

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 | Program Number | | Program Type | | |
| CARVER COMMUNITY CENTER | 000000400052 | | Child Care Center | | |
| | | | | | |
| Address | | | County | | |
| 165 W. FOURTH ST CHILLICOTHE | | | ROSS | | |
| OH 45601 | | | | | |
| | | | | | |
| | | | <u>, </u> | | |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ | | |
| 02/07/2008 | E | | | | |
| Fire Inspection Approval Date | Food Service Risk Level | | | | |
| 04/25/2022 | Level IV | | | | |

| | Inspection Information | | | | |
|----------------------------|------------------------|--------------------|------------------|-------------------|--------------|
| Inspection Type | Îr | nspection Sc | оре | Inspection Notice | |
| Follow-up | F | ull | | Unannounced | |
| Inspection Date 04/25/2023 | В | Begin Time 9:00 AM | | End Time 12:59 PM | |
| Reviewer: | | | | | |
| Sara Goke | | | | | |
| Summary of Findings | | | | | |
| No. Rules Verified | No. Rules with Non-con | npliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58 | 9 | 24 | 0 | 1 | 8 |

| 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 | 12 | 2 | 0 | 2 | |
| Older Toddler | | 14 | 0 | 14 | |
| Preschool | | 25 | 0 | 25 | |
| School Age | | 0 | 40 | 40 | |
| Total Capacity/Enrollment | 100 | 39 | 40 | 81 | |

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

| Toddler 2 | 18 months to < 30 months | 2 to 6 | Toddler 1 & 2 |
|-----------|--------------------------|--------|---------------|
| | | | combined |
| PS 1 | 3 years to < 4 years | 2 to 8 | PS 1 & 2 |
| | 200 | | combined |

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 risk Non-Compilances were observed during this hispection | | |
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Moderate Risk Non-Compliances

Domain: 06 Program Information

Rule: 5101:2-12-14 Transportation - Vehicle Requirements

<u>Code</u>: The program is required to use the correct vehicle type as specified in rule. The program is also required to have all vehicles used to transport children inspected by an ASE certified mechanic, FMCSA inspector or the State Highway patrol annually, and correct all repairs that are listed on the vehicle inspection report.

<u>Finding</u>: During the inspection, it was determined the program used a vehicle to transport children that was not approved and/or did not have a current annual vehicle inspection indicating the vehicle was mechanically safe as noted in number(s) 4 below:

- 1. The program used a converted cargo van or passenger vans designed to carry ten or more passengers. The program must cease the use of this vehicle immediately.
- 2. The vehicle was not inspected.
- 3. The vehicle was inspected by someone other than an ASE certified mechanic, federal motor carrier safety administration (FMCSA) safety inspector or the Ohio State Highway Patrol.
- 4. The vehicle inspection was not updated annually.
- 5. The vehicle inspection completed from the Ohio Highway Patrol did not meet the rule requirement.

6. The annual safety check of the vehicle(s) used by the program to transport children noted repairs or corrections that had not been completed and/or documented. The safety violations need to be corrected immediately.

Submit the program's corrective action plan, which includes either discontinuing the use of the vehicle, documentation for any new vehicle now being used to transport children, or a copy of the JFS 01230 "Vehicle Inspection Report for Child Care Centers", to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/26/2023

Low Risk Non-Compliances

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

<u>Code</u>: The program is required to have a method for tracking the children in each group. The tracking method must be updated throughout the day and kept with the group at all times.

<u>Finding</u>: During the inspection, it was determined that the method for tracking children in each group did not meet the requirements of the rule as noted in number(s) 4 below:

- 1. There was no method in place;
- 2. The method did not include each child's name;
- 3. The method did not include each child's date of birth;
- 4. The tracking method did not remain with the group at all times; Toddler
- 5. The tracking method was not updated throughout the day as children entered or left the group.

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

Corrective Action Plan Due: 05/26/2023

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

<u>Code</u>: The program is required to provide an environment that protects the children in care from any items and conditions that may threaten their health, safety, and well-being.

<u>Finding</u>: Children in care shall be protected from any items and conditions which threaten their health, safety, and well-being. During the inspection, it was determined that at least one area of the program or at least one piece of equipment had chipping or peeling paint. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/26/2023

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Sanitary Equipment and Environment

Code: The program is required to follow the cleaning schedule for equipment.

<u>Finding</u>: During the inspection, it was determined that the items noted in number(s) 1, 2, 3 below were not cleaned weekly, or when soiled, as required:

- 1. Carpets.
- 2. Floors.
- 3. Washable furniture.

Furniture, materials and equipment must be maintained according to the cleaning and sanitizing schedule in Appendix A to this rule. 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.

Domain: 03 Postings & Equipment

Rule: 5101:2-12-17 Materials and Equipment

<u>Code</u>: The program is required to have play materials accessible and orderly.

<u>Finding</u>: During the inspection, it was determined that play materials were not accessible/orderly for the following reason(s) as noted in number(s) 2 below:

1. Play materials were not readily accessible to the children in the [] classroom;

2. Play materials were not arranged in an orderly manner so that children have opportunities to select, remove and replace play materials with minimal assistance during the day in the preschool classroom.

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.

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Play Fall Zones

<u>Code</u>: The program is required to provide adequate fall surface for the outdoor play space.

<u>Finding</u>: During the inspection, it was determined that while there was adequate fall surface material in the outdoor play space, proper distribution had not been maintained under and around equipment as required. Submit the program's corrective action plan, which includes a statement that fall surface material has been properly redistributed, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/26/2023

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to be completed and on file at the program.

<u>Finding</u>: In review of the staff records, it was determined a completed medical examination statement for the employee(s) listed on the Employee Record Chart was not on file, as required by this rule. Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/26/2023

Domain: 08 Staff Files

Rule: 5101:2-12-10 Health Training Requirements



Code: The program is required to maintain a staff schedule with coverage of the required health trainings.

<u>Finding</u>: In review of the staff records, it was determined the program did not have at least one child care staff member present/scheduled to be present during all hours of operation with currently valid documentation for the training(s) listed in number(s) 10 below:

- 1. First Aid child care staff members scheduled during the hours of [] and [] had expired training
- 2. First Aid child care staff members scheduled during the hours of [] and [] did not have verification of completion of First Aid
- 3. First Aid trained child care staff member was not present in each building used by the program.
- 4. CPR child care staff members scheduled during the hours of [] and [] had expired training
- 5. CPR child care staff scheduled during the hours of [] and [] had did not have verification of completion of CPR
- 6. CPR trained child care staff member was not present in each building used by children
- 7. CPR training taken by staff was not appropriate for all ages and developmental levels of the children in care
- 8. CPR audiovisual or electronic media training taken by staff did not include an in-person component of the training
- 9. Communicable Disease child care staff members scheduled during the hours of [] and [] had expired training
- 10. Communicable Disease child care staff scheduled during the hours of 7:30AM and 9:30AM had not taken Communicable Disease training
- 11. Communicable Disease trained child care staff member was not present in each building used by the program
- 12. Child Abuse child care staff members scheduled during the hours of [] and [] had expired training
- 13. Child Abuse child care staff scheduled during the hours of [] and [] had not taken Child Abuse training
- 14. Child Abuse trained child care staff was not in each building used by the program

Refer to the Employee Record Chart for specific details. Submit the program's corrective action plan, which includes verification of complete coverage for any training listed, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/26/2023

Domain: 09 Children's Files

Rule: 5101:2-12-15 Child Medical and Enrollment Records

<u>Code</u>: 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: 05/26/2023

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 | |
| | | |
| - <u>-</u> | | - |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-03 Inspection | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |

| Rule: 5101:2-12-04 Building | Compliant | Decumenting Statements On the day of |
|--|-----------|--|
| | Compliant | Documenting Statement: On the day of |
| Department Inspection | | the inspection, the program was |
| | | operating in compliance with the current |
| | | building approval(s). |
| | | |
| Rule | Chatus | Decumenting Statement(s) If applicable |
| | 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 8/25/23. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Food Service | | Documenting Statement: The food service |
| 000 | Compliant | S . |
| Requirements | | license was observed posted. Following is |
| | | the audit number and date of expiration: |
| | | TJOS-CPWLXF, 3/1/24. |
| | | |
| Pollo | Chahira | Decumenting Statements of a muliciple |
| 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 | Jestinolian & Seattle Hole, in application |
| Qualifications | Compilant | |
| Qualifications | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator | Compliant | |
| Responsibilities/Requirements | | |
| The second secon | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Written Program | Compliant | |
| Policies and Procedures | * | |
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| 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 |
| 5101:2-12-08 Orientation Training & | Compliant | |
| Whistle Blower Protection | | |
| | l c: . | |
| 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 Professional | Compliant | |
| Development Requirements | 207 | |
| | W | |
| 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 | |
| Under 2 1/2 Years | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Space | Compliant | Documenting Statement: The quarterly |
| Requirements | | playground inspections were completed |
| | | and documented, as required. The most |
| | | recent inspection report form was dated |
| | | 1/15/23. |
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| Dula | Chahira | Decument's Chataman to 15 11 |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Equipment | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Equipment | Compliant | |
| | | |
| | | |
| 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 | |
| Environment | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Toothbrushing | Compliant | |
| Requirements | | |
| D.J. | Chatana | Decomposition Charles (1) If the little of t |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-14 Transportation and Field | Compliant | |
| Trip Procedures | | |
| Rule | Status | Decumenting Statement(s) If applies Lie |
| 5101:2-12-14 Transportation - Driver | | Documenting Statement(s), If applicable |
| Requirements | Compliant | |
| Nequirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
|------------------------------------|-----------|---|
| 5101:2-12-15 Medical/Physical Care | Compliant | 8 |
| Plans | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Medical, Dental, and | Compliant | |
| General Emergency Plan | 19 | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Emergency Drills | Compliant | |
| 10 | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 First Aid/Standard | Compliant | |
| Precautions | | |
| Dol. | Cooking | D |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Management of | Compliant | |
| Communicable Disease | | |
| P. J. | Chatan | D |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Incident/Injury | Compliant | |
| Reporting | | |
| Rule | Status | Decumenting Statement(s) If applicable |
| 5101:2-12-16 Written Disaster Plan | | Documenting Statement(s), If applicable |
| 3101.2-12-10 Willien Disaster Flan | Compliant | |
| | <u> </u> | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Schedule | Compliant | 3 (" 11 |
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| 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 | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 Ratio | Compliant | Sociality State Ment(3), it applicable |
| 310112 12 10 Natio | Simpliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 Group Size | Compliant | (// 11 |
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| Rule | Status | Documenting Statement(s), If applicable |

| 5101:2-12-19 Supervision | Compliant | |
|--|--|---|
| D.J. | Chatana | Decree d'a Chaire and Alfred Chair |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Child Guidance | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| A CONTRACTOR OF THE CONTRACTOR | | Documenting Statement(s), if applicable |
| 5101:2-12-20 Cots and Napping | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-21 Evening and Overnight | Compliant | December of the second of the |
| Care | Compilant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Meal and Snack | Compliant | bocamenting statement(s), it applicable |
| Requirements | Compilant | |
| requirements | | |
| 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 | Compliant | |
| Handling/Storage | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Diapering and Toilet | Compliant | |
| Training | * | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-24 Swimming and Water | Compliant | |
| Safety Requirements | • | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5575990-4 | The State of the S | |
| | | |
| 5101:2-12-25 Medication Administration | Compliant | |