

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
ST PETER'S UNITED CHURCH OF CHRIST	000000304236		Child Care Center
PRESCHOOL			
Address	50		County
582 CHURCH ST AMHERST			LORAIN
ОН			
44001			
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
11/02/1994	E	15/R	
Fire Inspection Approval Date	Food Service Risk Level		
08/12/2024	Exempt		

Inspection Information					
Inspection Type	Inspection So	ope	Inspection Notice		
Annual	Full		Unannounced		
Inspection Date	Begin Time		End Time		
09/16/2024	9:50 AM		/2024 9:50 AM 11:00 AM		
Reviewer:					
Brittani Aloi					
Summary of Findings					
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk	
58	2	0	0	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		0	0	0	
Total Under 2 ½ Years	0	0	0	0	
Older Toddler		0	0	0	
Preschool		0	27	27	
School Age		0	0	0	
Total Capacity/Enrollment	39	0	27	27	

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



MWF	3 years to < 4 years	1 to 6	
MWF	3 years to < 4 years	2 to 6	
T/TH AM 3's	3 years to < 4 years	0 to 0	
T/TH AM 4's	3 years to < 4 years	0 to 0	
T/TH PM	3 years to < 4 years	0 to 0	

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			
	-		
	1		
	_		
Moderate Risk Non-Compliances	_		
No Moderate Risk Non-Compliances were observed during this inspection			
	-		
	4		
	_		



Low Risk Non-Compliances

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: The program staff's medical statements are required to be completed and on file at the program.

<u>Finding</u>: In review of the staff records, it was determined that the medical statements for the employees listed on the Employee Record Chart did not meet the requirements as listed in number(s) 1, 2 below.

- 1. A medical statement was not on file for at least one employee;
- 2. The medical statement(s) on file did not have a date of examination within 12 months of the employee's first day of employment;
- 3. Date of examination was missing;
- 4. Signature, business address, or telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination was missing;
- 5. A statement was missing that verifies 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);
- 6. Tuberculosis (TB) screening/test information was missing:
- 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 6a.
- 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: 10/16/2024

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: 10/16/2024

Rules In-Compliance/Not Verified

Status	Documenting Statement(s), If applicable
Compliant	
Status	Documenting Statement(s), If applicable
Compliant	
1	
Status	Documenting Statement(s), If applicable
Compliant	
Status	Documenting Statement(s), If applicable
Compliant	
Status	Documenting Statement(s), If applicable
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 8/12/25.
	Status Compliant Status Compliant Status Compliant Status Compliant Status Status Compliant

Designates:		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Food Service	Compliant	
Requirements		
	200	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	
Qualifications		
	•	·
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	
Responsibilities/Requirements		
Delines 2016 1.094 (1917 2019 1.094 1.095	<u></u>	<u>.</u>
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-07 Written Program	Compliant	Documenting Statement: No changes
Policies and Procedures	Jonnyhant	have been made to the written policies
. S.I.S. S WING T TO COUNTY		and procedures since it was last approved
		by this Department.
		by this Department.
		I
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Orientation Training &	Compliant	bocumenting statement(s), it applicable
Whistle Blower Protection	Compliant	
Willstie blower Flotection		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-09 Background Check	Compliant	Bocumenting Statement(3), if applicable
Requirements	Compliant	
nequirements	20	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-10 Health Training	Compliant	Documenting Statement(s), if applicable
	Compliant	
Requirements		
Della	Chatana	D
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-10 Professional	Compliant	
Development Requirements		
	T 6: .	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space	Compliant	
Requirements		
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		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free	Compliant	bocumenting statement(s), it applicable
Environment	Compilation	
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Child Medical and	Compliant	
Enrollment Records		
	To a second	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Medical/Physical Care	Compliant	
Plans		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Medical, Dental, and	Compliant	Documenting Statement(s), it applicable
General Emergency Plan	Compliant	
General Emergency Fram		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Emergency Drills	Compliant	Documenting Statement: Documentation
	3	for completed fire, weather, and
		emergency/lockdown drills was verified
		during this inspection.
Dula	Chatus	Decreasing Statement(s) If applicable
Rule: 5101:2-12-16 First Aid/Standard	Status	Documenting Statement(s), If applicable
The state of the s		Documenting Statements During the
Precautions	Compliant	Documenting Statement: During the
Precautions	Compliant	inspection, the program had complete
Precautions	Compliant	
Precautions	Compliant	inspection, the program had complete
Precautions Rule	Status	inspection, the program had complete
Rule 5101:2-12-16 Management of		inspection, the program had complete first aid kits available as required.
Rule	Status	inspection, the program had complete first aid kits available as required.
Rule 5101:2-12-16 Management of Communicable Disease	Status Compliant	inspection, the program had complete first aid kits available as required. Documenting Statement(s), If applicable
Rule 5101:2-12-16 Management of Communicable Disease	Status Compliant Status	inspection, the program had complete first aid kits available as required.
Rule 5101:2-12-16 Management of Communicable Disease Rule 5101:2-12-16 Incident/Injury	Status Compliant	inspection, the program had complete first aid kits available as required. Documenting Statement(s), If applicable
Rule 5101:2-12-16 Management of Communicable Disease	Status Compliant Status	inspection, the program had complete first aid kits available as required. Documenting Statement(s), If applicable
Rule 5101:2-12-16 Management of Communicable Disease Rule 5101:2-12-16 Incident/Injury Reporting	Status Compliant Status Compliant	inspection, the program had complete first aid kits available as required. Documenting Statement(s), If applicable Documenting Statement(s), If applicable
Rule 5101:2-12-16 Management of Communicable Disease Rule 5101:2-12-16 Incident/Injury Reporting Rule	Status Compliant Status Compliant Status Status	inspection, the program had complete first aid kits available as required. Documenting Statement(s), If applicable
Rule 5101:2-12-16 Management of Communicable Disease Rule 5101:2-12-16 Incident/Injury Reporting	Status Compliant Status Compliant	inspection, the program had complete first aid kits available as required. Documenting Statement(s), If applicable Documenting Statement(s), If applicable

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Materials and	Compliant	botumenting statement(5), it applicable
Equipment	Compilant	
Equipment	<u></u>	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	bocumenting statement(3), if applicable
3101.2-12-18 License Capacity	Compliant	
	Į.	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child
Ruici 3101.2 12 10 Ruilo	Compilant	ratios observed during the inspection
		were in compliance.
		were in compliance.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Group Size	Compliant	Bocamenting statement(s), it applicable
	Compilant	
	l.	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Attendance Records	Compliant	Decamenting statement(o), it approaches
3101.2 12 10 Attendance Records	Compilant	
	L.	
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	
	9	
	7)	,
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cots and Napping	Compliant	
	<i>8</i>	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Meal and Snack	Compliant	
Requirements	- in	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Fluid Milk Requirements	Compliant	
the second section of the section of t	s person Stetlerins ■ patriod pyryelenin ii	
	<u> </u>	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food	Compliant	
Handling/Storage		
	1	
Rule	Status	Documenting Statement(s), If applicable



5101:2-12-25 Medication Administration	Compliant	
Pulo	Ctatus	Decumenting Statement(c) If applicable

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Written Disaster Plan	Compliant	Documenting Statement: Annual training of the written disaster plan was completed by staff.
Rule: 5101:2-12-16 Written Disaster Plan	Compliant	Documenting Statement: No changes have been made to the written policies and procedures since it was last approved by this Department.