

## **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            | ils             |       |                   |
|-----------------------------------|-------------------------|-----------------|-------|-------------------|
| Program Name                      | Program Number          |                 | Progr | am Type           |
| CHRIST CHURCH COMMUNITY PRESCHOOL | 000000102189            |                 | Child | Care Center       |
|                                   |                         |                 |       |                   |
| Address                           | <del>22</del>           |                 | Count | ty                |
| 301 N MAIN ST ORRVILLE            |                         |                 | WAYN  | NE                |
| ОН                                |                         |                 |       |                   |
| 44667                             |                         |                 |       |                   |
|                                   |                         |                 | 0,    |                   |
| Building Approval Date            | Use Group/Code          | Occupancy Limit | N     | Maximum Under 2 ½ |
| 07/18/2022                        | E                       | 40              | N     | NONE              |
| Fire Inspection Approval Date     | Food Service Risk Level |                 |       |                   |
| 07/31/2025                        | Exempt                  |                 |       |                   |

| Inspection Information |                                |                  |                   |              |
|------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type        | Inspection S                   | cope             | Inspection Notice |              |
| Annual                 | Full                           |                  | Unannounced       |              |
| Inspection Date        | Begin Time                     |                  | End Time          |              |
| 09/11/2025             | 10:40 AM                       |                  | 12:00 PM          |              |
| Reviewer:              | Reviewer:                      |                  |                   |              |
| MATTHEW PIGNA          | MATTHEW PIGNATO                |                  |                   |              |
|                        | Summary of Findings            |                  |                   |              |
| No. Rules Verified     | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58                     | 2                              | 0                | 0                 | 2            |

| 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          | 14        | 14    |
| School Age  |                  | 0          | 0         | 0     |
| Total Capacity/Enrollment                                 | 20               | 0          | 14        | 14    |

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



| Preschool | 3 years to < 4 years | 2 to 10 | 1st |
|-----------|----------------------|---------|-----|
| Preschool | 3 years to < 4 years | 2 to 10 | 2nd |

## **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 5180:2-12-03 and 5180:2-13-03 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 Pick Non Compliances  |
| Low Risk Non-Compliances  |



Domain: 05 Health & Safety

Rule: 5180:2-12-16 Emergency Drills

Code: 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 2 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: 10/11/2025

## Domain: 09 Children's Files

Rule: 5180:2-12-15 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 number 10 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. |  |
|---|--|
|   |  |

## Rules In-Compliance/Not Verified

| Rule  | Status    | Documenting Statement(s), If applicable |
|---|-----------|---|
| 5180:2-12-16 Written Disaster Plan          | Compliant |   |
|   |           |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-02 License Posted                 | Compliant |   |
|   |           |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-04 Building Department Inspection | Compliant |   |
|   |           |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-02 Current Information            | Compliant |   |
|   |           |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-03 Inspection                     | Compliant |   |
| Requirements                                |           |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-04 Fire Inspection          | Compliant | Documenting Statement: Please Note:     |
| Nule: 5100.2-12-04 The hispection           | Compliant | Documentation of a fire inspection      |
|   |           | without any uncorrected violations must |
|   |           | be secured for the program. Secure a    |
|   |           | new fire inspection by 7/31/26.         |
|   |           | new me inspection by 7/31/20.           |
| Rule: 5180:2-12-04 Fire Inspection          | Compliant | Documenting Statement: Although the     |
|   |           | program had documentation of a current  |
|   |           | fire inspection without any uncorrected |



|  |                     | violations at the time of the licensing inspection, the program did not have the fire inspection completed within 12 months from the date of the last fire inspection without any uncorrected violations. Please ensure that fire inspections are completed in accordance with the rule requirements. |
|--|---------------------|---|
| Rule   | Status              | Documenting Statement(s), If applicable   |
| 5180:2-12-04 Food Service<br>Requirements                          | Compliant           | ,   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| 5180:2-12-07 Administrator<br>Qualifications                       | Compliant           |   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| 5180:2-12-07 Administrator<br>Responsibilities/Requirements        | Compliant           | Boodmenting statement(3), it approaches   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| 5180:2-12-07 Written Program<br>Policies and Procedures            | Compliant           |   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| 5180:2-12-08 Medical Statement                                     | Compliant           |   |
|  |                     |   |
| Rule 5180:2-12-08 Child Care Staff Member Educational Requirements | Status<br>Compliant | Documenting Statement(s), If applicable   |
|  | I -                 |   |
| Rule 5180:2-12-08 Orientation Training & Whistle Blower Protection | Status<br>Compliant | Documenting Statement(s), If applicable   |
| Rule   | Status              | Documenting Statement(c) If applicable  |
| Rule: 5180:2-12-09 Background Check<br>Requirements                | Compliant           | Documenting Statement(s), If applicable  Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed.   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| 5180:2-12-10 Health Training                                       | Compliant           | Documenting Statement(3), it applicable   |
| Requirements   |                     |   |



| Rule                                  | Status     | Documenting Statement(s), If applicable |
|---------------------------------------|------------|---|
| 5180:2-12-10 Professional             | Compliant  | bocumenting statement(s), if applicable |
| Development Requirements              | Compliant  |   |
| Development nequilements              |            |   |
| Rule                                  | Status     | Documenting Statement(s), If applicable |
| 5180:2-12-11 Indoor Space             | Compliant  | bocumenting statement(3), it applicable |
| Requirements                          | Compilant  |   |
| requirements                          | L          |   |
| Rule                                  | Status     | Documenting Statement(s), If applicable |
| 5180:2-12-11 Outdoor Space            | Compliant  | booding statement(s), it approase       |
| Requirements                          |            |   |
|                                       |            |   |
| Rule                                  | Status     | Documenting Statement(s), If applicable |
| 5180:2-12-12 Safe Equipment           | Compliant  | 0 (7)                                   |
|                                       | '          |   |
|                                       | 2          |   |
| Rule                                  | Status     | Documenting Statement(s), If applicable |
| 5180:2-12-11 Outdoor Play Equipment   | Compliant  |   |
|                                       |            |   |
|                                       |            |   |
| Rule                                  | Status     | Documenting Statement(s), If applicable |
| 5180:2-12-11 Outdoor Play Fall Zones  | Compliant  |   |
|                                       |            |   |
| Rule                                  | Status     | Documenting Statement(s), If applicable |
| 5180:2-12-12 Safe Environment         | Compliant  | bocumenting statement(s), if applicable |
| 3180.2-12-12 Sale Lilviloninent       | Compliant  |   |
|                                       | 1          |   |
| Rule                                  | Status     | Documenting Statement(s), If applicable |
| 5180:2-12-13 Sanitary Equipment and   | Compliant  |   |
| Environment                           |            |   |
|                                       |            |   |
| Rule                                  | Status     | Documenting Statement(s), If applicable |
| 5180:2-12-13 Handwashing              | Compliant  |   |
| Requirements                          | *          |   |
|                                       |            |   |
| Rule                                  | Status     | Documenting Statement(s), If applicable |
| 5180:2-12-13 Smoke Free               | Compliant  |   |
| Environment                           |            |   |
|                                       |            |   |
| Rule                                  | Status     | Documenting Statement(s), If applicable |
| 5180:2-12-14 Transportation and Field | Compliant  |   |
| Trip Procedures                       |            |   |
|                                       |            |   |
| Rule                                  | Status     | Documenting Statement(s), If applicable |
| 5180:2-12-15 Medical/Physical Care    | Compliant  |   |
| Plans                                 |            |   |
|                                       | CANAL INC. |   |
| Rule                                  | Status     | Documenting Statement(s), If applicable |



| ~~                                | 48        |  |
|-----------------------------------|-----------|--|
| 5180:2-12-16 Medical, Dental, and | Compliant |  |
| General Emergency Plan            |           |  |
|                                   | <u> </u>  |  |
| D. I.                             | Ct. t.    | D  |
| Rule                              | Status    | Documenting Statement(s), If applicable  |
| 5180:2-12-16 First Aid/Standard   | Compliant |  |
| Precautions                       |           |  |
| *                                 |           | · · · · · · · · · · · · · · · · · · ·  |
| Rule                              | Status    | Documenting Statement(s), If applicable  |
| 5180:2-12-16 Management of        | Compliant | Bodamenting statement(s), it applicable  |
| <del></del>                       | Compliant |  |
| Communicable Disease              |           |  |
|                                   |           |  |
| Rule                              | Status    | Documenting Statement(s), If applicable  |
| 5180:2-12-16 Incident/Injury      | Compliant |  |
| Reporting                         | ,         |  |
| Перетень                          | <u> </u>  |  |
| Dula                              | Chatus    | Description of the control of the latest terms |
| Rule                              | Status    | Documenting Statement(s), If applicable  |
| 5180:2-12-17 Materials and        | Compliant |  |
| Equipment                         |           |  |
|                                   |           |  |
| Rule                              | Status    | Documenting Statement(s), If applicable  |
| 5180:2-12-17 Daily Schedule       | Compliant | Booking statement(s), it approase  |
| 3180.2-12-17 Daily Schedule       | Compilant |  |
|                                   |           |  |
|                                   | i:        |  |
| Rule                              | Status    | Documenting Statement(s), If applicable  |
| 5180:2-12-18 Attendance Records   | Compliant |  |
|                                   |           |  |
|                                   |           |  |
| Rule                              | Status    | Documenting Statement(s), If applicable  |
| 5180:2-12-18 Group Size           | Compliant | Becamenang statement(s), in approache  |
| 5180.2-12-18 Gloup Size           | Compliant |  |
| L                                 | l.        |  |
|                                   |           |  |
| Rule                              | Status    | Documenting Statement(s), If applicable  |
| 5180:2-12-17 Daily Outdoor Play   | Compliant |  |
|                                   |           |  |
|                                   |           |  |
| Rule                              | Status    | Documenting Statement(s), If applicable  |
| 5180:2-12-18 License Capacity     | Compliant |  |
| 5100.2 12 10 Licelise capacity    | Compilant |  |
|                                   |           |  |
|                                   |           |  |
| Rule                              | Status    | Documenting Statement(s), If applicable  |
| Rule: 5180:2-12-18 Ratio          | Compliant | Documenting Statement: Staff/child   |
|                                   |           | ratios observed during the inspection  |
|                                   |           | were in compliance.  |
|                                   |           |  |
|                                   | -         |  |
| Dula                              | Chabus    | Decuments - Chatanants - II II   |
| Rule                              | Status    | Documenting Statement(s), If applicable  |
| 5180:2-12-19 Supervision          | Compliant |  |
| L                                 |           |  |
|                                   |           |  |
| Rule                              | Status    | Documenting Statement(s), If applicable  |
|                                   |           |  |



|                                      |           | 20-                                     |
|--------------------------------------|-----------|---|
| 5180:2-12-19 Child Guidance          | Compliant |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-22 Meal and Snack          | Compliant |   |
| Requirements                         |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-22 Safe Food               | Compliant |   |
| Handling/Storage                     |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-22 Fluid Milk Requirements | Compliant |   |
|                                      |           |   |
|                                      |           | _                                       |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-25 Medication              | Compliant |   |
| Administration                       |           |   |
|                                      |           |   |
|                                      |           |   |