

# **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 | ogram Type        |
| The Growing Room              | 00000201304             |                 | Chi | ld Care Center    |
|                               |                         |                 |     |                   |
| Address                       |                         |                 | Co  | unty              |
| 7781 COOPER ROAD CINCINNATI   |                         |                 | HA  | MILTON            |
| OH 45242                      |                         |                 |     |                   |
|                               |                         |                 |     |                   |
|                               |                         |                 |     |                   |
| Building Approval Date        | Use Group/Code          | Occupancy Limit |     | Maximum Under 2 ½ |
| 06/01/2021                    | E                       | 32              |     | 0                 |
| Fire Inspection Approval Date | Food Service Risk Level |                 |     |                   |
| 06/30/2022                    | Exempt                  |                 |     |                   |

| Inspection Information     |                                |                  |                   |              |  |
|----------------------------|--------------------------------|------------------|-------------------|--------------|--|
| Inspection Type            | Inspection S                   | соре             | Inspection Notice |              |  |
| Annual                     | Full                           |                  | Unannounced       |              |  |
| Inspection Date 01/11/2024 | Begin Time a                   | 8:45 AM          | End Time 1:20 PM  |              |  |
| Reviewer:                  |                                |                  |                   |              |  |
| PAMELA DAUDISTEL           |                                |                  |                   |              |  |
| Summary of Findings        |                                |                  |                   |              |  |
| No. Rules Verified         | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |  |
| 58                         | 5                              | 0                | 1                 | 4            |  |

| 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   |                  | 3          | 3         | 6     |
| Preschool   |                  | 38         | 32        | 70    |
| School Age  |                  | 0          | 0         | 0     |
| Total Capacity/Enrollment                                 | 49               | 41         | 35        | 76    |

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



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| Classroom 1 | 30 months to < 36 months | 1 to 8  | @ arrival              |
|-------------|--------------------------|---------|------------------------|
| Classroom 1 | 30 months to < 36 months | 2 to 15 | going to<br>playground |
| Classroom 2 | 3 years to < 4 years     | 2 to 16 | @ arrival              |
| Classroom 2 | 3 years to < 4 years     | 1 to 12 | @ lunch time           |
| Classroom 3 | 30 months to < 36 months | 2 to 14 | @ arrival              |
| Classroom 3 | 30 months to < 36 months | 2 to 16 | @ lunch time           |

#### **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: 5101:2-12-15 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 number(s) 10, 39 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 and dose on OTC medication exceeded the manufacturer's instructions for the child's age.

- 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.

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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.
- 29. Date of stall signature was missing.
- 30. Administrator/Provider signature was missing
- 31. Date of administrator/Provider was missing.

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- 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 (dose indicated by parent conflicted with Dr's instructions).

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: 02/11/2024

## Low Risk Non-Compliances

## Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

<u>Code</u>: The program is required to have a method for tracking the children in each group. The tracking method must be updated throughout the day and kept with the group at all times.

<u>Finding</u>: During the inspection, it was determined that the method for tracking children in each group did not meet the requirements of the rule as noted in number(s) 4, 5 below:

- 1. There was no method in place;
- 2. The method did not include each child's name;
- 3. The method did not include each child's date of birth;
- 4. The tracking method did not remain with the group at all times;
- 5. The tracking method was not updated throughout the day as children entered or left the group.

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

Corrective Action Plan Due: 02/11/2024



## Domain: 04 Indoor/Outdoor Space

<u>Rule</u>: 5101:2-12-11 Outdoor Space Requirements <u>Code</u>: The program is required to have an oudoor play space that provides 60 square feet of usable space per child.

<u>Finding</u>: During the inspection, it was determined the program's outdoor play area did not meet the requirements of the rule as noted in number 2 below in that the playground is large enough for 11 children but groups of 15 and 16 children were observed using the playground:

1. The program no longer had an on-site outdoor play space, in that [ ].

2. The program's outdoor play space did not provide 60 square feet per child using the area at one time.

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

Corrective Action Plan Due: 02/11/2024

## Domain: 05 Health & Safety

<u>Rule</u>: 5101:2-12-22 Safe Food Handling/Storage <u>Code</u>: The program is required to safely store food provided by parents.

<u>Finding</u>: During the inspection, it was determined that there were no provisions for the safe storage of parent provided food, in that there were no cold packs in several lunches stored with children's personal belongings. 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: 09 Children's Files

Rule: 5101:2-12-25 Medication Administration

<u>Code</u>: The program is required to remove all medication, medical foods and topical products that are no longer being administered or have expired. The program is also required to maintain current documentation to administer medications, medical foods and topical products.



<u>Finding</u>: During the inspection, it was determined that medication, medical foods and/or topical products did not meet the requirement(s) for administering medication, medical foods, and/or medical products as noted in number(s) 2 below:

1. The medication, medical food, or topical product was no longer needed and had not been removed from the program.

2. The medication, medical food, or topical product had expired and had not been removed from the program.

3. The prescription label had expired.

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

Corrective Action Plan Due: 02/11/2024

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

| Rule                              | Status                                | Documenting Statement(s), If applicable |
|-----------------------------------|---------------------------------------|---|
| Rule: 5101:2-12-02 License Posted | Compliant                             | Documenting Statement: The license was  |
|                                   | · · · · · · · · · · · · · · · · · · · | in a location visible to parents as     |
|                                   |                                       | required.                               |
|                                   |                                       |   |
| -                                 |                                       |   |
| Rule                              | Status                                | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-02 Current        | Compliant                             | Documenting Statement: The program      |
| Information                       |                                       | had current information entered in the  |
|                                   |                                       | Ohio Child Licensing and Quality System |
|                                   |                                       | (OCLQS).                                |
|                                   |                                       |   |
|                                   |                                       |   |
| 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: Although the      |
|                                     |           | program had documentation of a current   |
|                                     |           | fire inspection without any uncorrected  |
|                                     |           | violations at the time of the licensing  |
|                                     |           | inspection, the program did not have the |
|                                     |           | fire inspection completed within 12      |
|                                     |           | months from the date of the last fire    |
|                                     |           | inspection without any uncorrected       |
|                                     |           | violations. Please ensure that fire      |
|                                     |           | inspections are completed in accordance  |
|                                     |           | with the rule requirements.              |
|                                     |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-04 Food Service           | Compliant |  |
| Requirements                        |           |  |
| Rule                                | Status    | Documenting Statement(a) If applicable   |
| 5101:2-12-05 Denial, Revocation and | Compliant | Documenting Statement(s), If applicable  |
| Suspension                          | Compliant |  |
| Suspension                          |           |  |
| 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  |
| 5101:2-12-08 Medical Statement      | Compliant |  |
|                                     | Compilant |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-08 Orientation Training & | Compliant |  |
| Whistle Blower Protection           | Compliant |  |
|                                     |           |  |
| 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  |
| 5101:2-12-10 Health Training        | Compliant |  |
| Requirements                        |           |  |



| Rule                                 | Status    | Documenting Statement(s), If applicable   |
|--------------------------------------|-----------|---|
| 5101:2-12-10 Professional            | Compliant |   |
| Development Requirements             |           |   |
| <b>6</b>                             |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-11 Indoor Space            | Compliant |   |
| Requirements                         |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-11 Outdoor Play      | Compliant | Documenting Statement: Outdoor            |
| Equipment                            | Compliant | equipment was viewed to be safe and       |
| Lyupment                             |           | free of rust, sharp points, and other     |
|                                      |           | hazards.                                  |
|                                      |           |   |
|                                      |           | <u>l</u>                                  |
| Rule                                 | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-11 Outdoor Play Fall | Compliant | Documenting Statement: The protective     |
| Zones                                |           | material used under outdoor equipment     |
|                                      |           | was mulch.                                |
|                                      |           |   |
|                                      |           |   |
| 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   |
| Rule: 5101:2-12-12 Safe Environment  | Compliant | Documenting Statement: Cleaning           |
|                                      |           | supplies were viewed stored out of the    |
|                                      |           | reach of children.                        |
|                                      |           |   |
| Rule: 5101:2-12-12 Safe Environment  | Compliant | Documenting Statement: A safe             |
|                                      |           | environment was observed during the       |
|                                      |           | inspection. Children were protected from  |
|                                      |           | items and conditions which threaten their |
|                                      |           | health, safety and well-being.            |
|                                      |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-13 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   |
| Rule: 5101:2-12-13 Handwashing       | Compliant | Documenting Statement: Staff and          |
| Requirements                         |           | children were observed washing hands as   |
|                                      |           | required by the rule.                     |
|                                      | 1         |   |



| Rule   | Status    | Documenting Statement(s), If applicable   |
|--|-----------|---|
| Rule: 5101:2-12-13 Smoke Free<br>Environment | Compliant | Documenting Statement: No smoking was<br>allowed on the premises, and the notice<br>stating that smoking is prohibited was<br>observed posted in a conspicuous place. |

| Rule   | Status    | Documenting Statement(s), If applicable  |
|--|-----------|--|
| Rule: 5101:2-12-15 Child Medical and Enrollment Records    | Compliant | Documenting Statement: At the time of<br>the inspection, 25% of the children's<br>records were reviewed, and the records<br>were complete, as required by the rule.                  |
| Rule: 5101:2-12-15 Child Medical and<br>Enrollment Records | Compliant | Documenting Statement: In review of<br>25% of the records, at the time of the<br>inspection, children's medical statements<br>were complete and on file, as required by<br>the rule. |

| Rule  | Status    | Documenting Statement(s), If applicable  |
|---|-----------|--|
| Rule: 5101:2-12-16 Medical, Dental,<br>and General Emergency Plan | Compliant | Documenting Statement: On the day of<br>the inspection, the complete prescribed<br>JFS 01242 "Medical, Dental, and General |
|   |           | Emergency Plan For Child Care" were posted in the program as required.   |

| 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.                 |
|                                     |           |   |

| Rule                                  | Status    | Documenting Statement(s), If applicable |
|---------------------------------------|-----------|---|
| Rule: 5101:2-12-16 First Aid/Standard | Compliant | Documenting Statement: During the       |
| Precautions                           |           | inspection, the program had complete    |
|                                       |           | first aid kits available as required.   |

| Rule                             | Status    | Documenting Statement(s), If applicable   |
|----------------------------------|-----------|---|
| Rule: 5101:2-12-16 Management of | Compliant | Documenting Statement: The 2022 JFS   |
| Communicable Disease             |           | 08087 "Communicable Disease Chart"<br>was posted and was readily available to<br>staff and parents. |



| Rule                                | Status    | Documenting Statement(s), If applicable  |
|-------------------------------------|-----------|--|
| 5101:2-12-16 Incident/Injury        | Compliant |  |
| Reporting                           |           |  |
|                                     | 3         |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-16 Written Disaster | Compliant | Documenting Statement: Annual training   |
| Plan                                |           | of the written disaster plan was         |
|                                     |           | completed by staff.                      |
|                                     |           | . ,                                      |
| Rule: 5101:2-12-16 Written Disaster | Compliant | Documenting Statement: The program's     |
| Plan                                |           | written disaster plan was reviewed durin |
|                                     |           | the inspection and met the requirement   |
|                                     |           |  |
|                                     | .44       |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-17 Daily Schedule   | Compliant | Documenting Statement: Daily schedules   |
|                                     |           | were observed posted.                    |
|                                     |           |  |
| Rule: 5101:2-12-17 Daily Schedule   | Compliant | Documenting Statement: During the        |
|                                     |           | inspection, developmentally-appropriate  |
|                                     |           | practices were observed in the           |
|                                     |           | classroom(s).                            |
|                                     |           |  |
|                                     |           | Ĩ.                                       |
| 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     | Compliant |  |
|                                     |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
|                                     |           | Documenting Statement(s), if applicable  |

| 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<br>"Staff/Child Ratios, Age Grouping and<br>Maximum Group Size" was posted in a<br>noticeable area at the program as<br>required. |
| Rule: 5101:2-12-18 Ratio | Compliant | Documenting Statement: Staff/child<br>ratios observed during the inspection<br>were in compliance.  |



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| Rule                                 | Status    | Documenting Statement(s), If applicable         |
|--------------------------------------|-----------|---|
| 5101:2-12-18 Group Size              | 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         |
| Rule: 5101:2-12-19 Child Guidance    | Compliant | Documenting Statement: Appropriate              |
|                                      | -59       | child guidance techniques and practices         |
|                                      |           | were observed being used during the inspection. |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable         |
| Rule: 5101:2-12-20 Cots and Napping  | Compliant | Documenting Statement: Naptime is not           |
| 11 0                                 |           | part of this program's schedule. One sick       |
|                                      |           | cot was verified.                               |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable         |
| Rule: 5101:2-12-22 Meal and Snack    | Compliant | Documenting Statement: Parents provide          |
| Requirements                         |           | all snacks and meals for children.              |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable         |
| 5101:2-12-22 Fluid Milk Requirements | Compliant |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable         |
| 5101:2-12-23 Diapering and Toilet    | Compliant |   |
| Training                             |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable         |
| 5101:2-12-08 Child Care Staff Member | Compliant |   |
| Educational Requirements             |           |   |
|                                      |           |   |
|                                      |           |   |