



## 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<br>PIONEER PRESCHOOL           | Program Number<br>000000302304    | Program Type<br>Child Care Center |                   |
| Address<br>35100 SOLON RD SOLON<br>OH 44139 |                                   | County<br>CUYAHOGA                |                   |
| Building Approval Date<br>02/25/1985        | Use Group/Code                    | Occupancy Limit                   | Maximum Under 2 ½ |
| Fire Inspection Approval Date<br>02/11/2022 | Food Service Risk Level<br>Exempt |                                   |                   |

| Inspection Information        |                          |                                  |
|-------------------------------|--------------------------|----------------------------------|
| Inspection Type<br>Annual     | Inspection Scope<br>Full | Inspection Notice<br>Unannounced |
| Inspection Date<br>02/23/2022 | Begin Time 9:00 AM       | End Time 12:02 PM                |
| Reviewer:<br>CYNTHIA PAYNE    |                          |                                  |

| Summary of Findings      |                                     |                       |                        |                   |
|--------------------------|-------------------------------------|-----------------------|------------------------|-------------------|
| No. Rules Verified<br>58 | No. Rules with Non-compliances<br>3 | No. Serious Risk<br>0 | No. Moderate Risk<br>0 | No. Low Risk<br>3 |

| 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          | 2         | 2     |
| <b>Total Under 2 ½ Years</b>                              | 12               | 0          | 2         | 2     |
| Older Toddler   |                  | 0          | 6         | 6     |
| Preschool   |                  | 0          | 32        | 32    |
| School Age  |                  | 0          | 0         | 0     |
| <b>Total Capacity/Enrollment</b>                          | 108              | 0          | 38        | 40    |

| Staff-Child Ratios at the Time of Inspection |                      |                |         |
|--|----------------------|----------------|---------|
| Group  | Age Group/Range      | Ratio Observed | Comment |
| 3's (T W TH)                                 | 3 years to < 4 years | 1 to 6         |         |



|                |                      |        |  |
|----------------|----------------------|--------|--|
| 3's (T W TH)   | 3 years to < 4 years | 1 to 6 |  |
| 3's (T W Th F) | 3 years to < 4 years | 1 to 5 |  |
| 3's (T W Th F) | 3 years to < 4 years | 1 to 5 |  |
| PK (T W Th F)  | 4 years to < 5 years | 1 to 8 |  |
| PK (T W Th F)  | 4 years to < 5 years | 1 to 8 |  |
| PK (M-F)       | 4 years to < 5 years | 1 to 7 |  |
| PK (M-F)       | 4 years to < 5 years | 1 to 7 |  |

**Summary of Non-Compliances**

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

**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: 5101:2-12-07 Administrator Qualifications

Code: The program is required to maintain a qualified administrator.

Finding: During the inspection, it was determined the program did not have a qualified administrator as noted in number(s) [ ] below:

1. There is no qualified administrator
2. The appointed administrator's CDA has expired
3. The appointed administrator's CPL no longer meets qualifications
4. Other: The center has not submitted an administrator amendment. The last administrator left in the summer and a new one was appointed but nothing submitted in OCLQS.

Submit additional documentation of education qualifications/experience as outlined in Appendix A of this rule, or a new individual must be appointed and documentation submitted. To name a new administrator, an administrator amendment must be submitted through the licensing system, OCLQS. Submit the program's corrective action plan, which includes documents to support qualifications for the newly requested administrator, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/26/2022

**Domain: 08 Staff Files**

Rule: 5101:2-12-10 Professional Development Requirements

Code: The program is required to ensure child care staff members, including substitutes used more than ninety days annually, obtain at least 6 hours of professional development each state fiscal year.

Finding: In review of the staff records, it was determined that at least one child care staff member did not meet the annual professional development requirement as noted in number 1 below:

1. The child care staff member(s) had not completed at least six hours of professional development.
2. Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.
3. Training topic did not meet the requirements listed in appendix A of this rule.
4. Documentation of training did not meet the requirements of this rule.
5. The substitute(s) had been used more than ninety days annually between July first and June thirtieth and had not completed at least six hours of professional development
6. Other [ ].

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



Corrective Action Plan Due: 03/25/2022

**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 number 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: 03/25/2022



| 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  | 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 Requirements                                | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-04 Building Department Inspection                         | Compliant |   |
| 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 2/11/2023. |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-04 Food Service Requirements                              | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-07 Administrator Responsibilities/Requirements            | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-07 Written Program Policies and Procedures          | Compliant | Documenting Statement: No changes have been made to the written policies and procedures since it was last approved by this Department.  |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements | Compliant | Documenting Statement: All Child Care Staff Members had verification of educational requirements on file at the program.  |
| Rule  | Status    | Documenting Statement(s), If applicable   |



|   |               |   |
|---|---------------|---|
| 5101:2-12-08 Orientation Training & Whistle Blower Protection | Compliant     |   |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>  |
| 5101:2-12-09 Background Check Requirements                    | Compliant     |   |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>  |
| Rule: 5101:2-12-10 Health Training Requirements               | Compliant     | Documenting Statement: The program had at least one Child Care Staff Member with currently valid training in First Aid, Management of Communicable Disease, CPR, and Child Abuse Prevention present and readily accessible during all hours of operation. |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>  |
| Rule: 5101:2-12-11 Indoor Space Requirements                  | Compliant     | Documenting Statement: The restrooms are used exclusively by the program.   |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>  |
| Rule: 5101:2-12-12 Safe Equipment                             | Compliant     | Documenting Statement: Equipment was observed to be in good condition.  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>  |
| Rule: 5101:2-12-12 Safe Environment                           | Compliant     | Documenting Statement: All electrical outlets were covered with safety receptacles.   |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>  |
| 5101:2-12-13 Sanitary Equipment and Environment               | Compliant     |   |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>  |
| Rule: 5101:2-12-13 Handwashing Requirements                   | Compliant     | Documenting Statement: Children were viewed washing their hands, as required by the rule.   |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>  |
| Rule: 5101:2-12-13 Smoke Free Environment                     | Compliant     | Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program.  |
| <b>Rule</b>   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>  |



| 5101:2-12-14 Transportation and Field Trip Procedures          | Compliant |   |
|--|-----------|---|
| Rule   | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-14 Transportation - Driver Requirements              | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-14 Transportation - Vehicle Requirements             | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-15 Child Medical and Enrollment Records        | Compliant | Documenting Statement: In review of 25% of the records, at the time of the inspection, children's medical statements were complete and on file, as required by the rule.                    |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-15 Medical/Physical Care Plans                 | Compliant | Documenting Statement: The program had current information on the medical status and the required treatment plan for the children with health conditions.                                   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan | Compliant | Documenting Statement: On the day of the inspection, the complete prescribed JFS 01242 "Medical, Dental, and General Emergency Plan For Child Care" were posted in the program as required. |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Emergency Drills                            | Compliant | Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.  |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 First Aid/Standard Precautions              | Compliant | Documenting Statement: During the inspection, the program had complete first aid kit available as required.   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-16 Management of Communicable Disease                | Compliant |   |



| Rule   | Status    | Documenting Statement(s), If applicable   |
|--|-----------|---|
| Rule: 5101:2-12-16 Incident/Injury Reporting | Compliant | Documenting Statement: The JFS 01299 "Incident/Injury Report For Child Care" forms reviewed during this inspection were complete as required. |
| Rule: 5101:2-12-16 Written Disaster Plan     | Compliant | Documenting Statement: The program's written disaster plan was reviewed during the inspection and met the requirements.                       |
| Rule: 5101:2-12-17 Daily Schedule            | Compliant | Documenting Statement: Daily schedules were observed posted.  |
| Rule: 5101:2-12-17 Materials and Equipment   | Compliant | Documenting Statement: Sufficient equipment was observed in all categories.   |
| Rule: 5101:2-12-18 License Capacity          | Compliant | Documenting Statement: The program was operating within their license capacity limits.  |
| 5101:2-12-18 Ratio                           | Compliant |   |
| 5101:2-12-18 Group Size                      | Compliant |   |
| 5101:2-12-18 Attendance Records              | Compliant |   |
| Rule: 5101:2-12-19 Supervision               | Compliant | Documenting Statement: Child Care Staff Members were supervising the children and were able to intervene as needed.                           |
| 5101:2-12-19 Child Guidance                  | Compliant |   |





| Rule  | Status    | Documenting Statement(s), If applicable   |
|---|-----------|---|
| 5101:2-12-21 Evening and Overnight Care                   | Compliant |   |
| Rule: 5101:2-12-23 Diapering and Toilet Training          | Compliant | Documenting Statement: Children who were toilet training used the classroom restroom.   |
| Rule: 5101:2-12-24 Swimming and Water Safety Requirements | Compliant |   |
| Rule: 5101:2-12-25 Medication Administration              | Compliant | Documenting Statement: The program's policy was to administer prescription medication only.   |
| Rule: 5101:2-12-25 Medication Administration              | Compliant | Documenting Statement: Medication was stored classroom on top shelf.  |
| Rule: 5101:2-12-25 Medication Administration              | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding administering medication, food supplements and medical foods were discussed. |