

# **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 <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. 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      |
| PRICE YMCA BASE                                       | 000000100342                      |                       | Child Care Center |
| Address<br>2610 DELMORE ST CUYAHOGA FALLS<br>OH 44221 |                                   |                       | County<br>SUMMIT  |
| Building Approval Date                                | Use Group/Code<br>School Building | Occupancy Limit<br>NA | Maximum Under 2 ½ |
| Fire Inspection Approval Date                         | Food Service Risk L<br>Exempt     | evel                  |                   |

| Inspection Information     |                                |                  |                   |              |
|----------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type Annual     | Inspection Sc                  | cope             | Inspection Notice |              |
|                            | Full                           |                  | Unannounced       |              |
| Inspection Date 11/08/2023 | Begin Time 7                   | :10 AM           | End Time 8:15 AM  |              |
| Reviewer:<br>BETH RAGLE    |                                |                  | •                 |              |
|                            |                                |                  |                   |              |
| Summary of Findings        |                                |                  |                   |              |
| No. Rules Verified         | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58                         | 4                              | 0                | 1                 | 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         | 11         | 11    |  |
| Total Capacity/Enrollment                                 | 36               | 0         | 11         | 11    |  |

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

| School Age | School-Age to < 11 years | 1 to 3 | Art activity             |
|------------|--------------------------|--------|--------------------------|
| School Age | School-Age to < 11 years | 1 to 9 | <b>Emotions activity</b> |

## **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 |
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## **Moderate Risk Non-Compliances**

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Ratio

Code: The program is required to have a second employee present, and used based on the qualifications they

meet, when seven or more children are present.

Finding: During the inspection, it was determined that the program did not meet the rule requirement as noted in number 1 below:

- The program did not have a second employee or Child Care Staff Member present when required; 1.
- The program was using a second Child Care Staff Member who was not able to meet this criteria as defined in the rule.

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

Corrective Action Plan Due: 12/08/2023

### **Low Risk Non-Compliances**

#### **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 4 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: 12/08/2023

#### **Domain: 08 Staff Files**

Rule: 5101:2-12-10 Professional Development Requirements

<u>Code</u>: The program is required to ensure child care staff members, including substitutes used more than ninety days annually, obtain at least 6 hours of professional development each state fiscal year.

<u>Finding</u>: In review of the staff records, it was determined that at least one child care staff member did not meet the annual professional development requirement as noted in number 1 below:

- 1. The child care staff member(s) had not completed at least six hours of professional development.
- 2. Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.
- 3. Training topic did not meet the requirements listed in appendix A of this rule.
- 4. Documentation of training did not meet the requirements of this rule.
- 5. The substitute(s) had been used more than ninety days annually between July first and June thirtieth and had not completed at least six hours of professional development
- 6. Other.

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

Corrective Action Plan Due: 12/08/2023

### Domain: 09 Children's Files

Rule: 5101:2-12-15 Child Medical and Enrollment Records

<u>Code</u>: The program is required to use the updated JFS 01234 "Child Enrollment and Health Information For Child Care".

<u>Finding</u>: In review of 25% of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in numbers 4, 15 below.

- 1. No enrollment form was completed for at least one child
- 2. The current JFS 01234 was not completed for at least one child
- 3. Complete child information
- 4. Complete parent information
- 5. Complete emergency contact information
- 6. Complete physician information
- 7. Information regarding the parent list
- 8. Health information
- 9. Additional information for all boxes checked "yes"
- 10. Emergency transportation information
- 11. Parent/guardian's signature
- 12. Diapering Statement
- 13. Acknowledgement of Policies and Procedures
- 14. Enrollment form for at least one child was not updated by either the parent or the administrator
- 15. Enrollment form for at least one child was not signed by the administrator
- 16. Other.

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 not required at this time.



| Beginning! |  |  |
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# **Rules In-Compliance/Not Verified**

| 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  |
| Rule: 5101:2-12-02 Current<br>Information | Compliant | Documenting Statement: The program had current information entered in the Ohio Child Licensing and Quality System (OCLQS). |
| Rule                                      | Status    | Decumenting Statement(s) If applicable   |
| 110.10                                    |           | Documenting Statement(s), If applicable  |
| 5101:2-12-03 Inspection<br>Requirements   | Compliant |  |
| Rule                                      | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-04 Building               | Compliant | Documenting Statement: This program  |
| Department Inspection                     | '         | serves only school age children in a public  |
| '   |           | or chartered non-public school building.   |
| 2.1                                       |           |  |
| Rule                                      | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-04 Fire Inspection        | Compliant | Documenting Statement: This program  |
|   |           | serves only school age children in a public or chartered non-public school building.                                       |
|   |           |  |
| Rule                                      | Status    | Documenting Statement(s), If applicable  |

| Degradas.                            | 1         | T   |
|--------------------------------------|-----------|---|
| Rule: 5101:2-12-04 Food Service      | Compliant | Documenting Statement: The program          |
| Requirements                         |           | has obtained a food service exemption       |
|                                      |           | status from the local health department.    |
|                                      |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable     |
| Rule: 5101:2-12-07 Administrator     | Compliant | Documenting Statement: The new              |
| Qualifications                       |           | administrator has until 2/15/2024 to        |
| 23                                   |           | complete the rules review course.           |
|                                      |           | complete the fales review course.           |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable     |
| Rule: 5101:2-12-07 Written Program   | Compliant | Documenting Statement: No changes           |
| Policies and Procedures              | Compilant | have been made to the written policies      |
| Folicies and Flocedules              |           | and procedures since it was last approved   |
|                                      |           | · · · · · · · · · · · · · · · · · · ·       |
|                                      |           | by this Department.                         |
|                                      |           |   |
| Dulo                                 | Status    | Decumenting Statement/s) If a reliable      |
| Rule                                 | Status    | Documenting Statement(s), If applicable     |
| Rule: 5101:2-12-08 Medical Statement | Compliant | Documenting Statement: All employees        |
|                                      |           | had current medical statements on file.     |
|                                      |           |   |
|                                      | l s       | 10 11 61 11 11                              |
| 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.                   |
|                                      |           |   |
|                                      |           |   |
| 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    |
| 1                                    |           | 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.                                  |
|                                      |           |   |
| D. J.                                | Chabina   | December Chataman (1) (f. 1)                |
| Rule                                 | Status    | Documenting Statement(s), If applicable     |

| 5101:2-12-11 Indoor Space           | Compliant           |   |
|-------------------------------------|---------------------|---|
| Requirements                        | Compliant           |   |
| Requirements                        |                     |   |
| Rule                                | Status              | Documenting Statement(s), If applicable                                       |
| Rule: 5101:2-12-12 Safe Equipment   | Compliant           | Documenting Statement: Equipment was  |
| Naie. 3101.2 12 12 3are Equipment   | Compliant           | observed to be in good condition.   |
|                                     |                     | 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.   |
|                                     |                     |   |
|                                     | I a                 |   |
| Rule                                | Status              | Documenting Statement(s), If applicable                                       |
| Rule: 5101:2-12-13 Handwashing      | Compliant           | Documenting Statement: It was discussed                                       |
| Requirements                        |                     | with the staff that hand washing shall  |
|                                     |                     | occur upon arrival to the program.  |
|                                     |                     |   |
| Rule                                | Status              | Documenting Statement(s), If applicable                                       |
| Rule: 5101:2-12-13 Smoke Free       | Compliant           | Documenting Statement: A notice was   |
| Environment                         |                     | observed posted stating that smoking is                                       |
|                                     |                     | prohibited at the program.  |
|                                     |                     |   |
|                                     |                     |   |
| Rule                                | Status              | Documenting Statement(s), If applicable                                       |
| Rule: 5101:2-12-15 Medical/Physical | Compliant           | Documenting Statement: At the time of   |
| Care Plans                          |                     | the inspection, there were no children  |
|                                     |                     | currently enrolled who had health   |
|                                     |                     | conditions.   |
|                                     |                     |   |
| Pulo                                | Ctatus              | Documenting Statement(s) If anylinghis  |
| Rule: 5101:2-12-16 Medical, Dental, | Status<br>Compliant | Documenting Statement(s), If applicable  Documenting Statement: On the day of |
| and General Emergency Plan          | Compilant           | the inspection, the complete prescribed                                       |
| and General Efficigeticy Platf      |                     | JFS 01242 "Medical, Dental, and General                                       |
|                                     |                     | Emergency Plan For Child Care" were   |
|                                     |                     | posted in the program as required.  |
|                                     |                     | posted in the program as required.  |
|                                     |                     | <u> </u>  |
|                                     |                     |   |

| 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.  |
|                                       |           | daming and moreoverin  |
|                                       | _         |  |
| 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.                          |
|                                       |           |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable                        |
| Rule: 5101:2-12-16 Management of      | Compliant | Documenting Statement: The JFS 08087                           |
| Communicable Disease                  | Joniphane | "Communicable Disease Chart" was                               |
| - Communicable Discuse                |           | posted and was readily available to staff                      |
|                                       |           | and parents.   |
|                                       |           | and parents.   |
|                                       |           |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable                        |
| Rule: 5101:2-12-16 Incident/Injury    | Compliant | Documenting Statement: The                                     |
| Reporting                             |           | requirements for completing JFS 01299                          |
|                                       |           | "Incident/Injury Report For Child Care"                        |
|                                       |           | reports were discussed during the                              |
|                                       |           | inspection.  |
|                                       |           |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable                        |
| Rule: 5101:2-12-16 Written Disaster   | Compliant | Documenting Statement: Annual training                         |
| Plan                                  | Compilant | of the written disaster plan was                               |
| T Idil                                |           | completed by staff.  |
|                                       |           | completed by start.  |
|                                       |           |  |
| 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 5 school age                         |
|                                       |           | categories.  |
|                                       |           |  |
| Dulo                                  | Ctatus    | Decumenting Statements \ If \ \ If \ \ \ If \ \ \ \ If \ \ \ \ |
| Rule: F101:2-12-19 License Canacity   | Status    | Documenting Statement(s), If applicable                        |
| Rule: 5101:2-12-18 License Capacity   | Compliant | Documenting Statement: The program                             |
|                                       |           | was operating within their license                             |
|                                       |           | capacity limits.   |

| 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<br>Records                               | Compliant           | Documenting Statement: Child Care Staff 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: 5101:2-12-19 Child Guidance                                      | Status<br>Compliant | Documenting Statement(s), If applicable  Documenting Statement: Appropriate child guidance techniques and practices were observed being used during the inspection. |
|  |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-25 Medication<br>Administration                        | Compliant           | Documenting Statement: There were no children on medication at the time of the inspection.  |
|  | T -                 |   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-08 Child Care Staff<br>Member Educational Requirements | Compliant           | Documenting Statement: All Child Care Staff Members had verification of educational requirements on file at the program.  |