



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 <http://jfs.ohio.gov/CDC/childcare.stm>. 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 KNOX PRESCHOOL	Program Number 00000200120	Program Type Child Care Center	
Address 3410 MICHIGAN AVE CINCINNATI OH 45208		County HAMILTON	
Building Approval Date 09/08/2001	Use Group/Code E	Occupancy Limit 130	Maximum Under 2 ½ 5
Fire Inspection Approval Date 08/31/2021	Food Service Risk Level Exempt		

Inspection Information		
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 12/08/2021	Begin Time 9:00 AM	End Time 12:45 PM
Reviewer: BRIAN CHASTAIN		

Summary of Findings				
No. Rules Verified 58	No. Rules with Non-compliances 11	No. Serious Risk 0	No. Moderate Risk 1	No. Low Risk 12

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	2	2
Total Under 2 ½ Years	5	0	2	2
Older Toddler		0	11	11
Preschool		8	68	76
School Age		4	8	12
Total Capacity/Enrollment	93	12	87	101

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
102	30 months to < 36 months	2 to 5	



103	3 years to < 4 years	2 to 14	
103	3 years to < 4 years	2 to 7	
104	3 years to < 4 years	2 to 13	
105	3 years to < 4 years	2 to 9	
106	4 years to < 5 years	2 to 15	
108	4 years to < 5 years	2 to 16	
108	4 years to < 5 years	2 to 12	Full time children from 106

Summary of Non-Compliances

If the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited. Ohio Administrative Code 5101: 2-12-03 details the process for submitting a request for a review if a program disagrees with a licensing finding. The request for review must be submitted within seven days from the receipt of the licensing report.

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

Code: 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.

Finding: 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 number 10 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: 01/20/2022

Low Risk Non-Compliances

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to provide an environment that protects the children in care from any items and conditions that may threaten their health, safety, and well-being.

Finding: Children in care shall be protected from any items and conditions which threaten their health, safety, and well-being. During the inspection, it was determined that children were not protected from the following item(s) or condition(s) which may threaten their health, safety, or well-being as noted in number 5 below:

1. Open pull cords that are not closed loop.
2. Telephone cords.



3. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
4. Stacked chairs.
5. Employee(s) purses.
6. Diaper bags.
7. Television not securely anchored.
8. Small or lightweight pieces of shelving units are not securely anchored to the wall.
9. Smoke detector needing batteries replaced.
10. Staff member stepped over a barrier/gate while holding a child.
11. Emergency exits were blocked by the following classroom furniture: [].
12. Other [].

Provide staff training. Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/20/2022

Domain: 03 Postings & Equipment

Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan

Code: The program is required to post and implement the JFS 01242 "Medical, Dental, and General Emergency Plan" when necessary.

Finding: During the inspection, it was determined the requirements for the JFS 01242 Medical, Dental, and General Emergency Plan for Child Care were not followed as noted in number 8 below:

1. The plan was not posted in each classroom.
2. The plan was not posted in other spaces used by children.
3. The name, address and telephone number of the program were not complete.
4. The location of first aid kit, fire extinguishers and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.
5. The telephone number for emergency squad, fire department, hospital, poison control program, public children services agency, local health department, local emergency management agency, and police department were not complete.
6. Location of children's records was not complete.
7. Emergency information including any medications or supplies needed in the event of an evacuation was not complete.
8. The current version of the prescribed form was not used.
9. The plan was not implemented when necessary in that [].

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

Corrective Action Plan Due: 01/20/2022



Domain: 03 Postings & Equipment

Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan

Code: The program is required to post the fire and weather plans.

Finding: During the inspection, it was determined that the following information was not posted for item number 2 below:

1. Fire alert plan, including a diagram indicating evacuation routes.
2. Weather alert plan was missing details from paragraph (H) of the rule.
3. Weather alert plan was missing a diagram indicating evacuation routes.

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

Corrective Action Plan Due: 01/20/2022

Domain: 03 Postings & Equipment

Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan

Code: The program is required to have the JFS 01201 "Dental First Aid" posted in a readily available area at the program.

Finding: During the inspection it was determined that the current JFS 01201 Dental First Aid was not posted in a location readily available to center staff and parents as required. 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.

Domain: 05 Health & Safety

Rule: 5101:2-12-16 Emergency Drills

Code: The program is required to complete fire drills, weather drills, and emergency/lockdown drills appropriately.



Finding: 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: 01/20/2022

Domain: 08 Staff Files

Rule: 5101:2-12-08 Orientation Training & Whistle Blower Protection

Code: The program is required to have staff complete the online staff orientation training.

Finding: In review of the staff records, it was determined that child care staff member(s) had not completed the online orientation training as noted in numbers 1, 3 below:

1. Within 30 days of starting employment at the program as a child care staff member.
2. No documentation of completing the training after December 31, 2016.
3. Completion of the training was not verified in the OPR.

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

Corrective Action Plan Due: 01/20/2022

Domain: 08 Staff Files

Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements

Code: The program staff is required to have educational verification on file at the program.

Finding: In review of the staff records, it was determined that verification of a high school education was not on file for Child Care Staff Member(s) listed on the Employee Record Chart, as required. Submit the program's corrective action plan, which includes a copy of the verification of a high school education, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/20/2022



Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to be completed and on file at the program.

Finding: In review of the staff records, it was determined a completed medical examination statement for the employee(s) listed on the Employee Record Chart was not on file, as required by this rule. Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/20/2022

Domain: 08 Staff Files

Rule: 5101:2-12-07 Administrator Responsibilities/Requirements

Code: The program administrator is required to maintain current employee records in the Ohio Professional Registry.

Finding: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number 5 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: 01/20/2022



Domain: 08 Staff Files

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

Code: 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.

Finding: 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 4 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: 01/20/2022

Domain: 10 Written Policies & Procedures

Rule: 5101:2-12-07 Written Program Policies and Procedures

Code: The program's policies and procedures are required to include all topics outlined in rule.

Finding: During the inspection, it was determined the program's written policies and procedures provided to the parents/guardians and employees was missing item numbers 14, 15, 20 below:

General Information

1. Program name, address, email address and telephone number.
2. Description of the program's program philosophy.
3. Days and hours of operation, scheduled closings and basic daily schedule.
4. Staff/child ratios and group size.
5. Opportunities for parent involvement in program activities.
6. Opportunities for parents to meet with teachers regarding their child.
7. Payment schedule, overtime charges and registration fees as applicable.
8. Supports for onsite breastfeeding or pumping for mothers who wish to do so (if the program serves infants or toddlers).



Program Policies and Procedures

9. Enrollment including required enrollment information.
10. Care of children without immunizations.
11. Attendance including procedures for arrival and departure, the program's absent day policy, releasing child to persons other than the parent, releasing a child according to a custody agreement and follow up when a child scheduled to arrive from another program or activity does not arrive.
12. Supervision of children, including a separate supervision policy for school-age children, if applicable.
13. Child guidance.
14. Suspension and expulsion.
15. Compliance with the Americans with Disabilities Act (ADA), including administering medication to children with disabilities and administering care procedures to children with disabilities.
16. Outdoor play, including limitations placed on outdoor play due to weather or safety issues (considerations may include but are not limited to temperature, humidity, wind chill, ozone levels, pollen count, lightning, rain or ice.)
17. Food and dietary policy, including, information regarding meeting one-third of the child's recommended daily dietary allowance, policy regarding formula, breast milk, meals and snacks, and a policy on providing supplemental food.
18. Management of illness including isolation precautions, symptoms for discharge and return and notification of parent of ill child.
19. Summary of procedures taken in the event of an emergency, serious illness or injury.
20. Administration of medication and topical products including medical foods, modified diets and whether school age children are permitted to carry their own medication and ointments.
21. Transportation for fieldtrips, routine trips (if applicable) and emergencies, including if the center will provide child care services to children whose parents refuse to grant consent for transportation to the source of emergency treatment.
22. Water activities/swimming.
23. Infant care, if applicable, including feeding, frequency of diaper checks and information about daily activities.
24. Sleeping, Napping and Resting.
25. Evening and overnight care, if applicable.
26. Policy on hours of operation including closing due to weather, school delays or closings and any other factors.
27. Situations that may require disenrollment of a child, if applicable.
28. Problem or issue resolution for parents or employees to follow when needing assistance in resolving problems related to the child care program.
29. Formal screenings and assessments on enrolled children and if the program reports child level data to ODJFS pursuant to 5101:2-17-02 of the Administrative Code.

Revise the program's written policies and procedures to include the missing information. Submit the program's corrective action plan, which includes the revised written policies and procedures, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/20/2022



Rule: 5101:2-12-16 Written Disaster Plan

Code: The program is required to have a written disaster plan.

Finding: During the inspection, it was determined the program's written disaster plan did not meet the requirement or was missing the information in number 17 below:

Procedures:

1. The written disaster plan had not been completed
2. The plan was not provided to all child care staff and employees
3. The plan was not used to respond to an emergency or disaster situation
4. Weather emergencies and natural disasters which include severe thunderstorms, tornadoes, flash flooding, major snowfall, blizzards, ice storms or earthquakes
5. Emergency outdoor and indoor lockdown or evacuation due to threats of violence which includes active shooter, bioterrorism or terrorism
6. Emergency or disaster evacuations due to hazardous materials and spills, gas leaks or bomb threats.
7. Outbreaks, epidemics or other infectious disease emergencies
8. Loss of power, water, or heat
9. Other threatening situations that may pose a health or safety hazard to the children in the program

Details:

10. Shelter in place or evacuation, how the program will care for and account for the children until they can be reunited with the parent
11. Assisting infants and children with special needs and/or health conditions
12. Emergency contact information for parents and the program
13. Procedures for notifying and communicating with parents regarding the location of the children if evacuated
14. Procedures for communicating with parents during loss of communications, no phone or internet service available
15. The location of supplies and procedures for gathering necessary supplies for staff and children if required to shelter in place
16. What to do if a disaster occurs during the transport of children or when on a field trip or routine trip
17. Making the plan available to all child care staff members and employees
18. Training of staff or reassignment of staff duties as appropriate
19. Updating the plan on a yearly basis
20. Contact with local emergency management officials

Make the necessary revisions to the disaster plan. Submit the program's corrective action plan, which includes the revised information, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/20/2022



Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	
5101:2-12-02 Current Information	Compliant	
5101:2-12-03 Inspection Requirements	Compliant	
5101:2-12-04 Building Department Inspection	Compliant	
5101:2-12-04 Fire Inspection	Compliant	
5101:2-12-04 Food Service Requirements	Compliant	
5101:2-12-07 Administrator Qualifications	Compliant	
5101:2-12-09 Background Check Requirements	Compliant	
Rule: 5101:2-12-10 Health Training Requirements	Compliant	Documenting Statement: The program 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.
5101:2-12-11 Indoor Space Requirements	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Separation of Children Under 2 1/2 Years	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Space Requirements	Compliant	Documenting Statement: The outdoor play area is separated from traffic and other hazards by a fence.
Rule: 5101:2-12-11 Outdoor Space Requirements	Compliant	Documenting Statement: The quarterly playground inspections were completed and documented, as required. The most recent inspection report form was dated 9/28/21.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Fall Zones	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-12 Safe Equipment	Compliant	Documenting Statement: Equipment was observed to be in good condition.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Sanitary Equipment and Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-13 Handwashing Requirements	Compliant	Documenting Statement: Staff and children were observed washing hands as required by the rule.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-14 Transportation and Field Trip Procedures	Compliant	Documenting Statement: Requirements regarding routine walking trips were discussed during the inspection.
Rule	Status	Documenting Statement(s), If applicable



Rule: 5101:2-12-15 Child Medical and Enrollment Records	Compliant	Documenting Statement: At the time of the inspection, 25% of the children's records were reviewed, and the records were complete, as required by the rule.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Medical/Physical Care Plans	Compliant	Documenting Statement: The program had current information on the medical status and the required treatment plan for the children with health conditions.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard Precautions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of Communicable Disease	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury Reporting	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-17 Daily Schedule	Compliant	Documenting Statement: During the inspection, developmentally-appropriate practices were observed in the classroom(s).
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-17 Materials and Equipment	Compliant	Documenting Statement: Sufficient equipment was observed in all categories.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	
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	Compliant	Documenting Statement: The Appendix A Staff/Child Ratios, Age Grouping and Maximum Group Size was posted in a



		noticeable area at the program as required.
Rule: 5101:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child ratios observed during the inspection were in compliance.
Rule	Status	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
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	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	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Meal and Snack Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Fluid Milk Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food Handling/Storage	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-23 Diapering and Toilet Training	Compliant	