

# **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 Details                |                         |                 |                   |   |
|--------------------------------|-------------------------|-----------------|-------------------|---|
| Program Name                   | Program Number          |                 | Program Type      |   |
| CHESTER CO-OPERATIVE PRESCHOOL | 000000307223            |                 | Child Care Center |   |
|                                |                         |                 |                   |   |
| Address                        |                         |                 | County            |   |
| 12772 CHILLICOTHE CHESTERLAND  |                         |                 | GEAUGA            |   |
| ОН                             |                         |                 |                   |   |
| 44026                          |                         |                 |                   |   |
|                                |                         |                 | 9                 |   |
| Building Approval Date         | Use Group/Code          | Occupancy Limit | Maximum Under 2 ½ | 2 |
| 05/19/2006                     | E                       | 60              | Na                |   |
| Fire Inspection Approval Date  | Food Service Risk Level |                 |                   |   |
| 07/22/2024                     | Exempt                  |                 |                   |   |

| Inspection Information |                                |                  |                   |              |  |
|------------------------|--------------------------------|------------------|-------------------|--------------|--|
| Inspection Type        | Inspection So                  | cope             | Inspection Notice |              |  |
| Annual                 | Full                           |                  | Unannounced       |              |  |
| Inspection Date        | Begin Time                     |                  | End Time          |              |  |
| 10/17/2024             | 024 9:45 AM                    |                  | 11:30 AM          |              |  |
| Reviewer:              |                                |                  |                   |              |  |
| MATTHEW PIGNATO        |                                |                  |                   |              |  |
| Summary of Findings    |                                |                  |                   |              |  |
| No. Rules Verified     | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |  |
| 58                     | 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   |                  | 0          | 3         | 3     |
| Total Under 2 ½ Years                                     | 3                | 0          | 3         | 3     |
| Older Toddler   |                  | 0          | 1         | 1     |
| Preschool   |                  | 0          | 26        | 26    |
| School Age  |                  | 0          | 0         | 0     |
| Total Capacity/Enrollment                                 | 45               | 0          | 27        | 30    |

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



| Th, F AM | 18 months to < 30 months | 2 to 7 | 1st |
|----------|--------------------------|--------|-----|
| Th, F AM | 18 months to < 30 months | 2 to 7 | 2nd |

### **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 |  |  |
|  |  |  |
|  |  |  |
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|  |  |  |
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### **Moderate Risk Non-Compliances**

Domain: 00 License & Approvals

Rule: 5101:2-12-18 License Capacity

<u>Code</u>: The program is required to maintain the capacity that is indicated on the license.

<u>Finding</u>: During the inspection, it was determined that there were 7 total children with 3 children under 2 1/2. The program is currently licensed to serve 45 total children, with no more than 0 children under 2 1/2. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/16/2024



### **Low Risk Non-Compliances**

Domain: 08 Staff Files

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

<u>Code</u>: 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.

<u>Finding</u>: 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: 11/16/2024

### **Domain: 10 Written Policies & Procedures**

Rule: 5101:2-12-07 Written Program Policies and Procedures

<u>Code</u>: The program's policies and procedures are required to include all topics outlined in rule.

<u>Finding</u>: During the inspection, it was determined the program's written policies and procedures provided to the parents/guardians and employees was missing item number 15 below:

#### General Information

- 1. Program name, address, email address and telephone number.
- 2. Description of the program's program philosophy.
- 3. Days and hours of operation, scheduled closings and basic daily schedule.
- 4. Staff/child ratios and group size.
- 5. Opportunities for parent involvement in program activities.
- 6. Opportunities for parents to meet with teachers regarding their child.
- 7. Payment schedule, overtime charges and registration fees as applicable.
- 8. Supports for onsite breastfeeding or pumping for mothers who wish to do so (if the program serves infants or toddlers).

Program Policies and Procedures



- 9. Enrollment including required enrollment information.
- 10. Care of children without immunizations.
- 11. Attendance including procedures for arrival and departure, the program's absent day policy, releasing child to persons other than the parent, releasing a child according to a custody agreement and follow up when a child scheduled to arrive from another program or activity does not arrive.
- 12. Supervision of children, including a separate supervision policy for school-age children, if applicable.
- 13. Child guidance.
- 14. Suspension and expulsion.
- 15. Compliance with the Americans with Disabilities Act (ADA), including administering medication to children with disabilities and administering care procedures to children with disabilities.
- 16. Outdoor play, including limitations placed on outdoor play due to weather or safety issues (considerations may include but are not limited to temperature, humidity, wind chill, ozone levels, pollen count, lightning, rain or ice.)
- 17. Food and dietary policy, including, information regarding meeting one-third of the child's recommended daily dietary allowance, policy regarding formula, breast milk, meals and snacks, and a policy on providing supplemental food.
- 18. Management of illness including isolation precautions, symptoms for discharge and return and notification of parent of ill child.
- 19. Summary of procedures taken in the event of an emergency, serious illness or injury.
- 20. Administration of medication and topical products including medical foods, modified diets and whether school age children are permitted to carry their own medication and ointments.
- 21. Transportation for fieldtrips, routine trips (if applicable) and emergencies, including if the center will provide child care services to children whose parents refuse to grant consent for transportation to the source of emergency treatment.
- 22. Water activities/swimming.
- 23. Infant care, if applicable, including feeding, frequency of diaper checks and information about daily activities.
- 24. Sleeping, Napping and Resting.
- 25. Evening and overnight care, if applicable.
- 26. Policy on hours of operation including closing due to weather, school delays or closings and any other factors.
- 27. Situations that may require disenrollment of a child, if applicable.
- 28. Problem or issue resolution for parents or employees to follow when needing assistance in resolving problems related to the child care program.
- 29. Formal screenings and assessments on enrolled children and if the program reports child level data to ODJFS pursuant to 5101:2-17-02 of the Administrative Code.

Revise the program's written policies and procedures to include the missing information. Submit the program's corrective action plan, which includes the revised written policies and procedures, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/16/2024



## Rules In-Compliance/Not Verified

| Rule                               | Status              | Documenting Statement(s), If applicable                                      |
|------------------------------------|---------------------|--|
| 5101:2-12-02 License Posted        | Compliant           | Documenting Statement(s), if applicable                                      |
| 5101.2-12-02 License Fosted        | Compliant           |  |
| Rule                               | Status              | Documenting Statement(s), If applicable                                      |
| 5101:2-12-02 Current Information   | Compliant           | bocumenting statement(s), it applicable                                      |
| 5101.2-12-02 Current information   | Compliant           |  |
| Rule                               | Status              | Documenting Statement(s), If applicable                                      |
| 5101:2-12-03 Inspection            | Compliant           | C - C - C - C - C - C - C - C - C - C -                                      |
| Requirements                       |                     |  |
| Rule                               | Status              | Documenting Statement(s), If applicable                                      |
| 5101:2-12-04 Building Department   | Compliant           | Dodamenta, o state mental of it approache                                    |
| Inspection                         | Compilant           |  |
| Rule                               | Status              | Decumenting Statement(e) If applicable                                       |
| Rule: 5101:2-12-04 Fire Inspection | Compliant           | Documenting Statement(s), If applicable  Documenting Statement: Please Note: |
| Rule: 5101:2-12-04 Fire inspection | Compliant           | Documentation of a fire inspection   |
|                                    |                     | without any uncorrected violations must                                      |
|                                    |                     | be secured for the program. Secure a   |
|                                    |                     | new fire inspection by 7/22/25.  |
|                                    |                     | new life inspection by 7/22/25.  |
| Rule: 5101:2-12-04 Fire Inspection | Compliant           | Documenting Statement: Although the  |
|                                    |                     | program had documentation of a current                                       |
|                                    |                     | fire inspection without any uncorrected                                      |
|                                    |                     | violations at the time of the licensing                                      |
|                                    |                     | inspection, the program did not have the                                     |
|                                    |                     | fire inspection completed within 12  |
|                                    |                     | months from the date of the last fire  |
|                                    |                     | inspection without any uncorrected   |
|                                    |                     | violations. Please ensure that fire  |
|                                    |                     | inspections are completed in accordance                                      |
|                                    |                     | 139  |
|                                    |                     | with the rule requirements   |
|                                    |                     | with the rule requirements.  |
| Rule                               | Status              |  |
| Rule: 5101:2-12-04 Food Service    | Status              | Documenting Statement(s), If applicable                                      |
| Rule: 5101:2-12-04 Food Service    | Status<br>Compliant | Documenting Statement(s), If applicable  Documenting Statement: The program  |
| - Annicology                       |                     | Documenting Statement(s), If applicable                                      |



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|--|-----------|--|
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-07 Administrator   | Compliant |  |
| Qualifications   |           |  |
|  |           |  |
| Rule   | Status    | Decumenting Statement(s) If applicable   |
| No. of Contract of |           | Documenting Statement(s), If applicable  |
| 5101:2-12-07 Administrator   | Compliant |  |
| Responsibilities/Requirements  |           |  |
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-08 Medical Statement   | Compliant |  |
|  |           |  |
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-08 Orientation Training &  | Compliant |  |
| Whistle Blower Protection  |           |  |
| Trinsic Blower Frotection  | I         | 1  |
| Pode   | Chicking  | Decree of the Chateres and Alife Health  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-09 Background Check  | Compliant | Documenting Statement: During the  |
| Requirements   |           | inspection, the required documentation   |
|  |           | regarding background checks was on file  |
|  |           | for all employees listed.  |
|  |           |  |
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-10 Health Training   | Compliant | bocamenting statement(s), in applicable  |
| 00010 0000 0000 000 000 000 000 000 000  | Compilant |  |
| Requirements   | 1         |  |
| - 1  | 1 -       |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-11 Indoor Space  | Compliant |  |
| Requirements   |           |  |
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-11 Separation of Children  | Compliant | 5 (7)  |
| Under 2 1/2 Years  | Somphane  |  |
| Olider 2 1/2 (cars   | 1         |  |
| P. J.  | Chatura   | Decree of the Chaterra and A. If   |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-12 Safe Equipment  | Compliant | Documenting Statement: Equipment was   |
|  |           | observed to be in good condition.  |
|  |           |  |
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-12 Safe Environment  | Compliant |  |
|  |           |  |
|  | <u>.</u>  |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-13 Sanitary Equipment and  | Compliant | 2 2 3 attention of a state of the state of t |
|  | Compliant |  |
| Environment  | ļ.        | <u> </u>   |
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |



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|---------------------------------------|-------------|---|
| 5101:2-12-13 Handwashing              | Compliant   |   |
| Requirements                          | *           |   |
| · ·                                   | I           | <del>!</del>                            |
| Rule                                  | Status      | Documenting Statement(s), If applicable |
| 5101:2-12-13 Smoke Free               |             | Documenting Statement(s), if applicable |
|                                       | Compliant   |   |
| Environment                           |             |   |
|                                       |             |   |
| Rule                                  | Status      | Documenting Statement(s), If applicable |
| 5101:2-12-14 Transportation and Field | Compliant   |   |
| Trip Procedures                       | '           |   |
| The trocedures                        |             |   |
| Dula                                  | Ct-t        | D                                       |
| Rule                                  | Status      | Documenting Statement(s), If applicable |
| 5101:2-12-15 Child Medical and        | Compliant   |   |
| Enrollment Records                    |             |   |
|                                       |             |   |
| Rule                                  | Status      | Documenting Statement(s), If applicable |
| 5101:2-12-15 Medical/Physical Care    | Compliant   |   |
| Plans                                 | Compilant   |   |
| 1 10113                               |             |   |
|                                       |             |   |
| Rule                                  | Status      | Documenting Statement(s), If applicable |
| 5101:2-12-16 Medical, Dental, and     | Compliant   |   |
| General Emergency Plan                |             |   |
|                                       |             |   |
| Rule                                  | Status      | Documenting Statement(s), If applicable |
| 5101:2-12-16 Emergency Drills         | Compliant   | Securior and Securior (S)) in approach  |
| 3101.2 12 10 Emergency Dinis          | Compilant   |   |
|                                       |             |   |
| D. I.                                 | Char        | D                                       |
| Rule                                  | Status      | Documenting Statement(s), If applicable |
| 5101:2-12-16 First Aid/Standard       | Compliant   |   |
| Precautions                           |             |   |
|                                       |             |   |
| Rule                                  | Status      | Documenting Statement(s), If applicable |
| 5101:2-12-16 Management of            | Compliant   |   |
| Communicable Disease                  |             |   |
| Communicable bisease                  |             |   |
| D.I.                                  | c           | D (1 6) 1 1/1 15 15 15 15               |
| Rule                                  | Status      | Documenting Statement(s), If applicable |
| 5101:2-12-16 Incident/Injury          | Compliant   |   |
| Reporting                             |             |   |
|                                       |             |   |
| Rule                                  | Status      | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Schedule           | Compliant   |   |
| STOTIZ IZ IT Daily Schedule           | Compilation |   |
| <u> </u>                              | I           |   |
| Dul                                   | Chat        | D                                       |
| Rule                                  | Status      | Documenting Statement(s), If applicable |
| 5101:2-12-17 Materials and            | Compliant   |   |
| Equipment                             |             |   |
|                                       |             |   |
| Rule                                  | Status      | Documenting Statement(s), If applicable |
|                                       |             | amonano - catemonic(e)) n'applicable    |



| Rule: 5101:2-12-18 Ratio             | Compliant | Documenting Statement: Staff/child ratios observed during the inspection were in compliance. |
|--------------------------------------|-----------|--|
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-18 Group Size              | Compliant |  |
|                                      |           |  |
| 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 | bocumenting statement(s), it applicable  |
| STOTIZ 12 15 Supervision             | Compilant |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-19 Child Guidance          | Compliant |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-25 Medication              | Compliant | (-),   |
| Administration                       |           |  |
|                                      | I.        |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-08 Child Care Staff Member | Compliant |  |
| Educational Requirements             |           |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-16 Written Disaster Plan   | Compliant |  |
|                                      |           |  |
|                                      |           |  |
|                                      |           |  |