

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 |
| JOY CHILDCARE L.L.C | 000000207446 | | Child Care Center |
| | | | |
| Address | | | County |
| 7963 WESSELMAN RD CLEVES | | | HAMILTON |
| ОН | | | |
| 45002 | | | |
| | | | |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ |
| 07/21/2023 | | 144 | |
| Fire Inspection Approval Date | Food Service Risk Level | | |
| 02/29/2024 | Level II | | |

| Inspection Information | | | | |
|------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type | Inspection So | соре | Inspection Notice | |
| Annual | Full | | Unannounced | |
| Inspection Date | Begin Time | | End Time | |
| 09/04/2024 | 04/2024 8:30 AM 12:00 PM | | | |
| Reviewer: | Reviewer: | | | |
| Beverly McGlasson | | | | |
| Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58 | 4 | 0 | 0 | 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) | | 7 | 3 | 10 |
| Young Toddler | | 5 | 5 | 10 |
| Total Under 2 ½ Years | 31 | 12 | 8 | 20 |
| Older Toddler | | 5 | 3 | 8 |
| Preschool | | 16 | 17 | 33 |
| School Age | | 0 | 0 | 0 |
| Total Capacity/Enrollment | 208 | 21 | 20 | 61 |

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

| Infant | 0 to < 12 months | 2 to 6 | |
|---------------------------|--------------------------|---------|-----------------|
| Infant | 0 to < 12 months | 2 to 7 | |
| Toddler-Orange Room | 18 months to < 30 months | 2 to 10 | |
| Toddler-Orange Room | 18 months to < 30 months | 2 to 8 | |
| Older Toddler-Yellow Room | 30 months to < 36 months | 1 to 4 | |
| Older Toddler-Yellow Room | 30 months to < 36 months | 1 to 6 | |
| Preschool-Blue Room | 3 years to < 4 years | 1 to 6 | |
| Preschool-Blue Room | 3 years to < 4 years | 1 to 8 | |
| Preschool-Pink Room | 3 years to < 4 years | 1 to 4 | |
| Preschool-Pink Room | 3 years to < 4 years | 1 to 6 | |
| Preschool-Green Room | 4 years to < 5 years | 1 to 7 | |
| Preschool-Green Room | 4 years to < 5 years | 1 to 8 | Taken while on |
| | | | the playground. |

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 |
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| No Serious Risk Non-Compliances were observed during this inspection |
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| Moderate Risk Non-Compliances | | | |
|---|---|--|--|
| No Moderate Risk Non-Compliances were observed during this inspection | | | |
| | No Moderate Risk Non-compliances were observed during this hispection | | |
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Low Risk Non-Compliances

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Sanitary Equipment and Environment

<u>Code</u>: The program is required to provide equipment and materials that are easy to clean.

<u>Finding</u>: During the inspection, it was determined that at least one piece of equipment, furnishings, or material at the program was not constructed of materials to facilitate cleaning as noted in number 1 below:

- 1. The material had a tear. The climbing equipment in the infant room.
- 2. The material was not washable.
- 3. The material was porous.
- 4. The surface was cracked.
- 5. The surface was repaired, but in a manner that still did not facilitate cleaning.
- 6. Other [].

Equipment, furnishings, and furniture shall be constructed of materials to facilitate cleaning. 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: 03 Postings & Equipment

Rule: 5101:2-12-17 Materials and Equipment

<u>Code</u>: The program is required to have quiet areas available.

<u>Finding</u>: During the inspection, it was determined that the program's environment did not provide for a quiet area in the Orange, Blue and Yellow classrooms. 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: 5101:2-12-15 Child Medical and Enrollment Records

Code: The program is required to use the updated JFS 01234 "Child Enrollment and Health Information For Child

Care".

<u>Finding</u>: In review of 25% of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in number(s) 3, 4, 6, 10, and 12 below.

- 1. No enrollment form was completed for at least one child
- 2. The current JFS 01234 was not completed for at least one child
- 3. Complete child information
- 4. Complete parent information
- 5. Complete emergency contact information
- 6. Complete physician information
- 7. Information regarding the parent list
- 8. Health information
- 9. Additional information for all boxes checked "yes"
- 10. Emergency transportation information
- 11. Parent/guardian's signature
- 12. Diapering Statement
- 13. Acknowledgement of Policies and Procedures
- 14. Enrollment form for at least one child was not updated by either the parent or the administrator
- 15. Enrollment form for at least one child was not signed by the administrator
- 16. Other []

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: 10 Written Policies & Procedures

Rule: 5101:2-12-16 Written Disaster Plan

Code: The program is required to have a written disaster plan.

<u>Finding</u>: During the inspection, it was determined the program's written disaster plan did not meet the requirement or was missing the information in number(s) 11 and 21 below:

Procedures:

- 1. The written disaster plan had not been completed
- 2. The plan was not provided to all child care staff and employees
- 3. The plan was not used to respond to an emergency or disaster situation
- 4. Weather emergencies and natural disasters which include severe thunderstorms, tornadoes, flash flooding, major snowfall, blizzards, ice storms or earthquakes
- 5. Emergency outdoor and indoor lockdown or evacuation due to threats of violence which includes active shooter, bioterrorism or terrorism
- 6. Emergency or disaster evacuations due to hazardous materials and spills, gas leaks or bomb threats.
- 7. Outbreaks, epidemics or other infectious disease emergencies
- 8. Loss of power, water, or heat
- 9. Other threatening situations that may pose a health or safety hazard to the children in the program Details:
- 10. Shelter in place or evacuation, how the program will care for and account for the children until they can be reunited with the parent
- 11. A designated safe site where staff and children can safely remain when evacuated.
- 12. Assisting infants, toddlers and children with special needs and/or health conditions
- 13. Emergency contact information for parents and the program
- 14. Procedures for notifying and communicating with parents regarding the location of the children if evacuated
- 15. Procedures for communicating with parents during loss of communications, no phone or internet service available
- 16. The location of supplies and procedures for gathering necessary supplies for staff and children if required to shelter in place
- 17. What to do if a disaster occurs during the transport of children or when on a field trip or routine trip
- 18. Making the plan available to all child care staff members and employees
- 19. Training of staff or reassignment of staff duties as appropriate
- 20. Updating the plan on a yearly basis
- 21. Contact with local emergency management officials

Make the necessary revisions to the disaster plan. Submit the program's corrective action plan, which includes the revised information, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/06/2024

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| Rule | Status | Documenting Statement(s), If applicable |
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| Rule: 5101:2-12-02 License Posted | Compliant | Documenting Statement: The license was |
| Trainer 3 To Tiz Tz 02 Electrise F osted | Compilant | in a location visible to parents as |
| | | required. |
| | | required. |
| | l. | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-02 Current Information | Compliant | bocumenting statement(s), if applicable |
| 3101.2-12-02 Current information | Compliant | |
| | Į. | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-03 Inspection | Compliant | becamening statement(s), it applicable |
| Requirements | Compilant | |
| Requirements | ļ | |
| Rule | Status | Documenting Statement(s), If applicable |
| 3/1/3/3/4/1920 | NEW CONTROL OF THE CO | Documenting statement(s), if applicable |
| 5101:2-12-04 Building Department | Compliant | |
| Inspection | | |
| Dela | Charles | D |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Fire Inspection | Compliant | |
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| D. L. | Ci | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Food Service | Compliant | |
| Requirements | | |
| | T 2500 200 | |
| 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 |
| 5101:2-12-07 Written Program | Compliant | |
| Policies and Procedures | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-08 Medical Statement | Compliant | Documenting Statement: All employees |
| | | had current medical statements on file. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-08 Orientation | Compliant | Documenting Statement: During the |
| Training & Whistle Blower Protection | | inspection, the requirements of the rule |
| | | regarding orientation training were |
| | | discussed. |
| | | a.soussed. |
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| Rule | Status | Documenting Statement(s), If applicable |
|--|---------------|--|
| Rule: 5101:2-12-09 Background Check | Compliant | Documenting Statement: During the |
| Requirements | * | inspection, the required documentation |
| Validation National Matter Control of Contr | | regarding background checks was on file |
| | | for all employees listed. |
| | | The state of the s |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-10 Health Training | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-10 Professional | Compliant | Documenting Statement: At the time of |
| Development Requirements | | the inspection, all child care staff |
| • | | members had completed the required |
| | | amount of professional development |
| | | training. |
| | | |
| | 1. | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Indoor Space | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Separation of Children | Compliant | |
| Under 2 1/2 Years | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Space | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Equipment | Compliant | |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Fall Zones | Compliant | |
| | | |
| Pula | Chahua | Decumenting Statement (-) Iflili- |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Equipment | Compliant | |
| L | I | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Environment | Compliant | bocumenting statement(s), it applicable |
| | Compliant | |
| | I. | |
| Rule | Status | Documenting Statement(s), If applicable |
| - Annual Control of the Control of t | | |

| Rule: 5101:2-12-13 Handwashing Requirements | Compliant | Documenting Statement: Children were viewed washing their hands, as required by the rule. |
|--|-----------|---|
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Smoke Free Environment | Compliant | |
| Environment | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-14 Transportation and Field | Compliant | |
| Trip Procedures | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-15 Medical/Physical | Compliant | Documenting Statement: The program |
| Care Plans | | had current information on the medical |
| | | status and the required treatment plan |
| | | for the children with health conditions. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Medical, Dental, | Compliant | Documenting Statement: During the |
| and General Emergency Plan | | inspection, the requirements of the rule |
| | | regarding medical, dental and general emergencies plans and that they need to |
| | | be easily visible were discussed. |
| | | be easily visible were discussed. |
| | ls. | |
| 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. |
| | | |
| Pule | Status | Decumenting Statement(a) If a will also |
| Rule 5101:2-12-16 First Aid/Standard | Compliant | Documenting Statement(s), If applicable |
| Precautions | Compliant | |
| Couding | : | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Management of | Compliant | (// = // = // |
| Communicable Disease | , | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Incident/Injury | Compliant | Documenting Statement: During the |
| Reporting | | inspection, the requirements of the rule |
| | | regarding reporting COVID were |
| | | discussed. |
| | | |

| Rule | Status | Documenting Statement(s), If applicable |
|---------------------------------------|---------------|--|
| 5101:2-12-17 Daily Schedule | Compliant | |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-17 Daily Outdoor Play | Compliant | Documenting Statement: Outdoor play |
| | | was observed for the Green Classroom. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 License Capacity | Compliant | bootinenting statement(s), ii applicable |
| | | |
| | • | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 Ratio | Compliant | Documenting Statement: Staff/child |
| | | ratios observed during the inspection |
| | | were in compliance. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 Group Size | Compliant | |
| | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 Attendance | Compliant | Documenting Statement: Child Care Staff |
| Records | - Compilation | Members were observed recording the |
| 1.000.00 | | attendance for each child upon arrival |
| | | and documenting each child's departure. |
| | | |
| | | · |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Supervision | Compliant | |
| | | |
| D. I. | C | December 5th to 11 11 |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Child Guidance | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-20 Cots and Napping | Compliant | , , , , , , , , , , , , , , , , , , , |
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| | - | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-20 Cribs | Compliant | Documenting Statement: All cribs were |
| | | labeled with the assigned infant's name. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |

| 5101:2-12-22 Meal and Snack | Compliant | |
|---|---|--|
| Requirements | | |
| Dula | Chatus | Decumenting Statement(s) If applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Fluid Milk Requirements | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Safe Food | Compliant | |
| Handling/Storage | | |
| | I - | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-23 Infant Daily Care | Compliant | Documenting Statement: Appropriate |
| | | daily written records for all infants were viewed. |
| | | viewed. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-23 Infant Bottle and | Compliant | Documenting Statement: All bottles were |
| Food Preparation | W | labeled as required. |
| | | |
| Dula | Chahara | D |
| Rule 5101:2-12-23 Diapering and Toilet | Status Compliant | Documenting Statement(s), If applicable |
| Training | Compilant | |
| Trailing | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-24 Swimming and Water | Compliant | |
| Safety Requirements | • ************************************* | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-25 Medication | Compliant | |
| Administration | | |
| Pula | Chatus | Decumenting Statement(a) If applicable |
| Rule 5101:2-12-08 Child Care Staff Member | Status Compliant | Documenting Statement(s), If applicable |
| Educational Requirements | Compilant | |
| Ladeadonal Requirements | | |