

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	nils	
Program Name	Program Number		Program Type
DEBRA ANN NOVEMBER EARLY LEARNING	000000300545		Child Care Center
CENTER			
Address			County
5225 Library Lane Maple Heights			CUYAHOGA
OH 44137			
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
07/25/2022	E	84	9
Fire Inspection Approval Date	Food Service Risk Level		
08/02/2022	Level III		

	Insp	ection Information		
Inspection Type	Inspection Sc	cope	Inspection Notice	
Follow-up	Full		Unannounced	
Inspection Date 03/22/2023	Begin Time 8	:40 AM	End Time 12:20 PM	
Reviewer:				
Kathryn Noftz				
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
58	3	0	0	3

License Capacity and Enrollment at the Time of Inspection				
Age Group	License Capacity		Enr	ollment
	Totals	Full Time	Part Time	Total
Infant (Birth to < 18 m)		1	0	1
Young Toddler		2	0	2
Total Under 2 ½ Years	9	3	0	3
Older Toddler		2	0	2
Preschool		14	0	14
School Age		0	0	0
Total Capacity/Enrollment	49	16	0	19

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

Preschool 2	3 years to < 4 years	2 to 4	
Preschool 2	3 years to < 4 years	2 to 6	
Preschool 2	3 years to < 4 years	3 to 10	
MIT	12 months to < 18 months	2 to 3	
MIT	12 months to < 18 months	2 to 3	
MIT	12 months to < 18 months	2 to 5	

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
No Moderate Risk Non-Compliances were observed during this inspection



Low Risk Non-Compliances

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(s) 2,4:

- 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: 04/21/2023

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 number(s) 2,3 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.

Corrective Action Plan Due: 04/21/2023

Domain: 09 Children's Files

Rule: 5101:2-12-25 Medication Administration

<u>Code</u>: The program is required to use the appropriate form and retain current documentation to administer medications, medical foods and topical products. The program is also required to obtain separate documentation for each medication/product and child.

<u>Finding</u>: During the inspection, it was determined the program did not meet the requirements for the JFS 01217 "Request for Administration of Medication for Child Care" as noted in number(s) 7 below:

- 1. The program used an old version of the JFS 01217.
- 2. The signature date on the JFS 01217 exceeded more than 12 months.
- 3. The time period to administer the medication or medical food on the JFS 01217 was exceeded.
- 4. The JFS 01217 included more than one medication or medical food.
- 5. The JFS 01217 included more than one child's name.
- 6. The prescription label was not current.
- 7. The required information was not recorded on the prescribed JFS 01217

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

Corrective Action Plan Due: 04/21/2023

Rules In-Compliance/Not Verified

us apliant us apliant us apliant	Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement(s), If applicable
us apliant us apliant	Documenting Statement(s), If applicable
us apliant apliant	Documenting Statement(s), If applicable
us apliant apliant	Documenting Statement(s), If applicable
us ipliant	
ıpliant	
ıpliant	
ıpliant	
us	Documenting Statement(s), If applicable
	Documenting Statement(s), If applicable
	Documenting Statement(s), If applicable
pliant	
ıs	Documenting Statement(s), If applicable
	Documenting Statement: Please Note:
ipiidiit	Documentation of a fire inspection
	without any uncorrected violations must
	be secured for the program. Secure a
	new fire inspection by 8-2-23.
	,
	Documenting Statement(s), If applicable
pliant	Documenting Statement: The off-site
	food processing establishment's current
	Ohio Department of Agriculture
	registration information was observed
	during the inspection.
ınliant	Documenting Statement: The food service
ipiiarie	license was observed posted. Following is
	the audit number and date of expiration:
	AAXD-CPHLEB, 3-1-24.
	7000 611125, 3 1 24.
	Documenting Statement(s), If applicable
pliant	
ıc	Documenting Statement/s) If applicable
	Documenting Statement(s), If applicable
ιμιιατιτ	
	us npliant us npliant us npliant us npliant us npliant



Dulo	Ctatus	Decumenting Statements of Familia II
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Written Program	Compliant	
Policies and Procedures		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Child Care Staff Member	Compliant	
Educational Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Orientation Training &	Compliant	
Whistle Blower Protection		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-09 Background Check	Compliant	
Requirements		
		·
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-10 Professional	Compliant	
Development Requirements	·	
1 - 1 - 1 - 1 - 1	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space	Compliant	
Requirements		
перапенен	I.	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Separation of Children	Compliant	bocumenting statement(s), if applicable
Under 2 1/2 Years	Compliant	
Officer 2 1/2 fears		
Rule	Status	Documenting Statement/s) If applicable
		Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Space	Compliant	
Requirements	1	
Dula	Chahara	December 11 15
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Equipment	Compliant	
L	l	
Pulo	Status	Decumenting Statement/s) If and itself
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Fall Zones	Compliant	
	l	1
Pulo	Status	Decumenting Statement/s) If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Equipment	Compliant	
Rule	Status	Documenting Statement/s) If applicable
		Documenting Statement(s), If applicable
5101:2-12-12 Safe Environment	Compliant	
L	1	
Rule	Status	Documenting Statement(s), If applicable
Nuie	Status	Documenting statement(s), if applicable

5101:2-12-13 Sanitary Equipment and	Compliant	
Environment		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Handwashing	Compliant	boomenting statement(s), it approaches
Requirements	'	
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free	Compliant	
Environment		
Pula	Ctatus	Decumenting Statement(s) If applicable
Rule 5101:2-12-13 Toothbrushing	Status Compliant	Documenting Statement(s), If applicable
Requirements	Compliant	
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-14 Transportation and Field	Compliant	
Trip Procedures		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Child Medical and	Compliant	
Enrollment Records		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Medical/Physical Care	Compliant	Documenting Statement(S), it applicable
Plans		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Medical, Dental, and	Compliant	
General Emergency Plan		
2.1		5
Rule 5101:2-12-16 Emergency Drills	Status	Documenting Statement(s), If applicable
3101.2-12-16 Emergency Drills	Compliant	
	ı	-
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard	Compliant	
Precautions		
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of Communicable Disease	Compliant	
Communicable Disease	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury	Compliant	
Reporting		
	•	
Rule	Status	Documenting Statement(s), If applicable

5101:2-12-16 Written Disaster Plan	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Schedule	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Materials and Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	bocumenting statement(s), ii applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Ratio	Compliant	bocumenting statement(s), ii applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Group Size	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Attendance Records	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Supervision	Compliant	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
Rule	Status	Decumenting Statements of Amelicable
5101:2-12-19 Child Guidance	Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cots and Napping	Compliant	bocumenting statement(s), ii applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cribs	Compliant	boarnening statement(s), ii applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Meal and Snack Requirements	Compliant	bookinenting statement(s), it 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 Handling/Storage	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-23 Infant Daily Care	Compliant	
	l	<u>'</u>
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-23 Infant Bottle and Food Preparation	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-23 Diapering and Toilet Training	Compliant	