

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 Deta	ils	
Program Name	Program Number		Program Type
Sharonville UMC Preschool	000000200586		Child Care Center
Address			County
3751 CREEK RD CINCINNATI			HAMILTON
ОН			
45241			
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date	Food Service Risk L	evel	
01/23/2025	Exempt		

Inspection Information				
Inspection Type	Inspection So	cope	Inspection Notice	
Annual	Full		Unannounced	
Inspection Date	Begin Time		End Time	
05/06/2025	11:10 AM		1:15 PM	
Reviewer:				
BRIAN CHASTAIN				
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
58	4	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	8	0	0	0
Older Toddler		0	3	3
Preschool		20	75	95
School Age		0	5	5
Total Capacity/Enrollment	142	20	83	103

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



250	4 years to < 5 years	2 to 11	
253	30 months to < 36 months	2 to 8	
255	3 years to < 4 years	2 to 12	
257	4 years to < 5 years	1 to 8	
259	3 years to < 4 years	2 to 12	
254	4 years to < 5 years	2 to 14	
252	4 years to < 5 years	1 to 12	
52-54 nap time	3 years to < 4 years	1 to 13	
50 nap time	3 years to < 4 years	1 to 11	

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

Domain: 09 Children's Files

Rule: 5180:2-12-15 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 27, 28 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.

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- 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.

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: 06/06/2025

Low Risk Non-Compliances

Domain: 08 Staff Files

Rule: 5180:2-12-07 Administrator Responsibilities/Requirements

<u>Code</u>: The program administrator is required to maintain current employee records in the Ohio Professional

Registry.

<u>Finding</u>: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in numbers 5, 6, 7 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: 06/06/2025



Domain: 08 Staff Files

Rule: 5180:2-12-08 Medical Statement

<u>Code</u>: The program staff's medical statements are required to be completed and on file at the program.

<u>Finding</u>: In review of the staff records, it was determined that the medical statements for the employees listed on the Employee Record Chart did not meet the requirements as listed in number 2 below.

- 1. A medical statement was not on file for at least one employee;
- 2. The medical statement(s) on file did not have a date of examination within 12 months of the employee's first day of employment;
- 3. Date of examination was missing;
- 4. Signature, business address, or telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination was missing;
- 5. A statement was missing that verifies 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);
- 6. Tuberculosis (TB) screening/test information was missing:
- 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 6a.
- 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: 06/06/2025

Domain: 08 Staff Files

Rule: 5180:2-12-09 Background Check Requirements

<u>Code</u>: The program is required to maintain a current JFS 01176 "Program Notification of Background Check

Review for Child Care" on file for each staff.



<u>Finding</u>: In review of the staff records, it was determined that background check requirements had not been followed, for the individual(s) listed on the Employee Record Chart, as noted in number 2 below:

- 1. The JFS 01177 "Individual Notification of Background Check Review for Child Care" was on file instead of the JFS 01176.
- 2. The JFS 01176 on file was for a different program.

Submit the program's corrective action plan, which includes a statement that the correct form is now on file, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/06/2025

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-16 Written Disaster	Compliant	Documenting Statement: Annual training
Plan	Solition of Challeton Parameters and American Challeton Co.	of the written disaster plan was
		completed by staff.
		completed by stair.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-02 License Posted	Compliant	Documenting Statement: The license was
Naici 310012 12 02 Electise i ostea	Compilation	in a location visible to parents as
		required.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-04 Building	Compliant	Documenting Statement: A copy of the
Department Inspection	**	certificate of occupancy was available on-
		site for review.
		site for review.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-02 Current Information	Compliant	7
	- Compilation	
Rule	Status	Documenting Statement(s), If applicable



5180:2-12-03 Inspection	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-04 Fire Inspection	Compliant	bocumenting statement(s), if applicable
	1	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-04 Food Service Requirements	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-07 Administrator	Compliant	-
Qualifications		
D. J.	Continu	Decree of the Charles of the Charles
Rule 5180:2-12-07 Written Program	Status Compliant	Documenting Statement(s), If applicable
Policies and Procedures	Compliant	
Tollers and Frocedures	L	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-08 Child Care Staff Member	Compliant	
Educational Requirements		
2.1		
Rule 5180:2-12-08 Orientation Training &	Status Compliant	Documenting Statement(s), If applicable
Whistle Blower Protection	Compliant	
Williams Blower Frederich	k	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-10 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.
		,
2.1		
Rule: 5180:2-12-10 Professional	Status	Documenting Statement(s), If applicable
Development Requirements	Compliant	Documenting Statement: At the time of the inspection, all child care staff
bevelopment nequirements		members had completed the required
		amount of professional development
		training.
Pula	Status	Decumenting States t/- \ If 1:- x 1.1
Rule 5180:2-12-11 Indoor Space	Status Compliant	Documenting Statement(s), If applicable
STOOLE TE IT HIGOOI Space	Compilant	
Requirements		



Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-11 Outdoor Space	Compliant	Documenting Statement: The quarterly
Requirements		playground inspections were completed
		and documented, as required. The most
		recent inspection report form was dated
		3/3/25.
		3,5,23
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-12 Safe Equipment	Compliant	Documenting Statement: Equipment was
		observed to be in good condition.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Outdoor Play Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-11 Outdoor Play Fall	Compliant	Documenting Statement: The protective
Zones		material used under outdoor equipment
The state of the s		was wood chips.
		·
0.1	S	D :: 6: 1 (1) If I: 11
Rule 5180:2-12-12 Safe Environment	Status	Documenting Statement(s), If applicable
5180:2-12-12 Safe Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-13 Sanitary	Compliant	Documenting Statement: During the
Equipment and Environment		inspection, the equipment was observed
		clean and in good repair.
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	Status	Documenting Statement(s), If applicable
Environment	Compliant	
Livionincit		<u> </u>
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-15 Child Medical and	Compliant	Documenting Statement: At the time of
Enrollment Records		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
Raic	Status	bocamenting statement(s), if applicable



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5180:2-12-16 Medical, Dental, and	Compliant	
General Emergency Plan		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-16 Emergency Drills	Compliant	Documenting Statement: Documentation
_		for completed fire, weather, and
		emergency/lockdown drills was verified
		during this inspection.
		daming this inspection
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 First Aid/Standard	Compliant	Documenting Statement(3), if applicable
Precautions	Compliant	
Precautions		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-16 Management of	Compliant	Documenting Statement: The JFS 08087
Communicable Disease		"Communicable Disease Chart" was
		posted and was readily available to staff
		and parents.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Incident/Injury	Compliant	
Reporting	,	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-17 Materials and	Compliant	Documenting Statement: Sufficient
Equipment	Compilarie	equipment was observed in all categories.
Equipment		equipment was observed in an eategories.
Rule: 5180:2-12-17 Materials and	Compliant	Documenting Statement: Quiet areas
	Compliant	were observed in the classrooms.
Equipment		were observed in the classrooms.
Dolla	Caracina	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-17 Daily Schedule	Status Compliant	Documenting Statement: During the
		Documenting Statement: During the inspection, developmentally-appropriate
		Documenting Statement: During the inspection, developmentally-appropriate practices were observed in the
		Documenting Statement: During the inspection, developmentally-appropriate
		Documenting Statement: During the inspection, developmentally-appropriate practices were observed in the
		Documenting Statement: During the inspection, developmentally-appropriate practices were observed in the classroom(s).
		Documenting Statement: During the inspection, developmentally-appropriate practices were observed in the
Rule: 5180:2-12-17 Daily Schedule	Compliant	Documenting Statement: During the inspection, developmentally-appropriate practices were observed in the classroom(s).
Rule: 5180:2-12-17 Daily Schedule Rule	Compliant	Documenting Statement: During the inspection, developmentally-appropriate practices were observed in the classroom(s).
Rule: 5180:2-12-17 Daily Schedule Rule	Compliant	Documenting Statement: During the inspection, developmentally-appropriate practices were observed in the classroom(s).
Rule: 5180:2-12-17 Daily Schedule Rule	Compliant	Documenting Statement: During the inspection, developmentally-appropriate practices were observed in the classroom(s).
Rule: 5180:2-12-17 Daily Schedule Rule 5180:2-12-18 Attendance Records Rule	Status Compliant Status Status	Documenting Statement: During the inspection, developmentally-appropriate practices were observed in the classroom(s). Documenting Statement(s), If applicable Documenting Statement(s), If applicable
Rule: 5180:2-12-17 Daily Schedule Rule 5180:2-12-18 Attendance Records	Status Compliant	Documenting Statement: During the inspection, developmentally-appropriate practices were observed in the classroom(s). Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement: The group sizes
Rule: 5180:2-12-17 Daily Schedule Rule 5180:2-12-18 Attendance Records Rule	Status Compliant Status Status	Documenting Statement: During the inspection, developmentally-appropriate practices were observed in the classroom(s). Documenting Statement(s), If applicable Documenting Statement(s), If applicable



Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-17 Daily Outdoor Play	Compliant	Documenting Statement: Outdoor play
# 752	200	was observed for the prescool groups.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 License Capacity	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-18 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: 5180:2-12-18 Ratio	Compliant	Documenting Statement: Staff/shild
Nuie. 3100.2-12-10 Natio	Compliant	Documenting Statement: Staff/child
		ratios observed during the inspection
		were in compliance.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-20 Cots and Napping	Compliant	Documenting Statement: Cots were
Maler 318012 12 20 cots and Mapping	Compilant	placed appropriately and safely during
		nap time.
		Thap carrier
	<u>.</u>	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-19 Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-19 Child Guidance	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Meal and Snack	Compliant	g state(-), ii applicazio
Requirements		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Safe Food	Compliant	3
Handling/Storage	'	
U	ı	
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 Administration	Compliant	
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