

## **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		Pro	gram Type
HOWLAND UNITED METHODIST CHRISTIAN	000000105869		Chil	d Care Center
PRESCHOOL				
Address	46		Cou	nty
730 HOWLAND WILSON RD N.E. WARREN			TRU	IMBULL
ОН				
44484				
			0.	
Building Approval Date	Use Group/Code	Occupancy Limit		Maximum Under 2 ½
	***************************************			
Fire Inspection Approval Date	Food Service Risk Le	evel	3.00	
02/29/2024				

Inspection Information					
Inspection Type	Inspection So	cope	Inspection Notice		
Annual	Full		Unannounced		
Inspection Date	Begin Time		End Time		
11/19/2024	9:00 AM	9:00 AM		11:53 AM	
Reviewer:					
SHELLY WILLIAMS					
Cummany of Findings					
Summary of Findings					
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk	
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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		16	35	51
School Age		0	29	29
Total Capacity/Enrollment	75	16	64	80

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



Room 9 AM/PM	4 years to < 5 years	1 to 12	
Room 9 AM/PM	4 years to < 5 years	1 to 12	
Room 6 AM/PM	3 years to < 4 years	1 to 9	
Room 6 AM/PM	3 years to < 4 years	1 to 9	
Room 8 FD	4 years to < 5 years	1 to 8	
Room 7 FD	4 years to < 5 years	2 to 7	
Room 7 FD	4 years to < 5 years	2 to 7	

## **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
Serious Risk Noti-Compliances
No Serious Risk Non-Compliances were observed during this inspection
The serious hisk from compitances were observed during this hispection
Madayata Diek New Cownliness
Moderate Risk Non-Compliances
No Moderate Risk Non-Compliances were observed during this inspection
The Midderate Mask Non-Compliances were observed during this inspection



## **Low Risk Non-Compliances**

Domain: 09 Children's Files

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

Code: 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(s) 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: 12/19/2024



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	
	3	
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		
		•
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Building	Compliant	Documenting Statement: During the
Department Inspection		inspection, the requirements of the rule
		regarding building approval were
		discussed. Program will take
		documentation to get an updated
		certificate of occupancy. There is a
		discrepancy between paperwork on file
		and licensing approved capacity.
		and neerising approved capacity.
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 2/28/25.
		new me inspection by 2/20/23.
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Food Service	Compliant	Documenting Statement: The program
Requirements	Compliant	has obtained a food service exemption
Requirements		status from the local health department.
		status from the local health department.
Rule: 5101:2-12-04 Food Service	Compliant	Documenting Statement: During the
Requirements	Compliant	inspection, the requirements of the rule
Nequilefficits		regarding food service license or
		exemption were discussed. Program is in
		process of obtaining a level II certificate.
Pule	Ctatus	Decumenting Statement(s) If applicable
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 Qualifications	Compliant	
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: No changes
Policies and Procedures		have been made to the written policies
		and procedures since it was last approved
		by this Department.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Medical Statement	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Orientation Training &	Compliant	
Whistle Blower Protection		
	7	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-09 Background Check	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-10 Health Training	Compliant	0 (" 11
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-10 Professional  Development Requirements	Compliant	
Development Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space	Compliant	
Requirements		
Pule	Status	Decumenting Statement(s) If small-skip
Rule 5101:2-12-11 Separation of Children	Status Compliant	Documenting Statement(s), If applicable
Under 2 1/2 Years	Compilant	
	ı	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Space	Compliant	Documenting Statement: The quarterly
Requirements		
		120 9
		3/30/24.
Rule: 5101:2-12-11 Outdoor Space		



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Equipment	Compliant	bocumenting statement(s), it applicable
3101.2-12-11 Outdoor Flay Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Fall Zones	Compliant	bocumenting statement(s), it approase
3101.2 12 11 Outdoor Flay Fair Zones	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Equipment	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Environment	Compliant	
	1	
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(s), If applicable
5101:2-12-13 Smoke Free	Compliant	booding state ment(s), it approads
Environment	Compilant	
Elivironiment		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-14 Transportation and Field	Compliant	Bocumenting Statement(3), it applicable
Trip Procedures	Compliant	
Trip i locedures		
Dula	Ctatus	Decrimenting Statements   If applicable
Rule F101:2 12 15 Medical/Physical	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Medical/Physical Care Plans	Compliant	Documenting Statement: The program
Care Plans		had current information on the medical
		status and the required treatment plan
		for the children with health conditions.
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D. J.	Chatana	D
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
Rule: 5101:2-12-16 Emergency Drills	Compliant	Documenting Statement: Documentation
		for completed fire, weather, and
		emergency/lockdown drills was verified
		during this inspection.



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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard	Compliant	
Precautions		
	Į.	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of	Compliant	5
Communicable Disease		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury	Compliant	bodinenting statement(s), it approase
Reporting	Compliant	
reporting		
Rule	Status	Documenting Statement/a) If annies his
5101:2-12-17 Daily Schedule		Documenting Statement(s), If applicable
3101:2-12-17 Daily Schedule	Compliant	
	15	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Materials and	Compliant	Documenting Statement(s), it applicable
STATE SHOULD BE STOLEN STATE S	Compliant	
Equipment		
		D
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	
L		
Dula	Chahira	D
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Ratio		Documenting Statement: Staff/child
Kule: 5101:2-12-16 Katio	Compliant	ratios observed during the inspection
		were in compliance.
Dula	Chatus	Decimanting Chatana and A 15
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Group Size	Compliant	
Rule	Status	Decumenting Statement/s) If and isoble
5101:2-12-18 Attendance Records	Status	Documenting Statement(s), If applicable
	Compliant	
	2	
Rule	Status	Documenting Statement/a) If annieship
		Documenting Statement(s), If applicable
5101:2-12-19 Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance		Documenting Statement(s), if applicable
2101:2-12-13 Child Guidance	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cots and Napping	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-22 Safe Food	Compliant	Documenting Statement: Sack lunches
Handling/Storage		were stored with ice packs. Program doe
		not serve meals or snack.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-25 Medication	Compliant	Documenting Statement: The program
Administration		had complete written documentation for
		administering medication or food
		supplements.
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
5101:2-12-16 Written Disaster Plan	Compliant	, , , , , , , , , , , , , , , , , , ,