

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 Deta	ails		
Program Name	Program Number		Program Type	
Zion Perfecting Childcare LLC	2230028959		Child Care Center	
Address 4075 East 141st Street Cleveland OH 44128			County CUYAHOGA	
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½	
08/24/2023	E	49	WidAilTidiTi Officer 2 /2	
Fire Inspection Approval Date	Food Service Risk Level			
08/15/2023	Level III	Level III		

Inspection Information						
Inspection Type		Inspection Scope		Inspection Notice		
Amendment - chang	ge of location Ful	<u>II </u>		Unannounced	Unannounced	
Inspection Date 09/13/2023	Beg	gin Time 8:4	45 AM	End Time 12:30 PM		
Reviewer:						
Kathryn Noftz						
Summary of Findings						
No. Rules Verified	No. Rules with Non-comp	oliances	No. Serious Risk	No. Moderate Risk	No. Low Risk	
58	9		0	1	8	

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
Older Toddler		0	0	0
Preschool		0	0	0
School Age		0	0	0
Total Capacity/Enrollment		0	0	0

Staff-Child Ratios at the Time of Inspection				
Group	Group Age Group/Range Ratio Observed Comme			

Summary of Non-Compliances

If a program disagrees with a licensing finding, the program may request a review of the finding(s). Ohio Administrative Code 5101:2-12-03 and 5101:2-13-03 detail the process for submitting a request for review. The request for review must be submitted within seven business days from the receipt of the licensing report. In addition, if the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited.

Serious Risk Non-Compliances	_
No Serious Risk Non-Compliances were observed during this inspection	
	_1

Moderate Risk Non-Compliances

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Space Requirements

<u>Code</u>: The program is required to have an outdoor play space free from immediate risk.

<u>Finding</u>: During the inspection, it was determined that an area was used which was not protected from traffic and other hazards by a continuous fence in good condition, or natural barrier, that ensured children were not able to leave the playground area. The fence or natural barrier was determined to present an immediate risk for a child to be able to leave the playground as noted in number 1,10,11,12 below:

- 1. The fence, natural barrier, or combination of fence and natural barrier was not continuous.
- 2. The fencing had missing slat boards through which children could leave the playground.
- 3. The gate was broken and did not close.
- 4. The latch on the gate was broken.
- 5. The gate had no latch.
- 6. The fencing was broken.
- 7. The latch was easily opened by children on the playground.
- 8. The latch was not engaged to prevent children from opening the gate.
- 9. The portable fencing approved for use by the Department was not being used.
- 10. Other- The fence did not have a gate with a latch.
- 11. Other- The fence was not sturdy.



12. Other- The fence was not an appropriate height for school age children.

Discontinue use of the playground and provide a space for outdoor play which is well defined by a continuous fence or natural barrier and protected from other hazards. Submit the program's corrective action plan including a picture of the playground and gate to Kathryn.Noftz@jfs.ohio.gov to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/14/2023

Low Risk Non-Compliances

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Equipment

<u>Code</u>: The program is required to refrain from placing indoor swings, slides, climbers, and climbing apparatus directly over a hard surface. Shock absorbent protective covering, intended to be a fall surface per manufacturer's guidelines, shall be placed and used under the equipment.

<u>Finding</u>: During the inspection, it was determined that indoor swings, slides, climbers, and climbing apparatus did not have required shock absorbent protective covering under and around the equipment as noted in number(s) 1 below:

- 1. A shock absorbent protective covering was not used.
- 2. The mats were not at least one and one-half inches thick for equipment over three feet high.
- 3. The mats were not used according to the manufacturer's guidelines.
- 4. Other [].

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

Corrective Action Plan Due: 09/14/2023

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>: During the inspection, it was determined that children were not protected from item(s) or condition(s) which may threaten their health, safety, or well-being as noted in number(s) 1,22 below:

- 1. Surge protectors/outlets did not have childproof receptacle covers. (Toddler/Preschool)
- 2. Open pull cords that are not closed loop.
- 3. Toys or other items small enough to be swallowed were present in the space where infants and/or toddlers were in care.
- 4. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
- 5. Stacked chairs.
- 6. Employee(s) purse(s).
- 7. Diaper bags.
- 8. Television not securely anchored.
- 9. Small or lightweight pieces of shelving units are not securely anchored to the wall.
- 10. Smoke detector needing batteries replaced.
- 11. An area rug did not have a nonskid backing.
- 12. An area rug presented a tripping hazard.
- 13. A floor surface that was unsafe in that [].
- 14. No platform was provided for the sink or toilet in the [] classroom.
- 15. The platform provided for the sink or toilet in the [] classroom was not sturdy.
- 16. The platform provided for the sink or toilet in the [] classroom posed a safety hazard in that [].
- 17. Telephone cords.
- 18. Staff member stepped over a barrier/gate while holding a child.
- 19. Emergency exits were blocked by the following classroom furniture: [].
- 20. A mercury thermometer was being used to take a child's temperature.
- 21. Methods of ventilation used did not provide protection from rodents, insects, or other hazards.
- 22. Other- The door lock was broken on the storage room (Preschool)

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: 09/14/2023

Domain: 03 Postings & Equipment

Rule: 5101:2-12-17 Materials and Equipment

Code: The program is required to have enough equipment for all children in care.

<u>Finding</u>: During the inspection, it was determined that equipment and materials in the following categories were not provided in sufficient quantities for children in the Preschool/Toddler classroom, as required: 7.

1. Art supplies (excludes infants)

- 2. Manipulative materials and equipment
- 3. Blocks
- 4. Science-nature equipment (excludes infants)
- 5. Language arts and auditory materials and equipment
- 6. Pretend or dramatic play materials
- 7. Music equipment (Toddler and Preschool)
- 8. Transportation materials and equipment
- 9. Gross motor equipment
- 10. Sensory motor equipment
- 11. School age children were not provided sufficient equipment and materials in at least five of the first nine categories above.

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: 09/14/2023

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: The program staff's medical statements are required to be completed and on file at the program.

<u>Finding</u>: In review of the staff records, it was determined that the medical statements for the employees listed on the Employee Record Chart did not meet the requirements as listed in number(s) 3 below.

- 1. A medical statement was not on file for at least one employee;
- 2. The medical statement(s) on file did not have a date of examination within 12 months of the employee's first day of employment;
- 3. Date of examination was missing;
- 4. Signature, business address, or telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination was missing;
- 5. A statement was missing that verifies 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);
- 6. Tuberculosis (TB) screening/test information was missing:
- 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 6a.
- 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: 09/14/2023

Domain: 08 Staff Files

Rule: 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 in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 4,5,6 below:

- 1. At least one administrator, employee or child care staff member (including substitutes) had not created a profile.
- 2. At least one administrator, employee or child care staff member had not created an employment record for the program on or before their first day of employment.
- 3. At least one administrator, employee or child care staff member had not updated changes to positions or roles within five calendar days of the change.
- 4. The administrator had not assigned at least one employee or child care staff member to the program's organization dashboard.
- 5. At least one individual's schedule was not current.
- 6. At least one individual's position or role did not include an applicable group assignment.
- 7. At least one individual's employment had not been end dated.
- 8. Other:

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

Corrective Action Plan Due: 09/14/2023

Domain: 08 Staff Files

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

Code: 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) 1,2,4,5 below:

- 1. First Aid child care staff members scheduled during the hours of Open and Close had expired training
- 2. First Aid child care staff members scheduled during the hours of Open and Close did not have verification of completion of First Aid
- 3. First Aid trained child care staff member was not present in each building used by the program.
- 4. CPR child care staff members scheduled during the hours of Open and Close had expired training
- 5. CPR child care staff scheduled during the hours of Open and Close had did not have verification of completion of CPR
- 6. CPR trained child care staff member was not present in each building used by children
- 7. CPR training taken by staff was not appropriate for all ages and developmental levels of the children in care
- 8. CPR audiovisual or electronic media training taken by staff did not include an in-person component of the training
- 9. Communicable Disease child care staff members scheduled during the hours of [] and [] had expired training
- 10. Communicable Disease child care staff scheduled during the hours of [] and [] had not taken Communicable Disease training
- 11. Communicable Disease trained child care staff member was not present in each building used by the program
- 12. Child Abuse child care staff members scheduled during the hours of [] and [] had expired training
- 13. Child Abuse child care staff scheduled during the hours of [] and [] had not taken Child Abuse training
- 14. Child Abuse trained child care staff was not in each building used by the program

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: 09/14/2023

Domain: 10 Written Policies & Procedures

Rule: 5101:2-12-16 Written Disaster Plan

<u>Code</u>: The program is required to have a written disaster plan.

<u>Finding</u>: During the inspection, it was determined the program's written disaster plan did not meet the requirement or was missing the information in number(s) 5,11 below:

Procedures:

- 1. The written disaster plan had not been completed
- 2. The plan was not provided to all child care staff and employees
- 3. The plan was not used to respond to an emergency or disaster situation

- 4. Weather emergencies and natural disasters which include severe thunderstorms, tornadoes, flash flooding, major snowfall, blizzards, ice storms or earthquakes
- 5. Emergency evacuation due to threats of violence which includes active shooter, bioterrorism or terrorism
- 6. Emergency or disaster evacuations due to hazardous materials and spills, gas leaks or bomb threats.
- 7. Outbreaks, epidemics or other infectious disease emergencies
- 8. Loss of power, water, or heat
- 9. Other threatening situations that may pose a health or safety hazard to the children in the program Details:
- 10. Shelter in place or evacuation, how the program will care for and account for the children until they can be reunited with the parent
- 11. Assisting children with special needs and/or health conditions
- 12. Emergency contact information for parents and the program
- 13. Procedures for notifying and communicating with parents regarding the location of the children if evacuated
- 14. Procedures for communicating with parents during loss of communications, no phone or internet service available
- 15. The location of supplies and procedures for gathering necessary supplies for staff and children if required to shelter in place
- 16. What to do if a disaster occurs during the transport of children or when on a field trip or routine trip
- 17. Making the plan available to all child care staff members and employees
- 18. Training of staff or reassignment of staff duties as appropriate
- 19. Updating the plan on a yearly basis
- 20. Contact with local emergency management officials

Make the necessary revisions to the disaster plan. Submit the program's corrective action plan, which includes the revised information, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/14/2023

Domain: 10 Written Policies & Procedures

Rule: 5101:2-12-07 Written Program Policies and Procedures

Code: The program's policies and procedures are required to include all topics outlined in rule.

<u>Finding</u>: During the inspection, it was determined the program's written policies and procedures provided to the parents/guardians and employees was missing item number(s) 30 below:

General Information

- 1. Program name, address, email address and telephone number.
- 2. Description of the program's program philosophy.
- 3. Days and hours of operation, scheduled closings and basic daily schedule.
- Staff/child ratios and group size.
- 5. Opportunities for parent involvement in program activities.
- 6. Opportunities for parents to meet with teachers regarding their child.
- 7. Payment schedule, overtime charges and registration fees as applicable.

8. Supports for onsite breastfeeding or pumping for mothers who wish to do so (if the program serves infants or toddlers).

Program Policies and Procedures

- 9. Enrollment including required enrollment information.
- 10. Care of children without immunizations.
- 11. Attendance including procedures for arrival and departure, the program's absent day policy, releasing child to persons other than the parent, releasing a child according to a custody agreement and follow up when a child scheduled to arrive from another program or activity does not arrive.
- 12. Supervision of children, including a separate supervision policy for school-age children, if applicable.
- 13. Child guidance.
- 14. Suspension and expulsion.
- 15. Compliance with the Americans with Disabilities Act (ADA), including administering medication to children with disabilities and administering care procedures to children with disabilities.
- 16. Outdoor play, including limitations placed on outdoor play due to weather or safety issues (considerations may include but are not limited to temperature, humidity, wind chill, ozone levels, pollen count, lightning, rain or ice.)
- 17. Food and dietary policy, including, information regarding meeting one-third of the child's recommended daily dietary allowance, policy regarding formula, breast milk, meals and snacks, and a policy on providing supplemental food.
- 18. Management of illness including isolation precautions, symptoms for discharge and return and notification of parent of ill child.
- 19. Summary of procedures taken in the event of an emergency, serious illness or injury.
- 20. Administration of medication and topical products including medical foods, modified diets and whether school age children are permitted to carry their own medication and ointments.
- 21. Transportation for fieldtrips, routine trips (if applicable) and emergencies, including if the center will provide child care services to children whose parents refuse to grant consent for transportation to the source of emergency treatment.
- 22. Water activities/swimming.
- 23. Infant care, if applicable, including feeding, frequency of diaper checks and information about daily activities.
- 24. Sleeping, Napping and Resting.
- 25. Evening and overnight care, if applicable.
- 26. Policy on hours of operation including closing due to weather, school delays or closings and any other factors.
- 27. Situations that may require disenrollment of a child, if applicable.
- 28. Problem or issue resolution for parents or employees to follow when needing assistance in resolving problems related to the child care program.
- 29. Formal screenings and assessments on enrolled children and if the program reports child level data to ODJFS pursuant to 5101:2-17-02 of the Administrative Code.
- 30. Other- Pg 10 Topical Product policy conflicts with rule. Please review and revise the last sentence.

Revise the program's written policies and procedures to include the missing information. Submit the program's corrective action plan, which includes the revised written policies and procedures, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/14/2023

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	Secretary of the secret
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 Current Information	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-03 Inspection	Compliant	
Requirements	Compilation	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Building Department	Compliant	
Inspection		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Fire Inspection	Compliant	Documenting Statement: Please Note:
		Documentation of a fire inspection
		without any uncorrected violations must
		be secured for the program. Secure a
		new fire inspection by 8-15-24.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Food Service	Compliant	Documenting Statement: The food service
Requirements		license was observed posted. Following is
		the audit number and date of expiration:
		AANS-CU5S88, 3-1-24.
Rule	Ctatus	Decumenting Statement(e) If applicable
	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator Qualifications	Compliant	

5101:2-12-08 Orientation Training & Whistle Blower Protection	Compliant	
Rule 5101:2-12-09 Background Check Requirements	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-12-10 Professional Development Requirements	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-12-11 Indoor Space Requirements	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-12-13 Sanitary Equipment and Environment	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-12-13 Handwashing Requirements	Status Compliant	Documenting Statement(s), If applicable
Rule Rule: 5101:2-12-13 Smoke Free Environment	Status Compliant	Documenting Statement(s), If applicable Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program.
Rule 5101:2-12-15 Child Medical and Enrollment Records	Status Compliant	Documenting Statement(s), If applicable
Rule Rule: 5101:2-12-15 Medical/Physical Care Plans	Status Compliant	Documenting Statement(s), If applicable Documenting Statement: At the time of the inspection, there were no children currently enrolled who had health conditions.
Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan	Status Compliant	Documenting Statement(s), If applicable 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
5101:2-12-16 Emergency Drills	Compliant	Documenting statement(3), it applicable
3101.2 12 10 Emergency Dims	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 First Aid/Standard	Compliant	Documenting Statement: During the
Precautions		inspection, the program had complete
		first aid kits available as required.
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	<u>. </u>	<u>.</u>
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Management of	Compliant	Documenting Statement: The JFS 08087
Communicable Disease		"Communicable Disease Chart" was
		posted and was readily available to staff
		and parents.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury	Compliant	
Reporting		
	_	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-17 Daily Schedule	Compliant	Documenting Statement: Daily schedules
		were observed posted.
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Ratio	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Group Size	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Attendance Records	Compliant	Documenting Statement(s), if applicable
5101.2-12-16 Attenuance Records	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-19 Supervision	Compliant	Documenting Statement: During the
Maic. 3101.2 12 13 Supervision	Compilant	inspection, the requirements of the rule
		inspection, the requirements of the fule

	regarding supervision of children were discussed.
Status	Documenting Statement(s), If applicable
Compliant	
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	Documenting Statement(s), If applicable
Compliant	Documenting Statement: During the
	inspection, the requirements of the rule
	regarding sleeping and napping were discussed.
Status	Documenting Statement(s), If applicable
Compliant	
Status	Documenting Statement(s), If applicable
Compliant	
Status	Documenting Statement(s), If applicable
	Bocumenting statement(3), it applicable
Соптрпать	
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	Documenting Statement(s), If applicable
Compliant	Documenting Statement: The program's
	policy was not to administer medication.
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	Documenting Statement(s), If applicable
Compliant	
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