

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 Summit Elementary YMCA Child Care	Program Number 000000202871	Program Type Child Care Center	
Address 8400 NORTHPORT DRIVE CINCINNATI OH 45255		County HAMILTON	
Building Approval Date	Use Group/Code School Building	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date	Food Service Risk Level Exempt		

Inspection Information				
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced		
Inspection Date 03/19/2025	Begin Time 7:00 AM	End Time 9:50 AM		
Reviewer: BRIAN CHASTAIN				
Summary of Findings				
No. Rules Verified 58	No. Rules with Non-compliances 14	No. Serious Risk 0	No. Moderate Risk 3	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	0	0
Total Under 2 ½ Years	0	0	0	0
Older Toddler		0	0	0
Preschool		0	0	0
School Age		0	41	41
Total Capacity/Enrollment	54	0	41	41

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

School Age	School-Age to < 11 years	2 to 27	
School Age	School-Age to < 11 years	2 to 15	
School Age	School-Age to < 11 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

No Serious Risk Non-Compliances were observed during this inspection

Moderate Risk Non-Compliances

Domain: 06 Program Information

Rule: 5180:2-12-14 Transportation - Vehicle Requirements

Code: The program is required to use the correct vehicle type as specified in rule. The program is also required to have all vehicles used to transport children inspected by an ASE certified mechanic, FMCSA inspector or the State Highway patrol annually, and correct all repairs that are listed on the vehicle inspection report.

Finding: During the inspection, it was determined the program used a vehicle to transport children that was not approved and/or did not have a current annual vehicle inspection indicating the vehicle was mechanically safe as noted in number 2 below:

1. The program used a converted cargo van or passenger vans designed to carry ten or more passengers. The program must cease the use of this vehicle immediately.
2. The vehicle was not inspected.
3. The vehicle was inspected by someone other than an ASE certified mechanic, federal motor carrier safety administration (FMCSA) safety inspector or the Ohio State Highway Patrol.
4. The vehicle inspection was not updated annually.
5. The vehicle inspection completed from the Ohio Highway Patrol did not meet the rule requirement.

6. The annual safety check of the vehicle(s) used by the program to transport children noted repairs or corrections that had not been completed and/or documented. The safety violations need to be corrected immediately.

Submit the program's corrective action plan, which includes either discontinuing the use of the vehicle, documentation for any new vehicle now being used to transport children, or a copy of the JFS 01230 "Vehicle Inspection Report for Child Care Centers", to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/19/2025

Domain: 08 Staff Files

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

Code: The program is required to have all staff request background checks as required and receive a JFS 01176 or preliminary approval from ODJFS prior to allowing an individual to engage in assigned duties or be near children.

Finding: In review of the staff records, it was determined that background checks did not meet the requirements of the rule for the person(s) listed on the Employee Record Chart as noted in numbers 2, 3, 4 below:

1. The request for a background check for child care was not submitted in the OPR.
2. The fingerprints were not submitted electronically according to the process established by BCI.
3. The individual(s) had engaged in assigned duties or were near children and preliminary approval from ODJFS was not on file.
4. Background checks were not updated every five years.

Submit the program's corrective action plan, which includes a copy of the JFS 01176, or a copy of the preliminary approval or a statement that the individual(s) are no longer engaged in assigned duties and are not near children until the preliminary approval has been received, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/19/2025

Domain: 09 Children's Files

Rule: 5180:2-12-15 Medical/Physical Care Plans

Code: 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.

Finding: 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 22, 27, 28, 30 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.

(Page 2)

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: 04/19/2025

Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5180:2-12-04 Food Service Requirements

Code: The program is required to maintain a copy of the current Ohio Department of Agriculture registration for any off-site food processing establishment they may utilize.

Finding: During the inspection, it was determined that a copy of the off-site food processing establishment's current Ohio Department of Agriculture registration was not on file at the program for the off-site food processing establishment the program currently uses. Submit the program's corrective action plan, which includes a copy of the current registration, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/19/2025

Domain: 01 Ratio & Supervision

Rule: 5180:2-12-18 Attendance Records

Code: 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.

Finding: 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 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: 04/19/2025

Domain: 03 Postings & Equipment

Rule: 5180:2-12-16 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 the weather details from the program's disaster plan.
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: 04/19/2025

Domain: 06 Program Information

Rule: 5180:2-12-14 Transportation - Driver Requirements

Code: The program is required to have all drivers be an employee of the program, a public transportation driver, or employed by a contracted transportation service company and retain a copy of all licenses for drivers employed by the program.

Finding: During the inspection, it was determined that the requirements for drivers was not met as listed in numbers 1, 2 below:

1. The driver(s) noted on the Employee Record Chart used for trips did not have a copy of a current driver's license on file.
2. At least one employee who is responsible for transporting children did not have documentation of completion of the prescribed driver training on file.
3. The driver used to transport children was not an employee of the program, a public transportation driver, or employed by a company contracted to provide transportation service.

Remove this individual from transporting children until the requirements are met. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/19/2025

Domain: 08 Staff Files

Rule: 5180:2-12-08 Orientation Training & Whistle Blower Protection

Code: The program is required to have staff complete the online staff orientation training. Additionally, the training must be completed before they are permitted to have sole responsibility of children.

Finding: In review of the staff records, it was determined that child care staff member(s) did not meet the requirements for completing the online orientation training as noted in number 1 below:

1. The training was not completed within 30 days of starting employment at the program as a child care staff member.
2. Documentation of completing the training after December 31, 2016 was not on file.
3. Completion of the training was not verified in the OPR.
4. A child care staff member had sole responsibility of children and had not completed the online orientation.

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

Corrective Action Plan Due: 04/19/2025

Domain: 08 Staff Files

Rule: 5180:2-12-10 Health Training Requirements

Code: The program is required to maintain a staff schedule with coverage of the required health trainings.

Finding: In review of the staff records, it was determined the program did not have at least one child care staff member present/scheduled to be present during all hours of operation with currently valid documentation for the training(s) listed in numbers 2, 5 below:

1. First Aid – child care staff members scheduled during the hours of [] and [] had expired training
2. First Aid – child care staff members scheduled during the hours of 7:00-9:00 AM and 3:30-6:00 PM did not have verification of current First Aid
3. First Aid – trained child care staff member was not present in each building used by the program.
4. CPR – child care staff members scheduled during the hours of [] and [] had expired training
5. CPR – child care staff scheduled during the hours of 7:00-9:00 AM and 3:30-6:00 PM did not have verification of current CPR
6. CPR – trained child care staff member was not present in each building used by children
7. CPR – training taken by staff was not appropriate for all ages and developmental levels of the children in care
8. CPR - audiovisual or electronic media training taken by staff did not include an in-person component of the training
9. Communicable Disease – child care staff members scheduled during the hours of [] and [] had expired training
10. Communicable Disease – child care staff scheduled during the hours of [] and [] had not taken Communicable Disease training
11. Communicable Disease – trained child care staff member was not present in each building used by the program
12. Child Abuse – child care staff members scheduled during the hours of [] and [] had expired training
13. Child Abuse – child care staff scheduled during the hours of [] and [] had not taken Child Abuse training
14. Child Abuse – trained child care staff was not in each building used by the program

Refer to the Employee Record Chart for specific details. Submit the program's corrective action plan, which includes verification of complete coverage for any training listed, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/19/2025

Domain: 08 Staff Files

Rule: 5180:2-12-10 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 1 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: 04/19/2025

Domain: 08 Staff Files

Rule: 5180:2-12-10 Health Training Requirements

Code: The program is required to have all child care staff members complete training in child abuse and neglect recognition and prevention within sixty days of hire. Staff must complete training in first aid and CPR within the first ninety days of hire.

Finding: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in numbers 2, 3, 4, 5, 6 below:

1. Child abuse and neglect recognition and prevention training was not completed within sixty days of hire.
2. First aid training was not completed within ninety days of hire.
3. Cardiopulmonary resuscitation (CPR) training was not completed within ninety days of hire.
4. The child abuse and neglect recognition and prevention training was expired.
5. The first aid training was expired.
6. The CPR training was expired.

Refer to the Employee Record Chart for the name(s) of the child care staff member(s) who must complete the required health and safety training(s). Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/19/2025

Domain: 08 Staff Files

Rule: 5180:2-12-07 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 numbers 4, 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: 04/19/2025

Domain: 08 Staff Files

Rule: 5180:2-12-08 Medical Statement

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

Finding: 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 1 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: 04/19/2025

Domain: 08 Staff Files

Rule: 5180:2-12-08 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 for the child care staff member(s) listed on the Employee Record Chart, did not meet the requirements as listed in numbers 1, and 2 or 3 below:

1. Verification of completion of a high school education was not on file.
2. Documentation was incomplete or not on file for a high school junior or senior who is enrolled in a career-technical program.
3. Documentation was not on file for a high school junior or senior who is also enrolled in a college credit program in child development or early childhood education.
4. Documentation was not on file for a high school junior or senior who is enrolled in a Child Development Associate (CDA) training program.

Submit the program's corrective action plan, which includes a copy of the education verification, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/19/2025

Domain: 10 Written Policies & Procedures

Rule: 5180:2-12-16 Written Disaster Plan

Code: The program is required to train child care staff members and employees on the written disaster plan annually and keep written documentation of the training on-site.

Finding: During the inspection, it was determined the program's written disaster plan did not meet the requirement for training child care staff members and employees on the plan annually as noted in number 2 below:

1. Child care staff members and employees were not trained annually.
2. Written documentation of the training was not kept on file.

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

Corrective Action Plan Due: 04/19/2025

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-02 License Posted	Compliant	Documenting Statement: The license was in a location visible to parents as required.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-04 Building Department Inspection	Compliant	Documenting Statement: This program serves only school age children in a public or chartered non-public school building.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-02 Current Information	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-03 Inspection Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-04 Fire Inspection	Compliant	Documenting Statement: This program serves only school age children in a public or chartered non-public school building.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-07 Administrator Qualifications	Compliant	Documenting Statement: The administrators have completed the rules review course.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-07 Written Program Policies and Procedures	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Indoor Space Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-11 Outdoor Space Requirements	Compliant	Documenting Statement: The quarterly playground inspections were completed and documented, as required. The most recent inspection report form was dated 1/21/25.
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
Rule: 5180:2-12-11 Outdoor Play Equipment	Compliant	Documenting Statement: Outdoor equipment was viewed to be safe and free of rust, sharp points, and other hazards.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Outdoor Play Fall Zones	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-12 Safe Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable

5180:2-12-13 Sanitary Equipment and Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-13 Handwashing Requirements	Compliant	Documenting Statement: Staff and children were observed washing hands as required by the rule.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-13 Smoke Free Environment	Compliant	Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-14 Transportation and Field Trip Procedures	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-15 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: 5180:2-12-16 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: 5180:2-12-16 First Aid/Standard Precautions	Compliant	Documenting Statement: During the inspection, the program had a complete first aid kit available as required.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Management of Communicable Disease	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Incident/Injury Reporting	Compliant	
Rule	Status	Documenting Statement(s), If applicable

Rule: 5180:2-12-17 Materials and Equipment	Compliant	Documenting Statement: Sufficient equipment was observed in all categories.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-17 Daily Schedule	Compliant	Documenting Statement: Daily schedules were observed posted.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-18 Group Size	Compliant	Documenting Statement: The group sizes observed on the day of the inspection were in compliance.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-17 Daily Outdoor Play	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-18 License Capacity	Compliant	Documenting Statement: The program was operating within license capacity limits.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child ratios observed during the inspection were in compliance.
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	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-22 Meal and Snack Requirements	Compliant	Documenting Statement: The menu was posted in the cafeteria.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Safe Food Handling/Storage	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Fluid Milk Requirements	Compliant	



**Department of
Children & Youth**

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-25 Medication Administration	Compliant	