

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	nils	
Program Name	Program Number		Program Type
UNION AVENUE UNITED METHODIST	000000100289		Child Care Center
PRESCHOOL			
Address			County
1843 S UNION AVE ALLIANCE			STARK
OH 44601			
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
10/27/1971	E	80	0
Fire Inspection Approval Date	Food Service Risk Level		
08/03/2022	Level II		

Inspection Information				
Inspection Type	Inspection So	cope	Inspection Notice	
Annual	Full		Unannounced	
Inspection Date 01/09/2023	Begin Time 9	:15 AM	End Time 11:00 AM	
Reviewer: JENNIFER COPE				
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
58	3	0	0	3

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	0	0
School Age		0	0	0
Total Capacity/Enrollment	80	0	0	0

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



Preschool 1	3 years to < 4 years	1 to 9	
Preschool 2	4 years to < 5 years	1 to 10	
Preschool 3	5 years to < Kindergarten	2 to 13	

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		
Moderate Risk Non-Compliances		
No Moderate Risk Non-Compliances were observed during this inspection		
Low Risk Non-Compliances		



Domain: 03 Postings & Equipment

Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan

Code: The program is required to post and implement the JFS 01242 "Medical, Dental, and General Emergency

Plan" when necessary.

<u>Finding</u>: During the inspection, it was determined the requirements for the JFS 01242 "Medical, Dental, and General Emergency Plan for Child Care" were not followed as noted in number(s) 8 below:

- 1. The plan was not posted in each classroom.
- 2. The plan was not posted in other spaces used by children.
- 3. The name, address and telephone number of the program were not complete.
- 4. The location of first aid kit, fire extinguishers and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.
- 5. 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.
- 6. Location of children's records was not complete.
- 7. Emergency information including any medications or supplies needed in the event of an evacuation was not complete.
- 8. The current version of the prescribed form was not used.
- 9. 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: 02/11/2023

Domain: 05 Health & Safety

Rule: 5101:2-12-16 Emergency Drills

<u>Code</u>: The program is required to complete fire drills, weather drills, and emergency/lockdown drills appropriately.

<u>Finding</u>: During the inspection, it was determined that the required drills were not completed for item number(s) 1 below:

- 1. Monthly fire drills.
- 2. Monthly weather emergency drills (March through September).
- 3. Emergency/lockdown drills in each quarter of the calendar year.

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

Corrective Action Plan Due: 02/11/2023

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: 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.

- 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: 02/11/2023

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-02 License Posted	Compliant	Documenting Statement: The license was
		in a location visible to parents as
		required.
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	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Building	Compliant	Documenting Statement: On the day of
Department Inspection	· ·	the inspection, the program was
		operating in compliance with the current
		building approval(s).
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 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 8/3/2023.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Food Service	Compliant	Documenting Statement: The food service
Requirements	Compliant	license was observed posted. Following is
Neganements		the audit number and date of expiration:
		9933299; 3/1/2023.
		3333233, 3, 1, 2323.
	<u> </u>	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-05 Denial, Revocation and	Compliant	
Suspension		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	
Qualifications		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	
Responsibilities/Requirements		



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Written Program	Compliant	
Policies and Procedures		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-08 Child Care Staff	Compliant	Documenting Statement: All Child Care Staff Members had verification of
Member Educational Requirements		
		educational requirements on file at the
		program.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-08 Orientation	Compliant	Documenting Statement: On the day of
Training & Whistle Blower Protection		the inspection, all child care staff
		members had met orientation training
		requirements.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-09 Background Check	Compliant	Documenting Statement: During the
Requirements		inspection, the required documentation
		regarding background checks was on file
		for all employees listed.
	<u>I</u>	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-10 Health Training	Compliant	Documenting Statement: The program
Requirements		had at least one Child Care Staff Member
		with currently valid training in First Aid,
		Management of Communicable Disease,
		CPR, and Child Abuse Prevention present
		and readily accessible during all hours of
		operation.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-10 Professional	Compliant	2 Statisticing Statement(s), it applicable
Development Requirements	Compilation	
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space	Compliant	
Requirements		
	1 -	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Space	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
Nuic	Status	Documenting Statement(s), if applicable

Rule: 5101:2-12-12 Safe Equipment	Compliant	Documenting Statement: Equipment was observed to be in good condition.
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: 5101:2-12-13 Sanitary	Compliant	Documenting Statement: During the
Equipment and Environment		inspection, the equipment was observed
		clean and in good repair.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Handwashing	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-13 Smoke Free	Compliant	Documenting Statement: No smoking was
Environment		allowed on the premises, and the notice
		stating that smoking is prohibited was
		observed posted in a conspicuous place.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Child Medical and	Compliant	Documenting Statement: At the time of
Enrollment Records		the inspection, 25% of the children's
		records were reviewed, and the records
		were complete, as required by the rule.
Rule: 5101:2-12-15 Child Medical and	Compliant	Documenting Statement: In review of
Enrollment Records	'	25% of the records, at the time of the
		inspection, children's medical statements
		were complete and on file, as required by
		the rule.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Medical/Physical Care	Compliant	(7)
Plans	·	
Rule	Status	Documenting Statement(s), If applicable

Rule: 5101:2-12-16 First Aid/Standard Precautions	Compliant	Documenting Statement: During the inspection, the program had complete first aid kits available as required.
	T _a , .	
Rule: 5101:2-12-16 Management of	Status Compliant	Documenting Statement(s), If applicable Documenting Statement: The JFS 08087
Communicable Disease	Compilant	"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 Reporting	Compliant	bocamenting statement(s), if applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Written Disaster Plan	Compliant	boomening statement(s), it approaches
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: 5101:2-12-17 Materials and	Compliant	Documenting Statement: Sufficient
Equipment		equipment was observed in all categories.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	Bocamenting statement(s), it applicable
Rule	Status	Decumenting Statement(s) If applicable
Rule: 5101:2-12-18 License Capacity	Compliant	Documenting Statement(s), If applicable Documenting Statement: The program
		was operating within their license capacity limits.
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Rule: 5101:2-12-18 Ratio	Status Compliant	Documenting Statement(s), If applicable Documenting Statement: The Appendix A
	-5	"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: 5101:2-12-18 Group Size	Compliant	Documenting Statement: The group sizes observed on the day of the inspection were in compliance.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Attendance	Compliant	Documenting Statement: Child Care Staff
Records		Members were observed recording the attendance for each child upon arrival and documenting each child's departure.
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
5101:2-12-19 Child Guidance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Meal and Snack	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Fluid Milk Requirements	Compliant	bocumenting statement(s), it applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food	Compliant	0 - 200 - 10 - 10 - 10 - 10 - 10 - 10 -
Handling/Storage		
Pulo	Chatus	Decumenting Statement(s) If applicable
Rule 5101:2-12-25 Medication	Status Compliant	Documenting Statement(s), If applicable
Administration	Compilant	
7.6/111113010011		