

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 <u>http://jfs.ohio.gov/CDC/childcare.stm</u>. 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 | |
| SECOND BAPTIST CHURCH PRESCHOOL | 00000301779 | | Child Care Center | |
| CENTER | | | | |
| Address | | | County | |
| 1510 MAIN AVE SW WARREN | | | TRUMBULL | |
| ОН | | | | |
| 44483 | | | | |
| | | | | |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ | |
| 05/01/1993 | A-4 | 147 | | |
| Fire Inspection Approval Date | Food Service Risk Level | | | |
| 12/12/2017 | Level III | | | |

| | Inspection Information | | | | |
|---------------------|--------------------------------|------------------|-------------------|--------------|--|
| Inspection Type | Inspection S | соре | Inspection Notice | | |
| Annual | Full | | Unannounced | | |
| Inspection Date | Begin Time | | End Time | | |
| 04/10/2024 9:33 AM | | | 10:00 AM | | |
| Reviewer: | | | | | |
| REBECCA KOTEWICZ | | | | | |
| Summary of Findings | | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk | |
| 12 | 1 | 0 | 1 | 0 | |

| 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 | | 4 | 0 | 4 | |
| Total Under 2 ½ Years | 4 | 4 | 0 | 4 | |
| Older Toddler | | 0 | 0 | 0 | |
| Preschool | | 5 | 0 | 5 | |
| School Age | | 0 | 0 | 0 | |
| Total Capacity/Enrollment | 50 | 5 | 0 | 9 | |

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



Department of Education Department of Job and Family Services

| Toddlers | 18 months to < 30 months | 2 to 5 | All children combined at arrival |
|----------|--------------------------|--------|--|
| Toddlers | 18 months to < 30 months | 1 to 3 | |
| PS | 3 years to < 4 years | 1 to 3 | |

Summary of Non-Compliances

If a program disagrees with a licensing finding, the program may request a review of the finding(s). Ohio Administrative Code 5101:2-12-03 and 5101:2-13-03 detail the process for submitting a request for review. The request for review must be submitted within seven business days from the receipt of the licensing report. In addition, if the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited.

| | | Serious | Risk | Non-Compliances | |
|--|--|---------|------|-----------------|--|
|--|--|---------|------|-----------------|--|

No Serious Risk Non-Compliances were observed during this inspection

Moderate Risk Non-Compliances

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Space Requirements

<u>Code</u>: The program is required to have an outdoor play space free from immediate risk.

<u>Finding</u>: During the inspection, it was determined that an area was used which was not protected from traffic and other hazards by a continuous fence in good condition, or natural barrier, that ensured children were not able to leave the playground area. The fence or natural barrier was determined to present an immediate risk for a child to be able to leave the playground as noted in number [] below:

- 1. The fence, natural barrier, or combination of fence and natural barrier was not continuous.
- 2. The fencing had missing slat boards through which children could leave the playground.
- 3. The gate was broken and did not close.
- 4. The latch on the gate was broken.
- 5. The gate had no latch.
- 6. The fencing was broken.
- 7. The latch was easily opened by children on the playground.



8. The latch was not engaged to prevent children from opening the gate.

9. The portable fencing approved for use by the Department was not being used.

10. Other there is no fence or natural barrier

Discontinue use of the playground and provide a space for outdoor play which is well defined by a continuous fence or natural barrier and protected from other hazards. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/12/2024

| Low | Risk | Non-Compliances | ; |
|-----|------|-----------------|---|
| | | | |

No Low Risk Non-Compliances were observed during this inspection

Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(s), If applicable |
|-----------------------------|--------------|---|
| 5101:2-12-02 License Posted | Not Verified | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |



Requirements

Department of Education Department of Job and Family Services

| 5101:2-12-02 Current Information | Not Verified | |
|---|------------------------|---|
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-03 Inspection Requirements | Not Verified | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Building Department Inspection | Not Verified | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Fire Inspection | Not Verified | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Food Service Requirements | Not Verified | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator Qualifications | Not Verified | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator Responsibilities/Requirements | Not Verified | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Written Program Policies and Procedures | Not Verified | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Medical Statement | Not Verified | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Orientation Training & Whistle Blower Protection | Not Verified | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-09 Background Check Requirements | Compliant | Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed. |
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| Rule 5101:2-12-10 Health Training | Status Not Verified | Documenting Statement(s), If applicable |



| Rule | Status | Documenting Statement(s), If applicable |
|--------------------------------------|--------------|--|
| 5101:2-12-10 Professional | Not Verified | |
| Development Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Indoor Space | Not Verified | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Separation of Children | Not Verified | |
| Under 2 1/2 Years | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Equipment | Not Verified | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Fall Zones | Not Verified | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Equipment | Not Verified | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Environment | Not Verified | |
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| D. J. | Chature | Descriptions (testions and (a)) if an all as his |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Sanitary Equipment and | Not Verified | |
| Environment | | |
| | . | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Handwashing | Not Verified | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Smoke Free | Not Verified | |
| Environment | | |
| | - | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-15 Child Medical and | Not Verified | |
| Enrollment Records | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-15 Medical/Physical Care | Not Verified | |
| Plans | 1 | |



Department of Education Department of Job and Family Services

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|-----------------------------------|--------------|---|
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Medical, Dental, and | Not Verified | |
| General Emergency Plan | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Emergency Drills | Not Verified | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 First Aid/Standard | Not Verified | |
| Precautions | | |
| L | 1 | I |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Management of | Not Verified | |
| Communicable Disease | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Incident/Injury | Not Verified | bocumenting statement(s), it applicable |
| | | |
| Reporting | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Schedule | Not Verified | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Materials and | Not Verified | |
| Equipment | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Outdoor Play | Not Verified | |
| | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 License Capacity | Not Verified | |
| | | |
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| 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. |
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| 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. |
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| L | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| NAIC | 510105 | bocumenting statement(s), it applicable |



| 5101:2-12-18 Attendance Records | Not Verified | |
|--------------------------------------|--------------|---|
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| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-19 Supervision | Compliant | Documenting Statement: Child Care Staff |
| | | Members were supervising the children |
| | | and were able to intervene as needed. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Child Guidance | Not Verified | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-20 Cots and Napping | Not Verified | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-20 Cribs | Not Verified | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Meal and Snack | Not Verified | |
| Requirements | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Fluid Milk Requirements | Not Verified | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Safe Food | Not Verified | |
| Handling/Storage | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Infant Daily Care | Not Verified | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Infant Bottle and Food | Not Verified | |
| Preparation | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Diapering and Toilet | Not Verified | |
| Training | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-25 Medication | Not Verified | Documenting statement(s), it applicable |
| Administration | | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-12-08 Child Care Staff Member | Not Verified | |
| Educational Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Written Disaster Plan | Not Verified | |
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