

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
TIFFIN EARLY CHILDHOOD CENTER	000000206069		Child Care Center
Address			County
11827 STATE ROUTE 125 WEST UNION	11827 STATE ROUTE 125 WEST UNION		
OH			
45693			
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date	Food Service Risk Level		
08/10/2024	Level III		

Inspection Information				
Inspection Type	Inspection So	cope	Inspection Notice	
Annual	Full		Unannounced	
Inspection Date	Begin Time		End Time	
02/21/2025	9:30 AM		12:50 PM	
Reviewer:				
SULYN ROMER				
	A 1:			
	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	0	0	0	0	
Older Toddler		0	0	0	
Preschool		46	0	46	
School Age		0	0	0	
Total Capacity/Enrollment	60	46	0	46	

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



Class A	3 years to < 4 years	3 to 13	
Class A	3 years to < 4 years	3 to 13	
Class B	3 years to < 4 years	3 to 11	
Class B	3 years to < 4 years	3 to 11	
Class C	3 years to < 4 years	2 to 12	
Class C	3 years to < 4 years	3 to 10	
Class C	3 years to < 4 years	2 to 10	

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: 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 number(s) 7-32 below:

1. No plan was on file.

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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.

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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.
- 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: 03/26/2025

Low Risk Non-Compliances

Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-12-13 Sanitary Equipment and Environment

Code: The program is required to provide a clean restroom with the appropriate materials available.

<u>Finding</u>: During the inspection, it was determined that unsanitary conditions, as noted in number(s) 4 & 5 below, were in the children hallway restroom:

- 1. There was no liquid soap.
- 2. There was no toilet paper.
- 3. There were no paper towels.
- 4. The toilet cleaning brush was accessible to the children.
- 5. The plunger was accessible to the children.
- 6. The toilet(s) were not flushed.
- 7. The trash was not emptied from the day before.
- 8. There was a strong urine odor.
- 9. Other [].

The restroom(s) must be kept sanitary at all times. 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: 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.

<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 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: 03/26/2025

Domain: 08 Staff Files

Rule: 5180:2-12-10 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 number(s) 2, 3, 4 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	Dlan	Dua	02	126	/2025
Corrective	ACTION	rian	Due.	US.	/ ZO	/ 2025

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Written Disaster Plan	Compliant	
	*	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-02 License Posted	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-04 Building Department	Compliant	
Inspection	*	
	·	
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	Compliant	
Requirements		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-12-04 Fire Inspection	Compliant	
	,	
	*	



Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-04 Food Service	Compliant	Documenting Statement: The food service
Requirements		license was observed posted. Following is
		the audit number and date of expiration:
		Lic.#60 Level III Adams Co.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-07 Administrator	Compliant	Documenting Statement: The
Qualifications		administrator has until March 29, 2025 to
		complete the rules review course (Part 1
		and Part 2).
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-07 Administrator	Compliant	Documenting statement(s), if applicable
Responsibilities/Requirements	Compliant	
Nesponsibilities/Nequilements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-07 Written Program	Compliant	0 (7)
Policies and Procedures	1	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-08 Child Care Staff Member	Compliant	
Educational Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-08 Orientation Training &	Compliant	
Whistle Blower Protection		
D		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-09 Background Check	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-10 Professional	Compliant	bodamenting statement(s), it applicable
Development Requirements	Compilation	
	I.	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Indoor Space	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Separation of Children	Compliant	
Under 2 1/2 Years		
Rule	Status	Documenting Statement(s), If applicable



E190-2 12 11 Outdoor Cross	Commisset	
5180:2-12-11 Outdoor Space	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-12 Safe Equipment	Compliant	
	T.	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Outdoor Play Equipment	Compliant	
	9	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-11 Outdoor Play Fall	Compliant	Documenting Statement: The protective
Zones		surfaces under the outdoor equipment
		were not viewed during this inspection
		due to snow covering; however, the
		requirements were discussed.
		requirements were discussed.
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Rule	Status	Documenting Statement(s), If applicable
5180:2-12-12 Safe Environment		bocumenting statement(s), it applicable
3160:2-12-12 Sale Environment	Compliant	
Dule	Chahira	Decumenting Statement (a) If any limble
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-13 Handwashing	Compliant	
Requirements		
	- S-W. (9)	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-13 Smoke Free	Compliant	
Environment		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-13 Toothbrushing	Compliant	Documenting Statement: Tooth brushing
Requirements	Sandration address • • Andrew Anterior Sandra La	is practiced by the program and it was
II;		determined to meet the requirements
		outlined in the rule.
		Gadinica in the rater
	I	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-14 Transportation and Field	Compliant	Documenting Statement(3), it applicable
	Compliant	
Trip Procedures		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-14 Transportation - Driver	Compliant	
Requirements		
	-	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-14 Transportation -	Compliant	Documenting Statement: The vehicle(s)
Vehicle Requirements	100 100 100 100 100 100 100 100 100 100	used by the program to transport children
. Smore requirements	l .	assa si ale program to dansport children



		are inspected and licensed by the Ohio State Highway Patrol.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-15 Child Medical and Enrollment Records	Compliant	Boodinenting Statement(6), it applicable
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	
Rule	Status	Decumenting Statement(s) If applicable
5180:2-12-16 Emergency Drills	Compliant	Documenting Statement(s), If applicable
Rule 5180:2-12-16 First Aid/Standard Precautions	Status Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Management of Communicable Disease	Compliant	
Rule	Status	Decrementing Statement(s) If applicable
5180:2-12-16 Incident/Injury Reporting	Compliant	Documenting Statement(s), If applicable
Rule 5180:2-12-17 Materials and Equipment	Status Compliant	Documenting Statement(s), If applicable
Rule 5180:2-12-17 Daily Schedule	Status Compliant	Documenting Statement(s), If applicable
Rule 5180:2-12-18 Attendance Records	Status Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 Group Size	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-17 Daily Outdoor Play	Compliant	, , , , , , , , , , , , , , , , , , ,
Rule	Status	Documenting Statement(s), If applicable



5180:2-12-18 License Capacity	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 Ratio	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-20 Cots and Napping	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-19 Supervision	Compliant	0 (7)
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-19 Child Guidance	Compliant	(-),
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Meal and Snack		Documenting Statement(s), if applicable
Requirements	Compliant	
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	Bocamenting Statement(s), if applicable
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-25 Medication Administration	Compliant	