



## 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>HEAVENLY CHILDREN CHILD CARE<br>ENRICHMENT CENTER | Program Number<br>000000307823       | Program Type<br>Child Care Center |                         |
| Address<br>11700 SHAKER BLVD. CLEVELAND<br>OH 44120               |                                      | County<br>CUYAHOGA                |                         |
| Building Approval Date<br>05/11/2023                              | Use Group/Code<br>E                  | Occupancy Limit<br>200            | Maximum Under 2 ½<br>18 |
| Fire Inspection Approval Date<br>05/24/2023                       | Food Service Risk Level<br>Level III |                                   |                         |

| Inspection Information                            |                          |                                |
|---|--------------------------|--------------------------------|
| Inspection Type<br>Amendment - change of location | Inspection Scope<br>Full | Inspection Notice<br>Announced |
| Inspection Date<br>06/12/2023                     | Begin Time 8:57 AM       | End Time 11:58 AM              |
| Reviewer:<br>Sara Davis                           |                          |                                |

| Summary of Findings      |                                     |                       |                        |                   |
|--------------------------|-------------------------------------|-----------------------|------------------------|-------------------|
| No. Rules Verified<br>58 | No. Rules with Non-compliances<br>4 | No. Serious Risk<br>0 | No. Moderate Risk<br>0 | No. Low Risk<br>5 |

| 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     |
| <b>Total Under 2 ½ Years</b>                              | 18               | 0          | 0         | 0     |
| Older Toddler   |                  | 0          | 0         | 0     |
| Preschool   |                  | 0          | 0         | 0     |
| School Age  |                  | 0          | 0         | 0     |
| <b>Total Capacity/Enrollment</b>                          | 119              | 0          | 0         | 0     |

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



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**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: 03 Postings & Equipment**



**Rule:** 5101:2-12-16 Medical, Dental, and General Emergency Plan  
**Code:** The program is required to post the fire and weather plans.

**Finding:** During the inspection, it was determined that the following information was not posted for item number(s) 1,2,3 below:

1. Fire alert plan, including a diagram indicating evacuation routes.
2. Weather alert plan was missing details for Shelter in Place.
3. Weather alert plan was missing a diagram indicating evacuation routes.

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

Corrective Action Plan Due: 07/12/2023

**Domain: 03 Postings & Equipment**

**Rule:** 5101:2-12-16 Medical, Dental, and General Emergency Plan  
**Code:** The program is required to post and implement the JFS 01242 "Medical, Dental, and General Emergency Plan" when necessary.

**Finding:** During the inspection, it was determined the requirements for the JFS 01242 "Medical, Dental, and General Emergency Plan for Child Care" were not followed as noted in number(s) 1 below:

1. The plan was not posted in each classroom.
2. The plan was not posted in other spaces used by children.
3. The name, address and telephone number of the program were not complete.
4. The location of first aid kit, fire extinguishers and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.
5. The telephone number for emergency squad, fire department, hospital, poison control program, public children services agency, local health department, local emergency management agency, and police department were not complete.
6. Location of children's records was not complete.
7. Emergency information including any medications or supplies needed in the event of an evacuation was not complete.
8. The current version of the prescribed form was not used.
9. The plan was not implemented when necessary in that [ ].

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

Corrective Action Plan Due: 07/12/2023



**Domain: 03 Postings & Equipment**

Rule: 5101:2-12-17 Daily Schedule

Code: The program is required to have the daily program schedule posted in all required areas.

Finding: During the inspection, it was determined that a copy of the daily program schedule was not posted in any of the classrooms as required. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.

Corrective Action Plan Due: 07/12/2023

**Domain: 06 Program Information**

Rule: 5101:2-12-14 Transportation and Field Trip Procedures

Code: The program is required to have staff trained in CPR, First Aid, and Communicable Diseases on all trips.

Finding: During the inspection, it was determined that a person trained in cardiopulmonary resuscitation (CPR), first aid and management of communicable disease, had not been present for number(s) 1,2 below as required by the rule:

1. In the vehicle for routine trips;
2. In the vehicle for field trips;
3. At the destination on all field trips.

Secure current training for the area needed or restructure the staff who are currently trained on the vehicle during routine trips and field trips. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/12/2023

**Domain: 08 Staff Files**

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to be completed within the previous 12 months from the employee's first day of employment.



Finding: In review of the staff records, it was determined that medical examination statement(s) on file at the program were not dated within 12 months of the employee's first day of employment, for the employee(s) listed on the Employee Record Chart. Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/12/2023

**Rules In-Compliance/Not Verified**

| Rule  | Status    | Documenting Statement(s), If applicable   |
|---|-----------|---|
| 5101:2-12-02 License Posted                       | Compliant |   |
| 5101:2-12-02 Current Information                  | Compliant |   |
| 5101:2-12-03 Inspection Requirements              | Compliant |   |
| Rule: 5101:2-12-04 Building Department Inspection | Compliant | Documenting Statement: A copy of the certificate of occupancy was available on-site for review.   |
| 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 5/23/2024. |



| Rule  | Status    | Documenting Statement(s), If applicable  |
|---|-----------|--|
| Rule: 5101:2-12-04 Food Service Requirements                  | Compliant | Documenting Statement: The food service license was observed posted. Following is the audit number and date of expiration: AANS-CRHT4N 3/1/2024. |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-05 Denial, Revocation and Suspension                | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-07 Administrator Qualifications                     | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-07 Administrator Responsibilities/Requirements      | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-07 Written Program Policies and Procedures          | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-08 Child Care Staff Member Educational Requirements | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-08 Orientation Training & Whistle Blower Protection | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-09 Background Check Requirements                    | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-10 Health Training Requirements                     | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-10 Professional Development Requirements            | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-11 Indoor Space Requirements                        | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |



|  |               |   |
|--|---------------|---|
| 5101:2-12-11 Separation of Children Under 2 1/2 Years    | Compliant     |   |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>  |
| 5101:2-12-11 Outdoor Space Requirements                  | Compliant     |   |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>  |
| 5101:2-12-11 Outdoor Play Equipment                      | Compliant     |   |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>  |
| 5101:2-12-11 Outdoor Play Fall Zones                     | Compliant     |   |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>  |
| 5101:2-12-12 Safe Equipment                              | Compliant     |   |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>  |
| 5101:2-12-12 Safe Environment                            | Compliant     |   |
| <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>  |
| 5101:2-12-13 Handwashing Requirements                    | Compliant     |   |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>  |
| 5101:2-12-13 Smoke Free Environment                      | Compliant     |   |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>  |
| 5101:2-12-14 Transportation - Driver Requirements        | Compliant     |   |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>  |
| Rule: 5101:2-12-14 Transportation - Vehicle Requirements | Compliant     | Documenting Statement: An annual safety check of the vehicle(s), using the JFS 01230 "Vehicle Inspection Report For Child Care Centers" form, was verified and dated 5/26/2023 for both vehicles. |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>  |



|   |           |   |
|---|-----------|---|
| 5101:2-12-15 Child Medical and Enrollment Records | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-15 Medical/Physical Care Plans          | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-16 Emergency Drills                     | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-16 First Aid/Standard Precautions       | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-16 Management of Communicable Disease   | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-16 Incident/Injury Reporting            | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-16 Written Disaster Plan                | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-17 Materials and Equipment              | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Outdoor Play                   | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-18 License Capacity                     | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-18 Ratio                                | Compliant |   |
| 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 |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-19 Child Guidance              | Compliant |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-20 Cots and Napping            | Compliant |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-22 Meal and Snack Requirements | Compliant |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-22 Fluid Milk Requirements     | Compliant |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-22 Safe Food Handling/Storage  | Compliant |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-25 Medication Administration   | Compliant |   |