

# **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 Details			
Program Name	Program Number		Program Type
LITTLE SPROUTS CHILD DEVELOPMENT	000000102636		Child Care Center
Address 310 Lincoln Way East Massillon OH 44646			County STARK
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Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
12/02/2022	E	68	28
Fire Inspection Approval Date	Food Service Risk Level		
12/01/2022	Level III		

Inspection Information					
Inspection Type	Inspection So	оре	Inspection Notice		
Annual	Full		Unannounced		
Inspection Date 01/26/2023	Begin Time 1	1:20 AM	End Time 1:08 PM		
Reviewer:					
MICHELE FAKAN					
	Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk	
58	3	0	2	1	

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)		3	0	3
Young Toddler		6	0	6
Total Under 2 ½ Years	28	9	0	9
Older Toddler		8	0	8
Preschool		33	0	33
School Age		0	17	17
Total Capacity/Enrollment	68	41	17	67

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

Infant	0 to < 12 months	1 to 2	
Infant	0 to < 12 months	1 to 2	nap
Toddler 1	12 months to < 18 months	1 to 5	lunch
Toddler 1	18 months to < 30 months	1 to 5	nap
Toddler 2	30 months to < 36 months	1 to 5	lunch
Toddler 2	30 months to < 36 months	1 to 5	nap
Preschool	3 years to < 4 years	2 to 11	lunch
Preschool	3 years to < 4 years	2 to 11	nap
pre-k	4 years to < 5 years	1 to 12	lunch
pre-k	4 years to < 5 years	1 to 12	nap

# **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**

Domain: 09 Children's Files

Rule: 5101:2-12-25 Medication Administration

<u>Code</u>: The program is required to use the appropriate form and retain current documentation to administer medications. The program is also required to obtain separate documentation for each medication and child, and retain on file each JFS 01217 "Request for Administration of Medication for Child Care" for at least one year. The program is required to administer medication only if it has the prescription label attached or has written instructions from a licensed physician. The program is also required to have each medication to be administered stored in its original container.

<u>Finding</u>: During the inspection, it was determined the program did not meet the requirement(s) for administering a medication or medical food that is not required by a JFS 01236 "Child Medical/Physical Care Plan for Child Care" or a prescription topical product to a child as noted in numbers 11,13, and 14 below:

- 1. No JFS 01217 "Request for Administration of Medication for Child Care" was on file.
- 2. The child's name was missing on the JFS 01217.
- 3. The child's date of birth was missing on the JFS 01217 and was needed to determine the correct dosage.
- 4. The child's weight was missing on the JFS 01217 and was needed to determine the correct dosage.
- 5. The name of the medication was missing on the JFS 01217.
- 6. The exact dose was missing on the JFS 01217.
- 7. The time to administer was missing on the JFS 01217.
- 8. The time period to administer was missing on the JFS 01217.
- 9. The medication's expiration date was missing on the JFS 01217.
- 10. The Parent/Guardian's dated signature was missing on the JFS 01217.
- 11. Physician instructions were missing on the JFS 01217.
- 12. Possible side effects were missing on the JFS 01217.
- 13. Physician's dated signature was missing on the JFS 01217.
- 14. Physician's phone number was missing on the JFS 01217.
- 15. Date medication was administered was missing on the JFS 01217.
- 16. Time medication was administered was missing on the JFS 01217.
- 17. Dosage administered was missing on the JFS 01217.
- 18. Staff member's signature was missing on the JFS 01217.
- 19. A prescription label was not attached to the prescription medication.
- 20. The medication or product, [ ], was not brought to the program in its original container.
- 21. Parent instructions conflict with either the manufacturer or physician instructions.

Submit the program's corrective action plan, which includes the completed JFS 01217 for each child needed, verification that the prescription label is now attached, and/or verification that the medication or product is now in its original container, and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/25/2023

### Domain: 09 Children's Files

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

<u>Code</u>: The program is required to have a completed JFS 01236 "Child Medical/Physical Care Plan for Child Care" 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 for a child with a health condition.

<u>Finding</u>: A written, signed and dated JFS 01236 "Child Medical/Physical Care Plan for Child Care" must be on file for any child having health conditions which require monitoring for symptoms, or a medical procedure be performed, or ongoing administration of medication or medical foods 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 1 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. Indication if medication is required was missing.
- 6. Symptoms to watch for were missing.
- 7. Directions for when should the medication or medical food be administered were missing.
- 8. Instructions for administration were missing.
- 9. Conditions that trigger the need for medication or medical foods were missing.
- 10. Expected results of the medication or medical food were missing.
- 11. Actions to be taken if the symptoms do not subside were missing.
- 12. Activities, foods, environmental conditions to avoid were missing.
- 13. Training instructions were missing.
- 14. Directions for action to be taken if expected result of medication or medical food does not occur were missing.
- 15. Instructions regarding emergency evacuation, if applicable, were missing.
- 16. Dated signature of parent was missing.
- 17. Dated signature of certified professional who trained the program staff was missing, if parent was not the trainer.
- 18. Printed name(s)/Dated signature(s) of child care staff member(s) trained to perform the procedure were missing.
- 19. Dated signature(s) of administrator was missing.
- 20. Name of any applicable medication was missing.
- 21. Date medication was administered was missing.
- 22. Time medication was administered was missing.
- 23. Dosage administered was missing.
- 24. Signature of staff member who administered the medication was missing.
- 25. 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.
- 26. The plan was not implemented.
- 27. The plan was not able to be implemented due to conflicting information.
- 28. The plan was not followed.

Submit the program's corrective action plan, which includes a copy of the completed JFS 01236, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/25/2023

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

**Domain: 08 Staff Files** 

Rule: 5101:2-12-08 Medical Statement

<u>Code</u>: 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 3b and 3c.

- 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: 02/25/2023

## **Rules In-Compliance/Not Verified**

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 Current Information	Compliant	
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-03 Inspection	Compliant	0 (" 11
Requirements		
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Building Department	Compliant	
Inspection	- Compilant	
mspection		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Fire Inspection	Compliant	Documenting Statement: Please Note:
Rule: 3101.2-12-04 Fire Inspection	Compliant	Documentation of a fire inspection
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		without any uncorrected violations must be secured for the program. Secure a
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		new fire inspection by 12/1/2023.
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Food Service	Compliant	
Requirements		
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	
Qualifications		
	1	
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
5101:2-12-08 Child Care Staff Member	Compliant	
Educational Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Orientation Training &	Compliant	
Whistle Blower Protection	·	
<u> </u>	1	1
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-09 Background Check	Compliant	2000
Requirements	23	
Requirements	1	

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	
Development Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Separation of Children	Compliant	
Under 2 1/2 Years		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Space	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Equipment	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Fall Zones	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Equipment	Compliant	became tring statement(s), it applicable
JIJI.Z IZ IZ Jaie Equipment	Compilation	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Environment	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Sanitary Equipment and	Compliant	
Environment		
Rule	Status	Documenting Statement(s), If applicable

5101:2-12-13 Handwashing	Compliant	
Requirements		
Rule	Status	Documenting Statement(e) If applicable
5101:2-12-13 Smoke Free	Status Compliant	Documenting Statement(s), If applicable
Environment	Compliant	
LIMIOIIIICIL		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Child Medical and	Compliant	
Enrollment Records		
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Rule 5101:2-12-16 Medical, Dental, and	Status Compliant	Documenting Statement(s), If applicable
General Emergency Plan	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Emergency Drills	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard	Compliant	Documenting Statement(s), if applicable
Precautions	Compliant	
1 Tedations		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of	Compliant	
Communicable Disease		
		0 1 0 1 1 1 1
Rule 5101:2-12-16 Incident/Injury	Status Compliant	Documenting Statement(s), If applicable
Reporting	Compliant	
Reporting		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Written Disaster Plan	Compliant	
Dulo	Ctatus	Decumenting State or aut (a) If a unit call.
Rule 5101:2-12-17 Daily Schedule	Status Compliant	Documenting Statement(s), If applicable
JIOI.2 12 17 Daily Schedule	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Materials and	Compliant	
Equipment		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Status Compliant	Documenting Statement(s), If applicable
STOTIZ IZ I7 Daily Outdoor Flay	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	

Designating:		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Ratio	Compliant	<u> </u>
310112 12 10 Natio	Compilant	
Rule	Status	Documenting Statement(s) If applicable
		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	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Supervision	Compliant	, , , , , , ,
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Rule	Ctatus	Decumenting Statement(s) If applicable
	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cots and Napping	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cribs	Compliant	
3101.2 12 20 CHb3	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
Rule 5101:2-12-22 Meal and Snack	Status Compliant	Documenting Statement(s), If applicable
Rule	0.00.00	Documenting Statement(s), If applicable
Rule 5101:2-12-22 Meal and Snack	0.00.00	Documenting Statement(s), If applicable
Rule 5101:2-12-22 Meal and Snack	0.00.00	
Rule 5101:2-12-22 Meal and Snack Requirements Rule	Compliant	Documenting Statement(s), If applicable  Documenting Statement(s), If applicable
Rule 5101:2-12-22 Meal and Snack Requirements	Compliant	
Rule 5101:2-12-22 Meal and Snack Requirements Rule	Compliant	
Rule 5101:2-12-22 Meal and Snack Requirements  Rule 5101:2-12-22 Fluid Milk Requirements	Compliant  Status  Compliant	Documenting Statement(s), If applicable
Rule 5101:2-12-22 Meal and Snack Requirements  Rule 5101:2-12-22 Fluid Milk Requirements  Rule	Status Compliant Status Status	
Rule 5101:2-12-22 Meal and Snack Requirements  Rule 5101:2-12-22 Fluid Milk Requirements  Rule 5101:2-12-22 Safe Food	Compliant  Status  Compliant	Documenting Statement(s), If applicable
Rule 5101:2-12-22 Meal and Snack Requirements  Rule 5101:2-12-22 Fluid Milk Requirements  Rule	Status Compliant Status Status	Documenting Statement(s), If applicable
Rule 5101:2-12-22 Meal and Snack Requirements  Rule 5101:2-12-22 Fluid Milk Requirements  Rule 5101:2-12-22 Safe Food	Status Compliant Status Status	Documenting Statement(s), If applicable
Rule 5101:2-12-22 Meal and Snack Requirements  Rule 5101:2-12-22 Fluid Milk Requirements  Rule 5101:2-12-22 Safe Food	Status Compliant Status Status	Documenting Statement(s), If applicable
Rule 5101:2-12-22 Meal and Snack Requirements  Rule 5101:2-12-22 Fluid Milk Requirements  Rule 5101:2-12-22 Safe Food Handling/Storage	Status Compliant  Status Compliant  Status Compliant  Status Status	Documenting Statement(s), If applicable  Documenting Statement(s), If applicable
Rule 5101:2-12-22 Meal and Snack Requirements  Rule 5101:2-12-22 Fluid Milk Requirements  Rule 5101:2-12-22 Safe Food Handling/Storage	Status Compliant  Status Compliant  Status Compliant	Documenting Statement(s), If applicable  Documenting Statement(s), If applicable
Rule 5101:2-12-22 Meal and Snack Requirements  Rule 5101:2-12-22 Fluid Milk Requirements  Rule 5101:2-12-22 Safe Food Handling/Storage	Status Compliant  Status Compliant  Status Compliant  Status Status	Documenting Statement(s), If applicable  Documenting Statement(s), If applicable
Rule 5101:2-12-22 Meal and Snack Requirements  Rule 5101:2-12-22 Fluid Milk Requirements  Rule 5101:2-12-22 Safe Food Handling/Storage  Rule 5101:2-12-23 Infant Daily Care	Status Compliant  Status Compliant  Status Compliant  Status Compliant	Documenting Statement(s), If applicable  Documenting Statement(s), If applicable  Documenting Statement(s), If applicable
Rule 5101:2-12-22 Meal and Snack Requirements  Rule 5101:2-12-22 Fluid Milk Requirements  Rule 5101:2-12-22 Safe Food Handling/Storage  Rule 5101:2-12-23 Infant Daily Care	Status Compliant  Status Compliant  Status Compliant  Status Compliant  Status Status Compliant	Documenting Statement(s), If applicable  Documenting Statement(s), If applicable
Rule 5101:2-12-22 Meal and Snack Requirements  Rule 5101:2-12-22 Fluid Milk Requirements  Rule 5101:2-12-22 Safe Food Handling/Storage  Rule 5101:2-12-23 Infant Daily Care  Rule 5101:2-12-23 Infant Bottle and Food	Status Compliant  Status Compliant  Status Compliant  Status Compliant	Documenting Statement(s), If applicable  Documenting Statement(s), If applicable  Documenting Statement(s), If applicable
Rule 5101:2-12-22 Meal and Snack Requirements  Rule 5101:2-12-22 Fluid Milk Requirements  Rule 5101:2-12-22 Safe Food Handling/Storage  Rule 5101:2-12-23 Infant Daily Care	Status Compliant  Status Compliant  Status Compliant  Status Compliant  Status Status Compliant	Documenting Statement(s), If applicable  Documenting Statement(s), If applicable  Documenting Statement(s), If applicable



	Rule	Status	Documenting Statement(s), If applicable
	5101:2-12-23 Diapering and Toilet	Compliant	
	Training		
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