



## 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 Details			
Program Name EARLY ACHIEVERS ENRICHMENT CENTER	Program Number 000000300624	Program Type Child Care Center	
Address 25000 Euclid Ave West Annex Euclid OH 44117		County CUYAHOGA	
Building Approval Date 07/10/2014	Use Group/Code E	Occupancy Limit 80	Maximum Under 2 ½
Fire Inspection Approval Date 05/16/2017	Food Service Risk Level Level III		

Inspection Information		
Inspection Type Follow-up	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 05/31/2023	Begin Time 9:15 AM	End Time 3:15 PM
Inspection Date 05/31/2023	Begin Time 2:00 PM	End Time 3:00 PM
Inspection Date 06/01/2023	Begin Time 9:00 AM	End Time 11:30 AM
Reviewer: DIANE TRACZYK		
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Summary of Findings				
No. Rules Verified 58	No. Rules with Non-compliances 18	No. Serious Risk 1	No. Moderate Risk 4	No. Low Risk 27

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)		5	0	5
Young Toddler		2	0	2



<b>Total Under 2 ½ Years</b>	22	7	0	7
Older Toddler		2	0	2
Preschool		18	0	18
School Age		16	0	16
<b>Total Capacity/Enrollment</b>	35	36	0	43

<b>Staff-Child Ratios at the Time of Inspection</b>			
<b>Group</b>	<b>Age Group/Range</b>	<b>Ratio Observed</b>	<b>Comment</b>
Infant	0 to < 12 months	1 to 1	2nd
Infant	0 to < 12 months	1 to 1	1st
Toddler	18 months to < 30 months	1 to 4	1st
Toddler	18 months to < 30 months	1 to 4	3rd - lunch
Preschool	3 years to < 4 years	1 to 10	2nd - nap
Preschool	3 years to < 4 years	1 to 11	1st
School-Age	School-Age to < 11 years	0 to 10	1st - CCSM was not in classroom with the children when inspection started
School-Age	School-Age to < 11 years	1 to 10	2nd outside

**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.*

<b>Serious Risk Non-Compliances</b>
<p><b>Domain: 08 Staff Files</b></p> <p><u>Rule:</u> 5101:2-12-09 Background Check Requirements</p> <p><u>Code:</u> The program is required to refrain from employing an individual who is not eligible to be employed in child care.</p> <p><u>Finding:</u> During the inspection, it was determined that an owner, owner's representative, administrator, employee or child care staff member, listed on the Employee Record Chart, was not eligible to be employed as noted in number 1 below:</p> <ol style="list-style-type: none"> <li>1. The individual had a JFS 01176 "Program Notification of Background Check Review for Child Care" on file stating the individual was not eligible for employment and the program allowed the individual to remain onsite, near children and off-site on a field trip with the children.</li> <li>2. The JFS 01178 "Request for Review of Background Check Decision for Child Care" had been submitted for the individual and the program allowed the individual to be on-site during the review by ODJFS.</li> </ol>



The individual must be immediately released from the program. Submit the program's corrective action plan, which includes a statement the individual is no longer employed or a copy of the updated JFS 01176, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/06/2023

### Moderate Risk Non-Compliances

#### Domain: 01 Ratio & Supervision

Rule: 5101:2-12-19 Supervision

Code: The program staff is required to supervise children in their assigned group by sight and hearing. Supervision includes being near enough to respond and reach children immediately and protecting them from harm.

Finding: During the inspection, it was determined that children were left unattended while inside the program as noted in numbers 2 & 3 below:

1. Child(ren) were left unattended once.
2. The group of children was left unattended more than once in the school-age room.
3. A child in the toddler room left the group and was unattended in the restroom.
4. Child care staff were using a baby monitor to supervise children.
5. Child care staff were using a walkie talkie to supervise children.
6. Child care staff were using mirrors to view children in another room.
7. Child care staff were using a video camera instead of physically being present in the room.
8. Other [ ].

Children must be supervised and within sight and hearing of a child care staff member at all times. 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: 07/01/2023

#### Domain: 06 Program Information

Rule: 5101:2-12-14 Transportation and Field Trip Procedures

Code: The program is required to have an additional adult accompany on the trip.

Finding: During the inspection, it was determined that an additional adult did not accompany the school-age group of children and Child Care Staff Member on the vehicle used and/or walking during routine and field trips.



To ensure the safety of children, an additional adult must be present on all trips for every five infants; any combination of seven or more toddlers, preschool and school children; and every ten school children if the group includes only school children on a walking trip. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/01/2023

**Domain: 08 Staff Files**

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

Code: The program is required to have all staff request background checks as required.

Finding: In review of the staff records, it was determined that background checks were not requested for the person(s) listed on the Employee Record Chart as noted in number 1 below:

1. Submitting the request for a background check for child care in the OPR.
2. Submitting fingerprints electronically according to the process established by BCI.

Submit the program's corrective action plan, which includes a copy of the JFS 01176, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/01/2023

**Domain: 08 Staff Files**

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

Code: The program is required to have documentation from ODJFS, indicating the individual is eligible to be employed in child care, on file before allowing the staff to have sole responsibility of children.

Finding: During the inspection, it was determined that child care staff member(s) had sole responsibility of children in the school-age group and neither a preliminary approval nor the JFS 01176 "Program Notification of Background Check Review for Child Care" were on file as required. Submit the program's corrective action plan, which includes a copy of the JFS 01176 or a statement that the child care staff member(s) no longer have sole responsibility of children, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/01/2023



### Low Risk Non-Compliances

#### Domain: 00 License & Approvals

Rule: 5101:2-12-02 Current Information

Code: The rule requires the program to request an administrator amendment, and submit qualifications for a new administrator, within thirty days of the change.

Finding: During the inspection, it was determined that a change of administrator had been made and the owner or administrator had failed to provide notification of this change to the Department and/or submit qualifications for the new administrator within 30 days. A license is only valid for the licensee, administrator, address and license capacity designated on the license. Technical assistance was provided, and as discussed, submit the request to amend the license and any required documentation, if applicable, through the licensing system, OCLQS.

#### Domain: 00 License & Approvals

Rule: 5101:2-12-02 Current Information

Code: The rule requires the program to keep the list of individuals who are legal business owners current in OCLQS.

Finding: During the inspection, it was determined an individual listed as a legal business owner, as defined in section 5104.03 of the Revised Code, had changed and the program had not submitted the information in the Ohio Child Licensing and Quality System (OCLQS) within thirty days of the change. Log into OCLQS to complete and submit the updated information. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/01/2023

#### Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records



Code: 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.

Finding: 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 1 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: 07/01/2023

### **Domain: 01 Ratio & Supervision**

Rule: 5101:2-12-18 Attendance Records

Code: 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.

Finding: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number 2 below:

1. No attendance record was being maintained.
2. The attendance record was not being consistently completed.
3. The original attendance documentation was not kept at the program for a period of one year.

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: 07/01/2023

### **Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-13 Handwashing Requirements

Code: The program is required to have all staff wash their hands as outlined in rule.



Finding: During the inspection, it was determined that at least one staff member with the infant group did not wash his or her hands at the time listed in number 5 below, as required in rule.

1. Upon arrival for the day.
2. Prior to departure.
3. Upon entry into a classroom.
4. After toileting or assisting a child with toileting.
5. After each diaper change or pull-up change.
6. After contact with bodily fluids or cleaning up spills or objects contaminated with bodily fluids.
7. After cleaning or sanitizing or using any chemical products.
8. After handling pets, pet cages or other pet objects that have come in contact with the pet.
9. Before eating, serving or preparing food or bottles or feeding a child.
10. Before and after completing a medical procedure or administering medication.
11. When visibly soiled (must use soap and water).
12. Other [ ].

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

Corrective Action Plan Due: 07/01/2023

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-12 Safe Equipment

Code: The program is required to use straps on equipment that is manufactured with straps.

Finding: During the inspection, it was determined that the following equipment was not used according to manufacturer's guidelines as noted in number 2 below:

1. The straps were missing on the [ ].
2. The straps were attached, but were not used on the changing pad and bouncy seat.
3. The straps were attached and were used, but were not used in a safe manner.
4. Manufacturer's guidelines for the [ ] were not followed in that [ ].

Provide staff training. Submit the program's corrective action plan, which includes a statement that training has been provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/01/2023



**Domain: 02 Safe & Sanitary Environment**

**Rule:** 5101:2-12-12 Safe Equipment

**Code:** The program is required to provide equipment that is safe and hazard free.

**Finding:** During the inspection, equipment was determined to be unsafe or hazardous to children and in need of repair as noted in number 7 below:

1. The equipment had sharp points or corners;
2. The equipment had splinters;
3. The equipment had protruding nails;
4. The equipment had loose or rusty parts;
5. The equipment had paint which contains lead or other poisonous materials;
6. The equipment had hazardous features;
7. Other: the cover plate for an electrical outlet was cracked in the school-age room.

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

Corrective Action Plan Due: 07/01/2023

**Domain: 02 Safe & Sanitary Environment**

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

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

**Finding:** During the inspection, it was determined that unsanitary conditions, as noted in number 6 below, were in the girls & boys 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: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-13 Handwashing Requirements

Code: The program is required to have all children wash their hands as outlined in rule.

Finding: During the inspection, it was determined that at least one child in the infant group did not have his or her hands washed at the time listed in number 3 below, as required in rule.

1. Upon arrival.
2. Prior to departure.
3. After toileting/diaper change.
4. After contact with bodily fluids.
5. After returning from outdoor play.
6. After handling pets, pet cages, or other pet objects that have come in contact with the pet, before moving on to another activity.
7. Before eating or assisting with food preparation.
8. After water activities.
9. When visibly soiled (must use soap and water)
10. Other [ ].

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

Corrective Action Plan Due: 07/01/2023

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to have all surge protectors and outlets covered.

Finding: During the inspection, it was determined that 2 surge protectors/outlets did not have childproof receptacle covers. The program must have safety covers on all electrical outlets, including power strips and surge protectors, which are within the reach of the children. 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: 05 Health & Safety**

Rule: 5101:2-12-22 Fluid Milk Requirements

Code: The program is required to serve age-appropriate fluid milk or obtain written documentation when serving substitutions for fluid milk.

Finding: During the inspection, it was determined that required documentation for substitutions for fluid milk was not on file as noted in numbers 3 & 5 below:

1. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when infants up to 12 months of age are served anything other than formula or breast milk.
2. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when infants and toddlers 12 months of age up to 24 months of age are served anything other than unflavored whole homogenized vitamin D fortified cow's milk, breast milk, or non-cow milk substitution that is nutritionally equivalent to milk.
3. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when toddlers and children 24 months of age and older are served anything other than unflavored one per cent milk that is vitamin A and D fortified, unflavored fat free or skim milk that is vitamin A and D fortified, or non-cow milk substitutions that are nutritionally equivalent to milk.
4. Written parental consent for non-cow milk substitutions that are nutritionally equivalent to milk for children 12 months of age and older.
5. The program did not have the type of milk on-site to ensure that all children were served age-appropriate fluid milk.

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: 05 Health & Safety**

Rule: 5101:2-12-16 Incident/Injury Reporting

Code: The program is required to submit notification of a serious incident in OCLQS by the next business day.

Finding: During the inspection, it was determined that a Serious Incident was not reported in the Ohio Child Licensing and Quality System (OCLQS), as required, by the program administrator or designee for an incident(s) as listed in numbers 1 & 4 below:

1. An incident, injury or illness that required professional medical consultation or treatment.
2. An unusual or unexpected incident which jeopardizes the safety of a child, child care staff member or employee of the program.



3. An incident defined as a serious risk non-compliance in appendix A to rule 5101:2-12-03 of the Administrative Code.

4. The program did not submit the report in OCLQS by the next business day as required by rule.

Submit the program's corrective action plan, which includes a statement that the program administrator or designee has completed the Serious Incident Report in OCLQS, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/01/2023

**Domain: 05 Health & Safety**

Rule: 5101:2-12-16 Emergency Drills

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

Finding: During the inspection, it was determined that the required drills were not completed for item numbers 1, 2 & 3 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: 07/01/2023

**Domain: 06 Program Information**

Rule: 5101:2-12-14 Transportation and Field Trip Procedures

Code: The program is required to have identification, including the program's name, address, and a contact phone number, on children while on trips.

Finding: During the inspection, it was determined that the children were not provided with any, or complete, program identification, while on a field trip and/or routine trip. The identification must include the program's name, address, and a telephone number to contact in the event the child becomes lost. 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: 06 Program Information**

Rule: 5101:2-12-14 Transportation and Field Trip Procedures

Code: The program is required to obtain written parental permission before leaving the premises.

Finding: During the inspection, it was determined that written parental permission was not secured for field trips and/or routine trips off the premises or out of the areas approved for child care, as required. 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

Code: The program is required to maintain a staff schedule with coverage of the required health trainings.

Finding: In review of the staff records, it was determined the program did not have at least one child care staff member present/scheduled to be present during all hours of operation with currently valid documentation for the training(s) listed in number 9 below:

1. First Aid – child care staff members scheduled during the hours of [ ] and [ ] had expired training
2. First Aid – child care staff members scheduled during the hours of [ ] and [ ] did not have verification of completion of First Aid
3. First Aid – trained child care staff member was not present in each building used by the program.
4. CPR – child care staff members scheduled during the hours of [ ] and [ ] had expired training
5. CPR – child care staff scheduled during the hours of [ ] and [ ] had did not have verification of completion of CPR
6. CPR – trained child care staff member was not present in each building used by children
7. CPR – training taken by staff was not appropriate for all ages and developmental levels of the children in care
8. CPR - audiovisual or electronic media training taken by staff did not include an in-person component of the training
9. Communicable Disease – child care staff members scheduled during the hours of 6:00 and 8:30 had expired training
10. Communicable Disease – child care staff scheduled during the hours of [ ] and [ ] had not taken Communicable Disease training



11. Communicable Disease – trained child care staff member was not present in each building used by the program
12. Child Abuse – child care staff members scheduled during the hours of [ ] and [ ] had expired training
13. Child Abuse – child care staff scheduled during the hours of [ ] and [ ] had not taken Child Abuse training
14. Child Abuse – trained child care staff was not in each building used by the program

Refer to the Employee Record Chart for specific details. Submit the program's corrective action plan, which includes verification of complete coverage for any training listed, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/01/2023

**Domain: 08 Staff Files**

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

Code: 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.

Finding: 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 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: 07/01/2023

**Domain: 08 Staff Files**

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

Code: The program is required to have staff complete the online staff orientation training.



Finding: 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: 07/01/2023

**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 or in the Ohio Professional Registry.

Finding: In review of the staff records, it was determined that verification of a high school education was not on file nor verified in the Ohio Professional Registry for Child Care Staff Member(s) listed on the Employee Record Chart, as required. Submit the program's corrective action plan, which includes a copy of the verification of a high school education, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/01/2023

**Domain: 08 Staff Files**

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to be completed and on file at the program.

Finding: In review of the staff records, it was determined a completed medical examination statement for the employee(s) listed on the Employee Record Chart was not on file, as required by this rule. Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/01/2023



**Domain: 08 Staff Files**

**Rule:** 5101:2-12-08 Medical Statement

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

**Finding:** 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 numbers 1, 2, 3 & 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: 07/01/2023

**Domain: 08 Staff Files**

**Rule:** 5101:2-12-07 Administrator Responsibilities/Requirements

**Code:** The program administrator is required to maintain current employee records in the Ohio Professional Registry.

**Finding:** During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in numbers 5, 6 & 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: 07/01/2023

**Domain: 08 Staff Files**

Rule: 5101:2-12-07 Administrator Responsibilities/Requirements

Code: The program is required to maintain documentation onsite at the program for each employee.

Finding: During the inspection, it was determined that required staff record documentation was not on file at the program, and was not verified in the OPR, for the employee(s) listed on the Employee Record Chart. The documentation was able to be verified as noted in number 1 below:

1. The information had been verified at the previous inspection.
2. The information was provided from another location during the inspection.

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

Corrective Action Plan Due: 07/01/2023

**Domain: 08 Staff Files**

Rule: 5101:2-12-08 Medical Statement

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





Finding: 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: 07/01/2023

**Domain: 08 Staff Files**

Rule: 5101:2-12-07 Administrator Responsibilities/Requirements

Code: The program administrator is required to have hours of availability to meet with parents and have the hours posted in a noticeable location.

Finding: During the inspection, it was determined that the administrator did not have the accurate scheduled hours of availability to meet with parents posted, or the hours of availability were not posted in a noticeable location. 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" .

Finding: 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 4 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: 09 Children's Files**

Rule: 5101:2-12-15 Child Medical and Enrollment Records

Code: The program is required to have a completed medical on file at the program for each child enrolled.

Finding: In review of 25% of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in number 8 below:

1. No medical was on file for at least one child
2. Medical(s) on file was not updated every 13 months
3. Medical(s) were missing child's name and date of birth
4. Medical(s) were missing the date of the medical examination
5. The date of the exam was more than 13 months prior to the date the form was signed.
6. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care
7. Medical(s) were missing the signature, business address and telephone number of the physician, physician's assistant(PA), advance practice nurse (APN) or certified nurse practitioner (CNP) who examined the child
8. Medical(s) were missing a record of immunizations the child has had specifying month, day and year
9. Medical(s) were missing a statement from the physician, PA, APN, or CNP that the child has been immunized or is in the process of being immunized against the diseases required by division 5104.014 of the Revised Code and found in appendix A to this rule
10. Medical(s) were missing a statement from the child's parent or guardian that he or she has declined to have the child immunized against the disease for reasons of conscience, including religious convictions
11. Other [ ]

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



Corrective Action Plan Due: 07/01/2023

**Rules In-Compliance/Not Verified**

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-02 License Posted	Compliant	Documenting Statement: The license was in a location visible to parents as required.
Rule: 5101:2-12-03 Inspection Requirements	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding compliance inspections and complaint investigations were discussed.
Rule: 5101:2-12-04 Building Department Inspection	Compliant	
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 6/23/23.
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 Requirements	Compliant	Documenting Statement: The food service license was observed posted. Following is the audit number and date of expiration: AAXD-CQ4N5T & 3/1/24.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-05 Denial, Revocation and Suspension	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-07 Administrator Qualifications	Compliant	Documenting Statement: The administrator has completed the rules review course.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Written Program Policies and Procedures	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-10 Professional Development Requirements	Compliant	Documenting Statement: At the time of the inspection, all child care staff members had completed the required amount of professional development training.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Separation of Children Under 2 1/2 Years	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Space Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable



Rule: 5101:2-12-11 Outdoor Play Equipment	Compliant	Documenting Statement: Outdoor equipment was viewed to be safe and free of rust, sharp points, and other hazards.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-11 Outdoor Play Fall Zones	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-13 Smoke Free Environment	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-14 Transportation - Driver Requirements	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-14 Transportation - Vehicle Requirements	Compliant	Documenting Statement: An annual safety check of the vehicle, using the JFS 01230 "Vehicle Inspection Report For Child Care Centers" form, was verified and dated 2/15/23 for the Chevy G3500 with VIN ending in 6477 that was borrowed from another licensed child care center.
Rule: 5101:2-12-14 Transportation - Vehicle Requirements	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding vehicles used for transporting children were discussed.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-15 Medical/Physical Care Plans	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general emergencies were discussed.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-16 First Aid/Standard Precautions	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of Communicable Disease	Compliant	
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
Rule: 5101:2-12-17 Materials and Equipment	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding materials and equipment were discussed.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-17 Daily Outdoor Play	Compliant	Documenting Statement: Outdoor play was observed for the school-age group.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 License Capacity	Compliant	Documenting Statement: The program was operating within their license capacity limits.
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
Rule: 5101:2-12-18 Group Size	Compliant	Documenting Statement: The group sizes observed on the day of the inspection were in compliance.
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	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cribs	Compliant	
5101:2-12-22 Meal and Snack Requirements	Compliant	
5101:2-12-22 Safe Food Handling/Storage	Compliant	
Rule: 5101:2-12-23 Infant Daily Care	Compliant	Documenting Statement: Appropriate daily written records for all infants were viewed.
5101:2-12-23 Infant Bottle and Food Preparation	Compliant	
5101:2-12-23 Diapering and Toilet Training	Compliant	
5101:2-12-25 Medication Administration	Compliant	