

Center Licensing Inspection Full Report

All licensed child care programs are inspected at least once each year. Non-compliances are documented and grouped as Serious, Moderate or Low risk violations. Documenting statements and supplemental information may be included in this report. Licensing inspection reports from the previous three years can be viewed on the child care website at http://jfs.ohio.gov/CDC/childcare.stm. This includes complaint investigation reports with substantiated allegations. For any other child care records, please contact the Child Care Help Desk at 1-877-302-2347, option 4.

| | Program Deta | ils | |
|--------------------------------|----------------------|-----------------|-------------------|
| Program Name | Program Number | | Program Type |
| LEXINGTON-BELL EARLY CHILDHOOD | 000000302871 | | Child Care Center |
| SERVICES | | | |
| Address | | | County |
| 7724 LEXINGTON CLEVELAND | | | CUYAHOGA |
| OH | | | |
| 44103 | | | |
| | | | |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ |
| | | | |
| Fire Inspection Approval Date | Food Service Risk Le | evel | |
| 05/07/2024 | Level III | | |

| Inspection Information | | | | | |
|------------------------|--------------------------------|------------------|-------------------|--------------|--|
| Inspection Type | Inspection So | cope | Inspection Notice | | |
| Annual | Full | | Unannounced | | |
| Inspection Date | Begin Time | | End Time | | |
| 01/23/2025 | 8:15 AM | 8:15 AM | | 12:05 PM | |
| Reviewer: | | | | | |
| PATRICIA REMINGTON | | | | | |
| Summary of Findings | | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk | |
| 56 | 3 | 0 | 1 | 2 | |

| 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 | | 2 | 0 | 2 |
| Total Under 2 ½ Years | 22 | 2 | 0 | 2 |
| Older Toddler | | 10 | 0 | 10 |
| Preschool | | 22 | 0 | 22 |
| School Age | | 0 | 30 | 30 |
| Total Capacity/Enrollment | 112 | 32 | 30 | 64 |

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



| School age | School-Age to < 11 years | 1 to 2 | |
|----------------------------|--------------------------|---------|-----------|
| Preschool 1 and 2 combined | 3 years to < 4 years | 1 to 7 | Breakfast |
| Preschool 1 and 2 combined | 3 years to < 4 years | 2 to 14 | |
| Toddlers | 18 months to < 30 months | 2 to 6 | Breakfast |
| Toddlers | 18 months to < 30 months | 2 to 7 | |

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 |
| No serious kisk Non-compilances were observed during this hispection |
| |
| |
| |
| |
| |

Moderate Risk Non-Compliances

Domain: 08 Staff Files

Rule: 5180:2-12-09 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: 02/22/2025

Low Risk Non-Compliances

Domain: 08 Staff Files

Rule: 5180:2-12-10 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) 4 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: 02/22/2025

Domain: 09 Children's Files

Rule: 5180:2-12-15 Medical/Physical Care Plans

<u>Code</u>: The program is required to maintain a complete JFS 01236 "Child Medical/Physical Care Plan for Child Care" on file for any child having a health condition.



<u>Finding</u>: In review of the children's records, it was determined that the JFS 01236 "Child Medical/Physical Care Plan for Child Care" did not meet the requirements of the rule as noted in number(s) 1 below:

- 1. The JFS 01236 had not been updated as needed and at least annually.
- 2. A separate JFS 01236 had not been used for each condition.
- 3. The program used an old version of the JFS 01236.

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

Corrective Action Plan Due: 02/22/2025

Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(s), If applicable |
|------------------------------------|-----------|---|
| 5180:2-12-16 Written Disaster Plan | Compliant | |
| | _ | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-02 License Posted | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-04 Building Department | Compliant | |
| Inspection | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-02 Current Information | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-03 Inspection | Compliant | |
| Requirements | 197 | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-04 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 5/7/25. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-04 Food Service | Compliant | Documenting Statement: The food service |
| Requirements | | license was observed posted. Following is |
| | | the audit number and date of expiration: |
| | | AANS-D327W 3/1/25. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-07 Administrator | Compliant | |
| Qualifications | 2 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-07 Administrator | Compliant | Documenting statement(s), if applicable |
| Responsibilities/Requirements | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-07 Written Program | Compliant | |
| Policies and Procedures | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-08 Medical Statement | Compliant | g control of the second of the |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-08 Child Care Staff Member | Compliant | |
| Educational Requirements | | |
| Rule | Ctatus | Desumenting Statement/s) If amiliable |
| 5180:2-12-08 Orientation Training & | Status Compliant | Documenting Statement(s), If applicable |
| Whistle Blower Protection | Compliant | |
| Whistic Blower Frotestion | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-10 Professional | Compliant | |
| Development Requirements | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-11 Indoor Space | Compliant | Documenting Statement(s), it applicable |
| Requirements | Compnant | |
| roganomento | L | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-11 Separation of Children | Compliant | |
| Under 2 1/2 Years | P | |
| | | D (1) (1) (1) (1) |
| Rule | Status | Documenting Statement(s), If applicable |



| 5180:2-12-11 Outdoor Space Requirements | Compliant | |
|--|--------------|---|
| | <u>I</u> | ļ. |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-12 Safe Equipment | Compliant | |
| 534-2. As 3.5 (487) - 10. 20. (48. 4). Trimpo de mus. 10. 10. 10. (48. (48. (48. (48. (48. (48. (48. (48 | 1 | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-11 Outdoor Play Equipment | Not Verified | |
| | | |
| | I | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-11 Outdoor Play Fall | Not Verified | Documenting Statement: The protective |
| Zones | | surfaces under the outdoor equipment |
| | | were not viewed during this inspection |
| | | due to snow covering; however, the |
| | | requirements were discussed. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-12 Safe Environment | Compliant | Documenting Statement(s), if applicable |
| 5180:2-12-12 Sale Environment | Compilant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-13 Sanitary Equipment and | Compliant | 0 |
| Environment | 1 | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-13 Handwashing | Compliant | |
| Requirements | , | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-13 Smoke Free | Compliant | |
| Environment | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-14 Transportation and Field | Compliant | |
| Trip Procedures | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-14 Transportation - Driver | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-14 Transportation - | Compliant | Documenting Statement: The vehicle(s) |
| Vehicle Requirements | | used by the program to transport children |
| | | is inspected and licensed by the Ohio |
| | | State Highway Patrol. Dated 5/18/24. |
| | | |



| Rule: 5180:2-12-14 Transportation - Vehicle Requirements | Compliant | Documenting Statement: During the inspection, weekly safety inspections and/or monthly emergency exiting drills were completed and documented, as required [using the ODJFS sample form]. Documenting Statement(s), If applicable |
|--|--------------------|--|
| 5180:2-12-15 Child Medical and | Compliant | Documenting Statement(3), it applicable |
| Enrollment Records | Compliant | |
| Emoniment Records | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-16 Medical, Dental, and | Compliant | |
| General Emergency Plan | \$100.00 (1000000) | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-16 Emergency Drills | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-16 First Aid/Standard | Compliant | |
| Precautions | | |
| | <u>.</u> | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-16 Management of | Compliant | |
| Communicable Disease | | |
| | - | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-16 Incident/Injury | Compliant | |
| Reporting | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-17 Materials and | Compliant | bootimenting statement (5), ii approasie |
| Equipment | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-17 Daily Schedule | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-18 Attendance Records | Compliant | booking statement(s), it applicable |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-18 Group Size | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-17 Daily Outdoor Play | Compliant | Bootimenting Statement(3), it applicable |
| 313012 12 17 Bally Gatagor Flay | Compilant | |



| Rule | Status | Documenting Statement(s), If applicable |
|---|-----------|---|
| 5180:2-12-18 License Capacity | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-18 Ratio | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-20 Cots and Napping | Compliant | bocumenting statement(s), if applicable |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-19 Supervision | Compliant | |
| Rule | Status | Decumenting Statement(a) If applicable |
| 5180:2-12-19 Child Guidance | | Documenting Statement(s), If applicable |
| 5160:2-12-15 Child Guidance | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-22 Meal and Snack | Compliant | |
| Requirements | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-22 Safe Food | Compliant | |
| Handling/Storage | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-22 Fluid Milk Requirements | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-23 Diapering and Toilet Training | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-25 Medication | Compliant | |
| Administration | | |