

# **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 <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. 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                              | Program Number          |                 | Program Type       |
| KING'S CORNER ACHIEVEMENT CENTER          | 000000300602            |                 | Child Care Center  |
| Address 3484 MLK DRIVE CLEVELAND OH 44105 |                         |                 | County<br>CUYAHOGA |
|   |                         |                 |                    |
| Building Approval Date                    | Use Group/Code          | Occupancy Limit | Maximum Under 2 ½  |
| Fire Inspection Approval Date             | Food Service Risk Level |                 |                    |
| 10/25/2023                                | Level III               |                 |                    |

| Inspection Information |                                |                  |                   |              |  |
|------------------------|--------------------------------|------------------|-------------------|--------------|--|
| Inspection Type        | Inspection So                  | cope             | Inspection Notice |              |  |
| Annual                 | Full                           |                  | Unannounced       |              |  |
| Inspection Date        | Begin Time                     |                  | End Time          |              |  |
| 03/11/2024             | 10:30 AM                       | 10:30 AM         |                   | 3:15 PM      |  |
| Reviewer:              |                                |                  |                   |              |  |
| ELAINE OBRIEN          |                                |                  |                   |              |  |
| Summary of Findings    |                                |                  |                   |              |  |
|                        |                                |                  |                   |              |  |
| No. Rules Verified     | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |  |
| 58                     | 7                              | 0                | 1                 | 6            |  |

| 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   |                  | 10         | 0         | 10    |
| School Age  |                  | 0          | 38        | 38    |
| Total Capacity/Enrollment                                 | 100              | 10         | 38        | 48    |

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

| PS    | 3 years to < 4 years      | 1 to 3 | Arrival           |
|-------|---------------------------|--------|-------------------|
| PS    | 3 years to < 4 years      | 1 to 3 | nap               |
| SACC1 | School-Age to < 11 years  | 1 to 2 | afterschool group |
|       |                           |        | arriving          |
| SACC1 | 5 years to < Kindergarten | 1 to 4 | Snack             |

## **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.

| Sovious Pick Non Compliances   |  |  |
|--|--|--|
| Serious Risk Non-Compliances   |  |  |
| No Serious Risk Non-Compliances were observed during this inspection |  |  |
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#### **Moderate Risk Non-Compliances**

**Domain: 08 Staff Files** 

Rule: 5101:2-12-09 Background Check Requirements

<u>Code</u>: 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.

<u>Finding</u>: 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 number(s) 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: 04/11/2024

#### **Low Risk Non-Compliances**

#### Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

<u>Code</u>: The program is required to maintain a record of the arrival and departure of each child. The program is also required to retain the original attendance record at the center for a period of one year.

<u>Finding</u>: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number(s) 2 below:

- 1. No attendance record was being maintained.
- 2. The attendance record was not being consistently completed.
- 3. The record did not include the name of at least one child.
- 4. The record did not include the birth date of at least one child.
- 5. The record did not include the assigned group.
- 6. The record did not include the child's weekly schedule.
- 7. The record did not include the time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.
- 8. The original attendance record was not kept at the program for a period of one year.

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

Corrective Action Plan Due: 04/11/2024

Domain: 05 Health & Safety

Rule: 5101:2-12-16 Emergency Drills

<u>Code</u>: The program is required to complete fire drills, weather drills, and emergency/lockdown drills appropriately.

<u>Finding</u>: During the inspection, it was determined that the required drills were not completed for item number(s) 2 below:

- 1. Monthly fire drills.
- 2. Monthly weather emergency drills (March through September).
- 3. Emergency/lockdown drills in each quarter of the calendar year.

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

Corrective Action Plan Due: 04/11/2024

#### **Domain: 08 Staff Files**

Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements

Code: The program staff is required to have educational verification on file at the program.

<u>Finding</u>: 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 number(s) 1 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: 04/11/2024

**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. Additionally, the training must be completed before they are permitted to have sole responsibility of children.

<u>Finding</u>: 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(s) 4below:

- 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: 04/11/2024

#### **Domain: 08 Staff Files**

Rule: 5101:2-12-07 Administrator Qualifications

<u>Code</u>: The program administrator is required to complete the rules course reivew within the defined time

period.

<u>Finding</u>: During the inspection, it was determined that the administrator had not completed the required rules review course provided by this Department for program administrators within the time period defined in this rule. 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: 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) 1 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: 04/11/2024

### **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          | Compliant   |  |
| Requirements                     |             |  |
|                                  |             |  |
| Rule                             | Status      | Documenting Statement(s), If applicable    |
| Rule: 5101:2-12-04 Building      | Compliant   | Documenting Statement: A copy of the       |
| Department Inspection            |             | certificate of occupancy was available on- |
|                                  |             | site for review.                           |
|                                  |             |  |
|                                  | <del></del> |  |
| Rule                             | Status      | Documenting Statement(s), If applicable    |

|                                     | _         |  |
|-------------------------------------|-----------|--|
| Rule: 5101:2-12-04 Fire Inspection  | Compliant | Documenting Statement: Please Note:          |
|                                     |           | Documentation of a fire inspection           |
|                                     |           | without any uncorrected violations must      |
|                                     |           | be secured for the program. Secure a         |
|                                     |           | new fire inspection by October 25, 2024.     |
| Pulse 5104-2-12-04 Sine Insurantian | Camadiant | Decrease which a Charles were Albhan and the |
| Rule: 5101:2-12-04 Fire Inspection  | Compliant | Documenting Statement: Although the          |
|                                     |           | program had documentation of a current       |
|                                     |           | fire inspection without any uncorrected      |
|                                     |           | violations at the time of the licensing      |
|                                     |           | inspection, the program did not have the     |
|                                     |           | fire inspection completed within 12          |
|                                     |           | months from the date of the last fire        |
|                                     |           | inspection without any uncorrected           |
|                                     |           | violations. Please ensure that fire          |
|                                     |           | inspections are completed in accordance      |
|                                     |           | with the rule requirements.                  |
|                                     |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable      |
| Rule: 5101:2-12-04 Food Service     | Compliant | Documenting Statement: During the            |
| Requirements                        | '         | inspection, it was determined the            |
|                                     |           | program had documentation they had           |
|                                     |           | applied and paid for the renewal of the      |
|                                     |           | annual food service license. Please be       |
|                                     |           | reminded to post the new food service        |
|                                     |           | license once it has been received from the   |
|                                     |           | health department.                           |
|                                     |           |  |
|                                     |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable      |
| Rule: 5101:2-12-07 Administrator    | Compliant | Documenting Statement: The                   |
| Responsibilities/Requirements       |           | administrator's posted hours of              |
|                                     |           | availability reflected an appropriate        |
|                                     |           | schedule meeting rule compliance.            |
|                                     |           |  |
| 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 Medical Statement      | Compliant |  |
|                                     |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable      |
| 5101:2-12-10 Professional           | Compliant |  |
| Development Requirements            |           |  |
|                                     |           |  |

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|-------------------------------------|-----------|---|
| Rule                                | Status    | Documenting Statement(s), If applicable     |
| 5101:2-12-11 Indoor Space           | Compliant |   |
| Requirements                        |           |   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable     |
| Rule: 5101:2-12-11 Outdoor Space    | Compliant | Documenting Statement: The outdoor          |
| Requirements                        |           | play area is separated from traffic and     |
|                                     |           | other hazards by a fence.                   |
|                                     |           |   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable     |
| 5101:2-12-11 Outdoor Play Equipment | Compliant |   |
|                                     |           |   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable     |
| 5101:2-12-12 Safe Equipment         | Compliant |   |
|                                     |           |   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable     |
| 5101:2-12-12 Safe Environment       | Compliant |   |
|                                     |           |   |
|                                     |           |   |
| Rule                                | 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 |   |
| Requirements                        |           |   |
|                                     | <u> </u>  |   |
| Rule                                | Status    | Documenting Statement(s), If applicable     |
| 5101:2-12-13 Smoke Free             | Compliant |   |
| Environment                         | '         |   |
| L                                   | ı         |   |
| Rule                                | Status    | Documenting Statement(s), If applicable     |
| 5101:2-12-15 Child Medical and      | Compliant | ,   |
| Enrollment Records                  | F 200     |   |
|                                     | l         |   |
| Rule                                | Status    | Documenting Statement(s), If applicable     |
| Rule: 5101:2-12-15 Medical/Physical | Compliant | Documenting Statement: At the time of       |
| Care Plans                          | Compilant | the inspection, there were no children      |
| Care Flairs                         |           | · · · · · · · · · · · · · · · · · · ·       |
|                                     |           | currently enrolled who had health           |
|                                     |           | conditions.                                 |
|                                     |           |   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable     |
| 5101:2-12-16 Medical, Dental, and   | Compliant |   |
| General Emergency Plan              |           |   |
|                                     |           |   |

| Dula                            | Chahara     | Decree with City of the In-             |
|---------------------------------|-------------|---|
| Rule                            | Status      | Documenting Statement(s), If applicable |
| 5101:2-12-16 First Aid/Standard | Compliant   |   |
| Precautions                     |             |   |
|                                 |             |   |
| Rule                            | Status      | Documenting Statement(s), If applicable |
| 5101:2-12-16 Management of      | Compliant   |   |
| Communicable Disease            |             |   |
|                                 |             |   |
| Rule                            | Status      | Documenting Statement(s), If applicable |
| 5101:2-12-16 Incident/Injury    | Compliant   |   |
| Reporting                       |             |   |
|                                 |             |   |
| Rule                            | Status      | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Schedule     | Compliant   | (-),                                    |
| STOTIL IL II Bany sonicadio     | Compilation |   |
|                                 | l           |   |
| Rule                            | Status      | Documenting Statement(s), If applicable |
| 5101:2-12-17 Materials and      | Compliant   | 5 - A-7, -FF                            |
| Equipment                       |             |   |
| 4~.b                            |             |   |
| Rule                            | Status      | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Outdoor Play | Compliant   | bocumenting statement(s), if applicable |
| 3101.2-12-17 Daily Outdoor Play | Compilant   |   |
|                                 |             | I                                       |
| Rule                            | Status      | Documenting Statement(s), If applicable |
| 5101:2-12-18 License Capacity   | Compliant   | Documenting Statement(s), if applicable |
| 3101.2-12-16 License Capacity   | Compilant   |   |
|                                 |             | I                                       |
| Rule                            | Status      | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 Ratio        | Compliant   | Documenting Statement: The Appendix A   |
| Naie: 3101.2-12-18 Natio        | Compilant   | "Staff/Child Ratios, Age Grouping and   |
|                                 |             | Maximum Group Size" was posted in a     |
|                                 |             | · · · · · · · · · · · · · · · · · · ·   |
|                                 |             | noticeable area at the program as       |
|                                 |             | required.                               |
| D. L. 5404 0 40 40 5 11         | 0 11 .      |   |
| 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   |   |
|                                 |             |   |
|                                 |             |   |
| Rule                            | Status      | Documenting Statement(s), If applicable |
| 5101:2-12-19 Supervision        | Compliant   |   |
|                                 |             |   |
|                                 |             |   |
| Rule                            | Status      | Documenting Statement(s), If applicable |
|                                 |             |   |

| 5101:2-12-19 Child Guidance                | Compliant    |   |
|--|--------------|---|
|  |              |   |
| Rule                                       | Status       | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-20 Cots and Napping        | Compliant    | Documenting Statement: The rest area had adequate lighting, which allowed for the visual supervision of children. |
| Rule: 5101:2-12-20 Cots and Napping        | Compliant    | Documenting Statement: Cots were  |
|  | ·            | placed appropriately and safely during nap time.  |
| Rule                                       | Status       | Documenting Statement(s), If applicable   |
| 5101:2-12-22 Meal and Snack                | Compliant    | Documenting statement(s), it applicable   |
| Requirements                               | Compilant    |   |
|  |              |   |
| 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<br>Handling/Storage | Compliant    |   |
|  | <del>-</del> |   |
| Rule                                       | Status       | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-25 Medication              | Compliant    | Documenting Statement: The program's  |
| Administration                             |              | policy was not to administer medication.  |
|  |              |   |
| Rule                                       | Status       | Documenting Statement(s), If applicable   |
| 5101:2-12-16 Written Disaster Plan         | Compliant    |   |
|  | ,            |   |