Rule: 5101:2-12-20 Cribs	Compliant	Documenting Statement: Cribs were separated from the play space by a safe and sturdy and physical barrier.
Rule: 5101:2-12-20 Cribs	Compliant	Documenting Statement: All cribs were labeled with the assigned infant's name.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Separation of Children Under 2 1/2 Years	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-10 Professional Development Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable



Rule: 5101:2-12-12 Safe Environment	Compliant	Documenting Statement: A safe environment was observed during the inspection. Children were protected from items and conditions which threaten their health, safety and well-being.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-14 Transportation - Vehicle Requirements	Compliant	Documenting Statement: An annual safety check of the vehicle(s), using the JFS 01230 "Vehicle Inspection Report For Child Care Centers" form, was verified for the Honda Odyssey Van VIN 3238 and dated 12/29/20.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-14 Transportation and Field Trip Procedures	Compliant	Documenting Statement: The program uses the ODJFS sample trip permission form for routine trips to secure written permission from parents or guardians.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury Reporting	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	Documenting Statement: On the day of the inspection, the complete prescribed JFS 01242 "Medical, Dental, and General Emergency Plan For Child Care" were posted in the program as required.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Group Size	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Ratio	Compliant	Documenting Statement: The Appendix A "Staff/Child Ratios, Age Grouping and Maximum Group Size" was posted in a noticeable area at the program as required.
Rule: 5101:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child ratios observed during the inspection were in compliance.



Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-23 Diapering and Toilet Training	Compliant	Documenting Statement: Appropriate diaper changing procedures were observed during the inspection in the [infant/toddler] room(s).
Rule: 5101:2-12-25 Medication Administration and Food Supplements	Compliant	Documenting Statement: The program had complete written documentation for administering medication or food supplements.
Rule: 5101:2-12-09 Background Check Requirements	Compliant	Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed.