

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
CLIPPARD FAMILY YMCA LEARNING	000000204585		Child Care Center
CENTER			
Address	26.1		County
8920 CHEVIOT ROAD CINCINNATI			HAMILTON
OH 45251			
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date	Food Service Risk Level		
03/02/2022	Level II		

	Inst	pection Information	n	
Inspection Type	Inspection S	cope	Inspection Notice	
Annual	Full		Unannounced	
Inspection Date 07/18/2022	Begin Time 9	9:30 AM	End Time 4:24 PM	
Reviewer:	·			
Kristin Blassingam	ie			
	Su	mmary of Findings		
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
58	8	0	2	9

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	64	64
School Age		0	0	0
Total Capacity/Enrollment	203	0	64	64

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

Teal 1	3 years to < 4 years	1 to 9	
Teal 1	3 years to < 4 years	2 to 11	
Teal 2	3 years to < 4 years	2 to 2	
Teal 2	3 years to < 4 years	1 to 1	
Orange	3 years to < 4 years	1 to 10	
Orange	3 years to < 4 years	1 to 12	
Purple	4 years to < 5 years	2 to 13	
Purple	3 years to < 4 years	2 to 14	
Blue	4 years to < 5 years	3 to 4	
Blue	4 years to < 5 years	3 to 4	

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	
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Moderate Risk Non-Compliances

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

<u>Code</u>: The program is required to store chemicals and machinery in a place that is inaccessible to children. The program is required to provide an outdoor play area away from machinery in operation.

<u>Finding</u>: During the inspection, a potentially hazardous item or toxic substance was used or stored in cabinet where children had access to it, as noted in number 1 below.

- 1. Bleach.
- 2. Cleaning agent.
- 3. Fish tank chemicals.
- 4. Gasoline.

- 5. Pesticide.
- 6. Poison, including insect/rodent poison.
- 7. Flammable substance.
- 8. Windshield washer fluid.
- 9. Aerosol cans.
- 10. A lawn mower.
- 11. A weed trimmer.
- 12. Hedge trimmers.
- 13. A snow blower.
- 14. Other potentially hazardous substance, equipment or machinery: [].

Provide staff training. Submit the program's corrective action plan, which includes a statement that the potentially hazardous substance or item is no longer accessible to children and/or children will not be outside when machinery is in use and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 08/17/2022

Domain: 09 Children's Files

Rule: 5101:2-12-25 Medication Administration

Code: The program is required to store medication out of the reach of children.

<u>Finding</u>: During the inspection, it was determined that a medication Albuterol, was within the reach of children in the orange room. All medications must be stored out of the reach of children. Create procedures that assure medications will always be inaccessible to children. 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: 08/17/2022

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 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: 08/17/2022

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

<u>Code</u>: 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.

<u>Finding</u>: 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) purse(s).
- 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: 08/17/2022

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

<u>Code</u>: The program is required to store chemicals in a place that is inaccessible to children.

<u>Finding</u>: During the inspection, a potentially hazardous substance, which was determined to not present a serious risk to a child, was accessible to children as noted in number 11 below:

- 1. Cosmetics;
- 2. Disinfecting wipes;
- 3. Fish food;
- 4. Hand lotion;
- 5. Hand sanitizer (for children under 24 months);
- 6. Laundry detergent;
- 7. Powder dish washing soap;
- 8. Paint cans;
- 9. White out;
- 10. Potting Soil;
- 11. Other potentially hazardous substance... bleach, goo gone, disinfectant wipes.

The potentially hazardous substance was determined to be accessible to children in the following area: preschool cabinets and closets .

Provide staff training. Submit the program's corrective action plan, which includes a statement that the potentially hazardous substance is no longer accessible to children and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 08/17/2022

Domain: 08 Staff Files

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

<u>Code</u>: The program is required to have staff complete the online staff orientation training.

<u>Finding</u>: 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 number 1 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: 08/17/2022

Domain: 08 Staff Files

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

<u>Code</u>: 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.

<u>Finding</u>: 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: 08/17/2022

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to include all information.

<u>Finding</u>: In review of the staff records, it was determined that the medical statements for those employees listed on the Employee Record Chart did not include the required information listed below in number 1.

1. Date of examination;

- 2. Signature, business address, and telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination;
- 3. A statement that verifies that 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);
- 4. Tuberculosis (TB) screening/test
- 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 4a;
- 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: 08/17/2022

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

<u>Code</u>: The program staff medicals are required to be completed within the previous 12 months from the employee's first day of employment.

<u>Finding</u>: In review of the staff records, it was determined that medical examination statement(s) on file at the program were not dated within 12 months of the employee's first day of employment, for the employee(s) listed on the Employee Record Chart. Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 08/17/2022

Domain: 08 Staff Files

Rule: 5101:2-12-07 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 number 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: 08/17/2022

Domain: 08 Staff Files

Rule: 5101:2-12-10 Health Training Requirements

<u>Code</u>: 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.

<u>Finding</u>: 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 1,2 and 3 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.



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	Corrective Action Plan Due: 08/17/2022	
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Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 Current Information	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-03 Inspection Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Building Department	Compliant	
Inspection		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Fire Inspection	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Food Service	Compliant	
Requirements		
	à.	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	
Qualifications		
		1
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-07 Written Program	Compliant	Documenting Statement: The written
Policies and Procedures	· ·	policies and procedures reviewed on the



		day of the inspection were verified as complete.
Rule	Status	Decumenting Statement(s) If applicable
5101:2-12-08 Child Care Staff Member Educational Requirements	Compliant	Documenting Statement(s), If applicable
Rule: 5101:2-12-09 Background Check Requirements	Compliant	Documenting Statement(s), If applicable Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Indoor Space Requirements	Compliant	Documenting Statement: The restrooms are used exclusively by the program.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Space Requirements	Compliant	bootamenting statement(3), it approaches
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Equipment	Compliant	Documenting Statement(s), if applicable
		D C
Rule 5101:2-12-11 Outdoor Play Fall Zones	Status Compliant	Documenting Statement(s), If applicable
Sule 5101:2-12-12 Safe Equipment	Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-13 Sanitary Equipment and Environment	Compliant	Documenting Statement(s), if applicable Documenting Statement: On the day of the inspection, the program provided a clean environment in accordance with Appendix A of this rule, which included the furniture, materials and equipment.
Dula	Chatria	Decomposition Chatagon and A. If and Parkla
Rule 5101:2-12-13 Handwashing Requirements	Status Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(c) If applicable
Nuie	Jiaius	Documenting Statement(s), If applicable

Rule: 5101:2-12-13 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
5101:2-12-15 Child Medical and Enrollment Records	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Medical/Physical Care	Compliant	Bodamenting Statement(s), it applicable
Plans		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Medical, Dental, and	Compliant	Documenting Statement(s), if applicable
General Emergency Plan	Compilant	
Dul	Ci-t	Downsonting St. 1
Rule	Status	Documenting Statement(s), If applicable Documenting Statement: Documentation
Rule: 5101:2-12-16 Emergency Drills	Compliant	for completed fire, weather, and
		emergency/lockdown drills was verified
		during this inspection.
		and more more management
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard	Compliant	Documenting Statement(s), if applicable
Precautions	Compilant	
Rule	Status	Documenting Statement(s), If applicable Documenting Statement: The JFS 08087
Rule: 5101:2-12-16 Management of Communicable Disease	Compliant	"Communicable Disease Chart" was
Communicable Disease		posted and was readily available to staff
		and parents.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury	Compliant	
Reporting		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Written Disaster	Compliant	Documenting Statement: The program's
Plan	**************************************	written disaster plan was reviewed during
		the inspection and met the requirements.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-17 Daily Schedule	Compliant	Documenting Statement: Daily schedules
		were observed posted.

Rule Status Documenting Statement(s), If applicable			
Status Documenting Statement(s), If applicable	Rule	Status	Documenting Statement(s), If applicable
Rule	5101:2-12-17 Materials and	Compliant	
Rule	Equipment		
Status Documenting Statement(s), If applicable			
Rule	Rule	Status	Documenting Statement(s), If applicable
Rule	5101:2-12-17 Daily Outdoor Play	Compliant	
Rule			
Rule		20	*
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5101:2-12-23 Diapering and Toilet	Compliant	
Training		
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5101:2-12-24 Swimming and Water	Compliant	
Safety Requirements		
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