

# **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 <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. 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
SAINT GABRIEL LEARNING LOFT	000000305153		Child Care Center
PRESCHOOL			
Address			County
9921 JOHNNYCAKE RIDGE ROAD CONCORD TWSP			LAKE
OH 44060			
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date	Food Service Risk L	evel	
08/14/2023			

Inspection Information				
Inspection Type	Inspection So	cope	Inspection Notice	
Annual	Full		Unannounced	
Inspection Date 10/10/2023	Begin Time 9	:05 AM	End Time 11:31 AM	
Reviewer: SHELLY WILLIAMS				
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		Enr	ollment
	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	162	162
School Age		0	0	0
Total Capacity/Enrollment	105	0	162	162

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

4's AM M T H	4 years to < 5 years	2 to 15
4's AM M T H	4 years to < 5 years	2 to 15
3 AM T H	3 years to < 4 years	2 to 13
3 AM T H	3 years to < 4 years	2 to 13
3 2 AM T H	3 years to < 4 years	2 to 15
3 2 AM T H	3 years to < 4 years	2 to 15

## **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		
No Moderate Risk Non-Compliances were observed during this inspection		

#### 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 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: 11/09/2023

#### 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.

<u>Finding</u>: 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(s) 1 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: 11/09/2023

### **Rules In-Compliance/Not Verified**

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	
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	Compliant	
·	Compilant	
Requirements		
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Building	Compliant	Documenting Statement: A copy of the
Department Inspection		certificate of occupancy was available on-
		site for review.
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 8/14/24.
		new fire inspection by 8/14/24.
Rule	Status	Documenting Statement/s) If applicable
	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Food Service	Compliant	Documenting Statement: The program
Requirements		has obtained a food service exemption
		status from the local health department.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-05 Denial, Revocation and	Compliant	
Suspension		
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	bocamenting statement(s), if applicable
	Compilant	
Responsibilities/Requirements		
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Written Program	Compliant	
Policies and Procedures		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Orientation Training &	Compliant	
Whistle Blower Protection	· ·	
Rule	Status	Documenting Statement(s), If applicable
		Documenting statement(s), if applicable
5101:2-12-09 Background Check	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable

5101:2-12-10 Health Training	Compliant	
Requirements		
	•	<u> </u>
Rule	Status	Documenting Statement(s), If applicable
		bocumenting statement(s), it applicable
5101:2-12-10 Professional	Compliant	
Development Requirements		
Rule	Status	Documenting Statement(s), If applicable
1 1		Bocumenting statement(s), it applicable
5101:2-12-11 Indoor Space	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Space	Compliant	Documenting Statement: The outdoor
· ·	Compliant	-
Requirements		play area is separated from traffic and
		other hazards by a fence.
Rule: 5101:2-12-11 Outdoor Space	Compliant	Documenting Statement: The quarterly
·	Compilant	• , ,
Requirements		playground inspections were completed
		and documented, as required. The most
		recent inspection report form was dated
		· ·
		10/6/23.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Play	Compliant	Documenting Statement: All equipment in
· · · · · · · · · · · · · · · · · · ·	Compilant	
Equipment		the outdoor play space was observed to
		be anchored and stable.
Rule	Ctatus	Decomposition Chateson ant/o/ If and include
		I Documenting Statementist it anniicanie
	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Play Fall	Compliant	Documenting Statement: The protective
Rule: 5101:2-12-11 Outdoor Play Fall		Documenting Statement: The protective
Rule: 5101:2-12-11 Outdoor Play Fall		Documenting Statement: The protective material used under outdoor equipment
Rule: 5101:2-12-11 Outdoor Play Fall		Documenting Statement: The protective material used under outdoor equipment
Rule: 5101:2-12-11 Outdoor Play Fall Zones	Compliant	Documenting Statement: The protective material used under outdoor equipment was poured rubber.
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Rule: 5101:2-12-11 Outdoor Play Fall Zones  Rule 5101:2-12-12 Safe Equipment	Status Compliant	Documenting Statement: The protective material used under outdoor equipment was poured rubber.  Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Play Fall Zones  Rule 5101:2-12-12 Safe Equipment	Status Compliant Status Status	Documenting Statement: The protective material used under outdoor equipment was poured rubber.
Rule: 5101:2-12-11 Outdoor Play Fall Zones  Rule 5101:2-12-12 Safe Equipment	Status Compliant	Documenting Statement: The protective material used under outdoor equipment was poured rubber.  Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Play Fall Zones  Rule 5101:2-12-12 Safe Equipment	Status Compliant Status Status	Documenting Statement: The protective material used under outdoor equipment was poured rubber.  Documenting Statement(s), If applicable
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Rule: 5101:2-12-11 Outdoor Play Fall Zones  Rule 5101:2-12-12 Safe Equipment	Status Compliant  Status Compliant  Status Compliant	Documenting Statement: The protective material used under outdoor equipment was poured rubber.  Documenting Statement(s), If applicable  Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Play Fall Zones  Rule 5101:2-12-12 Safe Equipment  Rule 5101:2-12-12 Safe Environment	Status Compliant  Status Compliant  Status Compliant	Documenting Statement: The protective material used under outdoor equipment was poured rubber.  Documenting Statement(s), If applicable
Rule 5101:2-12-12 Safe Equipment  Rule 5101:2-12-12 Safe Environment  Rule 5101:2-12-13 Sanitary Equipment and	Status Compliant  Status Compliant  Status Compliant	Documenting Statement: The protective material used under outdoor equipment was poured rubber.  Documenting Statement(s), If applicable  Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Play Fall Zones  Rule 5101:2-12-12 Safe Equipment  Rule 5101:2-12-12 Safe Environment	Status Compliant  Status Compliant  Status Compliant	Documenting Statement: The protective material used under outdoor equipment was poured rubber.  Documenting Statement(s), If applicable  Documenting Statement(s), If applicable
Rule 5101:2-12-12 Safe Equipment  Rule 5101:2-12-12 Safe Environment  Rule 5101:2-12-13 Sanitary Equipment and	Status Compliant  Status Compliant  Status Compliant	Documenting Statement: The protective material used under outdoor equipment was poured rubber.  Documenting Statement(s), If applicable  Documenting Statement(s), If applicable
Rule 5101:2-12-12 Safe Equipment  Rule 5101:2-12-12 Safe Environment  Rule 5101:2-12-13 Sanitary Equipment and	Status Compliant  Status Compliant  Status Compliant	Documenting Statement: The protective material used under outdoor equipment was poured rubber.  Documenting Statement(s), If applicable  Documenting Statement(s), If applicable

5404 2 42 42 Hand Table	Carrathant	
5101:2-12-13 Handwashing	Compliant	
Requirements		
Dula	Chahua	Decrease in a Chatage and (a) If a malically
Rule 5101:2-12-13 Smoke Free	Status	Documenting Statement(s), If applicable
	Compliant	
Environment		
2.1	CL	D C
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Medical/Physical	Compliant	Documenting Statement: The program
Care Plans		had current information on the medical
		status and the required treatment plan for the children with health conditions.
		for the children with health conditions.
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 Flan		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Emergency Drills	Compliant	Documenting Statement: Documentation
Rule. 3101.2 12 10 Emergency Dinis	Compliant	for completed fire, weather, and
		emergency/lockdown drills was verified
		during this inspection.
		during this hispection.
Rule	Status	Documenting Statement(s), If applicable
Rule 5101:2-12-16 First Aid/Standard	Status Compliant	Documenting Statement(s), If applicable
		Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard		Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard		Documenting Statement(s), If applicable  Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard Precautions	Compliant	
5101:2-12-16 First Aid/Standard Precautions	Compliant	
5101:2-12-16 First Aid/Standard Precautions  Rule 5101:2-12-16 Management of	Compliant	
5101:2-12-16 First Aid/Standard Precautions  Rule 5101:2-12-16 Management of	Compliant	
S101:2-12-16 First Aid/Standard Precautions  Rule  5101:2-12-16 Management of Communicable Disease	Status Compliant	Documenting Statement(s), If applicable
S101:2-12-16 First Aid/Standard Precautions  Rule  5101:2-12-16 Management of Communicable Disease  Rule	Status Compliant Status Status	Documenting Statement(s), If applicable
S101:2-12-16 First Aid/Standard Precautions  Rule  5101:2-12-16 Management of Communicable Disease  Rule  5101:2-12-16 Incident/Injury Reporting	Status Compliant  Status Compliant  Status Compliant	Documenting Statement(s), If applicable  Documenting Statement(s), If applicable
S101:2-12-16 First Aid/Standard Precautions  Rule  5101:2-12-16 Management of Communicable Disease  Rule  5101:2-12-16 Incident/Injury	Status Compliant Status Status	Documenting Statement(s), If applicable
S101:2-12-16 First Aid/Standard Precautions  Rule  5101:2-12-16 Management of Communicable Disease  Rule  5101:2-12-16 Incident/Injury Reporting	Status Compliant  Status Compliant  Status Compliant	Documenting Statement(s), If applicable  Documenting Statement(s), If applicable
S101:2-12-16 First Aid/Standard Precautions  Rule 5101:2-12-16 Management of Communicable Disease  Rule 5101:2-12-16 Incident/Injury Reporting	Status Compliant  Status Compliant  Status Compliant	Documenting Statement(s), If applicable  Documenting Statement(s), If applicable
S101:2-12-16 First Aid/Standard Precautions  Rule  5101:2-12-16 Management of Communicable Disease  Rule  5101:2-12-16 Incident/Injury Reporting  Rule  5101:2-12-16 Written Disaster Plan	Status Compliant  Status Compliant  Status Compliant  Status Compliant	Documenting Statement(s), If applicable  Documenting Statement(s), If applicable  Documenting Statement(s), If applicable
S101:2-12-16 First Aid/Standard Precautions  Rule 5101:2-12-16 Management of Communicable Disease  Rule 5101:2-12-16 Incident/Injury Reporting  Rule 5101:2-12-16 Written Disaster Plan  Rule	Status Compliant  Status Compliant  Status Compliant  Status Compliant  Status Status Compliant	Documenting Statement(s), If applicable  Documenting Statement(s), If applicable
S101:2-12-16 First Aid/Standard Precautions  Rule  5101:2-12-16 Management of Communicable Disease  Rule  5101:2-12-16 Incident/Injury Reporting  Rule  5101:2-12-16 Written Disaster Plan	Status Compliant  Status Compliant  Status Compliant  Status Compliant	Documenting Statement(s), If applicable  Documenting Statement(s), If applicable  Documenting Statement(s), If applicable
S101:2-12-16 First Aid/Standard Precautions  Rule 5101:2-12-16 Management of Communicable Disease  Rule 5101:2-12-16 Incident/Injury Reporting  Rule 5101:2-12-16 Written Disaster Plan  Rule	Status Compliant  Status Compliant  Status Compliant  Status Compliant  Status Status Compliant	Documenting Statement(s), If applicable  Documenting Statement(s), If applicable  Documenting Statement(s), If applicable
S101:2-12-16 First Aid/Standard Precautions  Rule 5101:2-12-16 Management of Communicable Disease  Rule 5101:2-12-16 Incident/Injury Reporting  Rule 5101:2-12-16 Written Disaster Plan  Rule 5101:2-12-17 Daily Schedule	Status Compliant  Status Compliant  Status Compliant  Status Compliant  Status Compliant	Documenting Statement(s), If applicable  Documenting Statement(s), If applicable  Documenting Statement(s), If applicable  Documenting Statement(s), If applicable
S101:2-12-16 First Aid/Standard Precautions  Rule 5101:2-12-16 Management of Communicable Disease  Rule 5101:2-12-16 Incident/Injury Reporting  Rule 5101:2-12-16 Written Disaster Plan  Rule 5101:2-12-17 Daily Schedule	Status Compliant  Status Compliant  Status Compliant  Status Compliant  Status Compliant  Status Status Compliant	Documenting Statement(s), If applicable  Documenting Statement(s), If applicable  Documenting Statement(s), If applicable
S101:2-12-16 First Aid/Standard Precautions  Rule 5101:2-12-16 Management of Communicable Disease  Rule 5101:2-12-16 Incident/Injury Reporting  Rule 5101:2-12-16 Written Disaster Plan  Rule 5101:2-12-17 Daily Schedule  Rule 5101:2-12-17 Materials and	Status Compliant  Status Compliant  Status Compliant  Status Compliant  Status Compliant	Documenting Statement(s), If applicable  Documenting Statement(s), If applicable  Documenting Statement(s), If applicable  Documenting Statement(s), If applicable
S101:2-12-16 First Aid/Standard Precautions  Rule 5101:2-12-16 Management of Communicable Disease  Rule 5101:2-12-16 Incident/Injury Reporting  Rule 5101:2-12-16 Written Disaster Plan  Rule 5101:2-12-17 Daily Schedule	Status Compliant  Status Compliant  Status Compliant  Status Compliant  Status Compliant  Status Status Compliant	Documenting Statement(s), If applicable  Documenting Statement(s), If applicable  Documenting Statement(s), If applicable  Documenting Statement(s), If applicable

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	
	1	
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.
Pula	Chahus	Decree outing (takens outle) If a collection
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Group Size	Compliant	
	L	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Attendance Records	Compliant	
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	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-25 Medication	Compliant	Documenting Statement: The program
Administration		had complete written documentation for
		administering medication or food
		supplements.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Child Care Staff Member	Compliant	bocumenting statement(s), if applicable
Educational Requirements	Compliant	
Laucational Nequilements	1	