

# **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		Program Type
ST JOHN'S PRE-KINDERGARTEN SCHOOL	000000105380		Child Care Center
Address	26.1		County
409 N WOOSTER AVENUE DOVER			TUSCARAWAS
ОН			
44622			
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
01/16/2001	E	50	0
Fire Inspection Approval Date	Food Service Risk Level		
08/12/2024	Exempt		

Inspection Information					
Inspection Type	Inspection S	Inspection Scope			
Annual	Full		Unannounced		
Inspection Date	Begin Time		End Time		
10/01/2024	9:38 AM	9:38 AM		1:49 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	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		105	0	105
School Age		0	0	0
Total Capacity/Enrollment	75	105	0	105

S	taff-Child Ratios at the Time of Ins	pection	
Group	Age Group/Range	Ratio Observed	Comment

4/5 preschool am MTW	4 years to < 5 years	2 to 17	
5 year old M-F	5 years to < Kindergarten	2 to 12	
4/5 preschool am MTW	4 years to < 5 years	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
No Serious Kisk Non-Compliances were observed during this hispection

#### Moderate Risk Non-Compliances

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 and must implement and/or follow instructions on the plan. The program is required to have staff trained to perform the procedures on the JFS 01236 "Child Medical/Physical Care Plan for Child Care" present at the program when the child requiring the procedure is onsite. Only staff who have been trained shall be permitted to perform the procedures listed on the JFS 01236.

<u>Finding</u>: In review of the children's records, it was determined the program did not meet the requirements for caring for at least one child, indicated on the Children Records Review, with a condition that requires a JFS 01236 "Child Medical/Physical Care Plan" as noted in numbers 32, 33, and 45 below:

1. No plan was on file.

(Page 1)

- 2. Child's name was missing.
- 3. Name of the condition was missing.
- 4. Indication if medication or medical food is required was missing.
- 5. Signs, symptoms or situations that require staff to take action were missing.

- 6. Activities, foods, environmental conditions to avoid were missing.
- 7. Training instructions for procedures for staff to follow were missing or incomplete.

#### (Page 2)

- 8. Child's name was missing or not attached.
- 9. Child's date of birth was missing or not attached.
- 10. Child's weight was missing or not attached.
- 11. Name of the medication/medical food was missing or not attached.
- 12. Dosage of medication/medical food to be administered was missing or not attached.
- 13. Time for medication/medical food to be administered was missing or not attached.
- 14. Expiration date for medication/medical food was missing or not attached.
- 15. Symptoms that require staff to administer medication/medical food were missing or not attached.
- 16. Specific instructions to administer the medication/medical food were missing or not attached.
- 17. Actions to be taken if the symptoms do not subside were missing or not attached.
- 18. Physician's signature was missing or not attached.
- 19. The date of the physician's signature was missing or not attached.

#### (Page 3)

- 20. Child's name was missing.
- 21. Instructions regarding emergency evacuation, if applicable, were missing.
- 22. Signature of parent granting permission to implement the plan and verifying training was missing.
- 23. Date of parent signature was missing.
- 24. Certified Professional Trainer information was missing.
- 25. Signature of certified professional who trained the program staff was missing, if parent was not the trainer.
- 26. Date of trainer signature was missing.
- 27. Printed name(s)of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
- 28. Signature(s) of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
- 29. Date of staff signature was missing.
- 30. Administrator/Provider signature was missing
- 31. Date of administrator/Provider was missing.

#### (Page 4)

- 32. Child's name was missing.
- 33. Name of medication or medical food was missing.
- 34. Date the medication/medical food was administered was missing.
- 35. Time medication/medical food was administered was missing.
- 36. Dosage of medication/medical food that was administered was missing.
- 37. Signature of person administering medication/medical food was missing.
- 38. The plan was not followed or implemented.
- 39. The plan was not able to be implemented due to conflicting information.
- 40. None of the child care staff members trained in the procedures on the JFS 01236 were onsite when a child requiring the plan was present.
- 41. Child care staff members trained in the procedures on the JFS 01236 were not scheduled to be present the entire the time the child requiring the plan was onsite.
- 42. None of the child care staff members trained in the procedures on the JFS 01236 accompanied the child requiring the plan during a trip.
- 43. A child care staff member who had not been trained in the procedures on the JFS 01236 performed the procedure.



- 44. 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.
- 45. No second page 4 for second medication to be administered.

Provide staff training. 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: 10/31/2024

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

Domain: 00 License & Approvals

Rule: 5101:2-12-02 Current Information

Code: The rule requires the program to keep their information current in OCLQS.

<u>Finding</u>: During the inspection, it was determined the information in number 7 below was not up to date in the Ohio Child Licensing and Quality System (OCLQS):

- 1. Mailing address
- 2. Telephone number
- 3. Email address
- 4. Days and hours of operation
- 5. Services offered
- 6. Name of program
- 7. Private pay rates

Technical assistance was provided, and as discussed, log on to OCLQS and update the information, as required.

Corrective Action Plan Due: 10/31/2024

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, 6, 10, and 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 required at this time.

Corrective Action Plan Due: 10/31/2024

## Domain: 09 Children's Files

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

<u>Code</u>: The program is required to have a completed medical on file at the program for each child enrolled.

<u>Finding</u>: In review of 25% of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in number 2 below:

- 1. No medical was on file for at least one child
- 2. Medical(s) on file was not updated every 13 months
- 3. Medical(s) were missing child's name and date of birth
- 4. Medical(s) were missing the date of the medical examination
- 5. The date of the exam was more than 13 months prior to the date the form was signed.

- 6. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care
- 7. Medical(s) were missing the signature, business address and telephone number of the physician, physician's assistant(PA), advance practice nurse (APN) or certified nurse practitioner (CNP) who examined the child
- 8. Medical(s) were missing a record of immunizations the child has had specifying month, day and year
- 9. Medical(s) were missing a statement from the physician, PA, APN, or CNP that the child has been immunized or is in the process of being immunized against the diseases

required by division 5104.014 of the Revised Code and found in appendix A to this rule

10. Medical(s) were missing a statement from the child's parent or guardian that he or she has declined to have the child immunized against the disease for reasons of conscience, including religious convictions

11. Other [ ]

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

Corrective Action Plan Due: 10/31/2024

## 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
5101:2-12-03 Inspection	Compliant	
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 8/12/2025.
Rule	Status	Documenting Statement(s), If applicable
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.
Della	Charles	Decrease the Chateman (A) If a call a late
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	
Qualifications		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	
Responsibilities/Requirements		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-07 Written Program	Compliant	Documenting Statement(s), if applicable  Documenting Statement: The written
Policies and Procedures	Compliant	policies and procedures reviewed on the
Policies and Procedures		day of the inspection were verified as
		With the second
		complete.
	7	
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.	
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.
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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	Johnstone	had at least one Child Care Staff Member
Requirements		with currently valid training in First Aid,
		Management of Communicable Disease,
	<u> </u>	ivianagement of communicable bisease,



		CPR, and Child Abuse Prevention present and readily accessible during all hours of operation.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-10 Professional Development Requirements	Compliant	Documenting Statement: At the time of the inspection, all child care staff members had completed the required amount of professional development training.
Rule	Status	Decumenting Statement(e) If applicable
(200 (200 (200 )		Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space Requirements	Compliant	
Nequilements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Equipment	Compliant	3 (7)
Rule	Chahua	Decree antime Chatana anticol If a multipolar
5101:2-12-12 Safe Environment	Status	Documenting Statement(s), If applicable
5101:2-12-12 Sale Environment	Compliant	
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	Documenting Statement(3), if applicable
Requirements	Compilant	
	I.	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free	Compliant	
Environment		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-14 Transportation and	Compliant	Documenting Statement: The program
Field Trip Procedures	Compnant	uses the ODJFS sample trip permission
Tield Tip Frocedures		form for field trips to secure written
		permission from parents or guardians.
		parameter of Badi didilor
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Medical, Dental, and	Compliant	
General Emergency Plan		
Rule	Status	Documenting Statement(s), If applicable
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F404 2 42 46 F	C	
5101:2-12-16 Emergency Drills	Compliant	
	<u> </u>	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard	Compliant	Bootimenting statement(s), it approaches
Precautions	Compilant	
Trecautions		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of	Compliant	bocumenting statement(s), it applicable
Communicable Disease	Compliant	
Communicable Disease		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury	Compliant	bocumenting statement(s), it applicable
180 - 191	Compliant	
Reporting		
Dule	Chatus	Decumenting Statement / A If and lack
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Schedule	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Materials and	Compliant	bocumenting statement(s), it applicable
Control Control Section (Control Control Contr	Compliant	
Equipment		
Rule	Chatus	Desumenting Statement/s) If applicable
2016/2016/20	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	
	5	<u>l</u>
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Ratio	Compliant	Documenting Statement: The Appendix A
Naic. 5101.2 12 10 Natio	Compilant	"Staff/Child Ratios, Age Grouping and
		Maximum Group Size" was posted in a
		noticeable area at the program as
		required.
		required.
1	<u> </u>	<u> </u>
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Group Size	Compliant	Documenting Statement(s), if applicable
2101.2-12-10 group size	Compilant	
Ī		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Attendance Records	Compliant	bocamenting statement(3), it applicable
5101.2 12 10 Attendance necolds	Compilant	
	I:	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Supervision	Compliant	2 common grant of the same
STOTIL TE TO SUPERVISION	Compliant	
	1	1
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	0
	- John State	

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Status	Documenting Statement(s), If applicable
Compliant	
Status	Documenting Statement(s), If applicable
Compliant	
T 3	
- Ctutus	Documenting Statement(s), If applicable
Compliant	
T	
Status	Documenting Statement(s), If applicable
Compliant	
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Chal	D
	Documenting Statement(s), If applicable  Documenting Statement: All Child Care
Compliant	Staff Members had verification of
	educational requirements on file at the
	program.
l.	
Status	Documenting Statement(s), If applicable
	Documenting Statement: Annual training
	of the written disaster plan was
	completed by staff.
	completed by staff.
Compliant	completed by staff.  Documenting Statement: The program's
Compliant	· · ·
Compliant	Documenting Statement: The program's
	Compliant  Status Compliant  Status Compliant