

Center Complaint Inspection Summary 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	Program Number	Program Type			
JENNA'S JUST LIKE HOME CHILD CARE	000000201456	Child Care Center			
CENTER					
Address		County			
1515 COMPTON RD CINCINNATI OH 45231		HAMILTON			

Inspection Information						
Inspection Type			Inspection Scope		Inspection Notice	
Complaint				Partial		Unannounced
Reviewer(s) SULYN ROMER In		Inspection Day		Begin Time		End Time
		11/01/20	21	3:10 PM		4:00 PM
Summary of Findings						
No. Rules Verified	No. Rules with Non-cor	mpliances	No. Serious Risk	(No. Moderate Risk	No. Low Risk
4	2		0		0	2

Staff-Child Ratios at the Time of Inspection					
Group	Age Group/Range	Ratio Observed	Comment		
Preschool/SA	3 years to < 4 years	1 to 1			
Toddler/Preschool	30 months to < 36 months	2 to 3			



Complaint Allegations

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.

No Complaints were observed during this inspection.
Summary of Additional Non-Compliances
Serious Risk Non-Compliances
No Additional Serious Risk Non-Compliances were observed during this inspection
No Additional Scribus Kisk Non-compliances were observed during this hispection
Moderate Risk Non-Compliances
No Additional Moderate Risk Non-Compliances were observed during this inspection



Low Risk Non-Compliances

Domain:02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Handwashing Requirements

Code: The program is required to have all staff wash their hands as outlined in rule.

Findings: During the inspection, it was determined that at least one staff member with the toddler/preschool group did not wash his or her hands at the time listed in numbers 5 & 6 below, as required in rule.

- 1. Upon arrival for the day.
- 2. Prior to departure.
- 3. Upon entry into a classroom.
- 4. After toileting or assisting a child with toileting.
- 5. After each diaper change or pull-up change.
- 6. After contact with bodily fluids or cleaning up spills or objects contaminated with bodily fluids.
- 7. After cleaning or sanitizing or using any chemical products.
- 8. After handling pets, pet cages or other pet objects that have come in contact with the pet.
- 9. Before eating, serving or preparing food or bottles or feeding a child.
- 10. Before and after completing a medical procedure or administering medication.
- 11. When visibly soiled (must use soap and water).
- 12. Other [].

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

Corrective Action Plan Due: 01/01/2022

Domain:02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Equipment

Code: The program is required to use straps on equipment that is manufactured with straps.

Findings: During the inspection, it was determined that the following equipment was not used according to manufacturer's guidelines as noted in number 2 below:

- 1. The straps were missing on the [].
- 2. The straps were attached, but were not used on the high chair when child was using it.
- 3. The straps were attached and were used, but were not used in a safe manner.
- 4. Manufacturer's guidelines for the [] were not followed in that [].

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

Corrective Action Plan Due: 01/01/2022

