

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 | nils | | |
|----------------------------------|---------------------|-----------------|-----|-------------------|
| Program Name | Program Number | | Pro | ogram Type |
| CHILDTIME CHILDREN'S CENTERS INC | 000000403232 | | Ch | ild Care Center |
| | | | | |
| Address | | | | unty |
| 145 N TRIMBLE RD MANSFIELD | | | RIC | CHLAND |
| OH 44906 | | | | |
| | | | | |
| | | | | |
| Building Approval Date | Use Group/Code | Occupancy Limit | | Maximum Under 2 ½ |
| 11/11/1978 | BB 61 (1972- | 95 | | |
| | 1979) | | | |
| Fire Inspection Approval Date | Food Service Risk L | evel | | |
| 05/08/2018 | Level III | | | |

| | Inspection Information | | | | |
|---------------------|--------------------------------|--------------------|-------------------|--------------|--|
| Inspection Type | Inspection Sc | cope | Inspection Notice | | |
| Follow-up | Full | | Unannounced | | |
| Inspection Date | Begin Time 8 | :30 AM | End Time 11:33 AM | | |
| 03/22/2023 | | | | | |
| Reviewer: | | | | | |
| MATTHEW PIGNA | ТО | | | | |
| Summary of Findings | | | | | |
| | | innary of Findings | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk | |
| 58 | 6 | 0 | 1 | 6 | |

| 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) | | 13 | 0 | 13 | |
| Young Toddler | | 15 | 0 | 15 | |
| Total Under 2 ½ Years | 40 | 28 | 0 | 28 | |
| Older Toddler | | 7 | 0 | 7 | |
| Preschool |] | 29 | 0 | 29 | |
| School Age | | 0 | 0 | 0 | |
| Total Capacity/Enrollment | 95 | 36 | 0 | 64 | |

Staff-Child Ratios at the Time of Inspection



Department of Education Department of Job and Family Services

| Group | Age Group/Range | Ratio Observed | Comment |
|-----------------------------|--------------------------|----------------|--|
| Infant 1 | 0 to < 12 months | 1 to 2 | 1st |
| Infant 1 | 0 to < 12 months | 1 to 3 | 2nd |
| Infant 2 | 12 months to < 18 months | 2 to 5 | 1st |
| Infant 2 | 12 months to < 18 months | 2 to 8 | 2nd |
| Early Preschool (Toddler 2) | 30 months to < 36 months | 1 to 6 | 1st |
| Early Preschool (Toddler 2) | 30 months to < 36 months | 2 to 10 | 2nd |
| Toddler | 18 months to < 30 months | 2 to 7 | 1st |
| Toddler | 18 months to < 30 months | 2 to 10 | 2nd |
| Pre-K | 3 years to < 4 years | 2 to 20 | 1st - Pre-K and Preschool combined at arrival |
| Pre-K | 4 years to < 5 years | 2 to 16 | 2nd |
| Preschool | 3 years to < 4 years | 1 to 6 | 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

Moderate Risk Non-Compliances

Domain: 09 Children's Files

Rule: 5101:2-12-25 Medication Administration

<u>Code</u>: The program is required to use the appropriate form and retain current documentation to administer medications. The program is also required to obtain separate documentation for each medication and child, and retain on file each JFS 01217 "Request for Administration of Medication for Child Care" for at least one year. The program is required to administer medication only if it has the prescription label attached or has written



instructions from a licensed physician. The program is also required to have each medication to be administered stored in its original container.

<u>Finding</u>: During the inspection, it was determined the program did not meet the requirement(s) for administering a medication or medical food that is not required by a JFS 01236 "Child Medical/Physical Care Plan for Child Care" or a prescription topical product to a child as noted in number 1 below:

- 1. No JFS 01217 "Request for Administration of Medication for Child Care" was on file.
- 2. The child's name was missing on the JFS 01217.
- 3. The child's date of birth was missing on the JFS 01217 and was needed to determine the correct dosage.
- 4. The child's weight was missing on the JFS 01217 and was needed to determine the correct dosage.
- 5. The name of the medication was missing on the JFS 01217.
- 6. The exact dose was missing on the JFS 01217.
- 7. The time to administer was missing on the JFS 01217.
- 8. The time period to administer was missing on the JFS 01217.
- 9. The medication's expiration date was missing on the JFS 01217.
- 10. The Parent/Guardian's dated signature was missing on the JFS 01217.
- 11. Physician instructions were missing on the JFS 01217.
- 12. Possible side effects were missing on the JFS 01217.
- 13. Physician's dated signature was missing on the JFS 01217.
- 14. Physician's phone number was missing on the JFS 01217.
- 15. Date medication was administered was missing on the JFS 01217.
- 16. Time medication was administered was missing on the JFS 01217.
- 17. Dosage administered was missing on the JFS 01217.
- 18. Staff member's signature was missing on the JFS 01217.
- 19. A prescription label was not attached to the prescription medication.
- 20. The medication or product, [], was not brought to the program in its original container.
- 21. Parent instructions conflict with either the manufacturer or physician instructions.

Submit the program's corrective action plan, which includes the completed JFS 01217 for each child needed, verification that the prescription label is now attached, and/or verification that the medication or product is now in its original container, and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/21/2023

Low Risk Non-Compliances

Domain: 08 Staff Files



Rule: 5101:2-12-08 Medical Statement

<u>Code</u>: 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 employees 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: 04/21/2023

Domain: 08 Staff Files

<u>Rule</u>: 5101:2-12-08 Child Care Staff Member Educational Requirements <u>Code</u>: The program staff is required to have educational verification on file at the program or in the Ohio Professional Registry.

<u>Finding</u>: In review of the staff records, it was determined that verification of a high school education was not on file nor verified in the Ohio Professional Registry for Child Care Staff Member listed on the Employee Record Chart, as required. Submit the program's corrective action plan, which includes a copy of the verification of a high school education, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/21/2023

Domain: 08 Staff Files

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

<u>Code</u>: The program is required to have all child care staff members complete training in child abuse and neglect recognition and prevention within sixty days of hire. Staff must complete training in first aid and CPR within the first ninety days of hire.

<u>Finding</u>: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in numbers 2, 3, 5, 6 below:

1. Child abuse and neglect recognition and prevention training was not completed within sixty days of hire.

- 2. First aid training was not completed within ninety days of hire.
- 3. Cardiopulmonary resuscitation (CPR) training was not completed within ninety days of hire.
- 4. The child abuse and neglect recognition and prevention training was expired.
- 5. The first aid training was expired.
- 6. The CPR training was expired.



Refer to the Employee Record Chart for the names of the child care staff members who must complete the required health and safety trainings. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/21/2023

Domain: 09 Children's Files

<u>Rule</u>: 5101:2-12-15 Child Medical and Enrollment Records <u>Code</u>: The program is required to use the updated JFS 01234 "Child Enrollment and Health Information For Child Care".

<u>Finding</u>: In review of 25% of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in numbers 2, 4, 6, 8, 10, 13, 14, 15 below.

- 1. No enrollment form was completed for at least one child
- 2. The current JFS 01234 was not completed for at least one child
- 3. Complete child information
- 4. Complete parent information
- 5. Complete emergency contact information
- 6. Complete physician information
- 7. Information regarding the parent list
- 8. Health information
- 9. Additional information for all boxes checked "yes"
- 10. Emergency transportation information
- 11. Parent/guardian's signature
- 12. Diapering Statement
- 13. Acknowledgement of Policies and Procedures
- 14. Enrollment form for at least one child was not updated by either the parent or the administrator
- 15. Enrollment form for at least one child was not signed by the administrator
- 16. Other []

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: 09 Children's Files

<u>Rule</u>: 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 numbers 2, 9 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: 04/21/2023

Domain: 09 Children's Files

Rule: 5101:2-12-15 Medical/Physical Care Plans

<u>Code</u>: The program is required to maintain a complete JFS 01236 "Child Medical/Physical Care Plan for Child Care" on file for any child having a health condition.

<u>Finding</u>: In review of the children's records, it was determined that the JFS 01236 "Child Medical/Physical Care Plan for Child Care" did not meet the requirements of the rule as noted in number 3 below:

1. The JFS 01236 had not been updated as needed and at least annually.

- 2. A separate JFS 01236 had not been used for each condition.
- 3. The program used an old version of the JFS 01236.



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

Corrective Action Plan Due: 04/21/2023

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 | |
| | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-03 Inspection | Compliant | |
| Requirements | | |
| - | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Building Department | Compliant | |
| Inspection | | |
| 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 $8/1/23$. |
| | | |
| 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 with the rule requirements.

| Rule | Status | Documenting Statement(s), If applicable |
|---------------------------------|-----------|--|
| Rule: 5101:2-12-04 Food Service | Compliant | Documenting Statement: During the |
| Requirements | | inspection, it was determined the |
| | | program had documentation they had |
| | | applied and paid for the renewal of the |
| | | annual food service license. Please be |
| | | reminded to post the new food service |
| | | license once it has been received from the |
| | | health department. |
| | | |

| 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 | | |

| 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 |
|-------------------------------|-----------|---|
| 5101:2-12-09 Background Check | Compliant | |
| Requirements | | |

| Rule | Status | Documenting Statement(s), If applicable |
|---------------------------|-----------|---|
| 5101:2-12-10 Professional | Compliant | |
| Development Requirements | | |

| 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 Under 2 1/2 Years | Compliant | |
|---|---------------------|---|
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Space Requirements | Compliant | |
| Requirements | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Equipment | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Fall Zones | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Equipment | Compliant | |
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| Dula | Chatura | |
| Rule 5101:2-12-12 Safe Environment | Status Compliant | Documenting Statement(s), If applicable |
| 5101.2-12-12 Sale Environment | Compliant | |
| - · | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Sanitary Equipment and Environment | Compliant | |
| | I | |
| 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 | compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Medical, Dental, and General Emergency Plan | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Emergency Drills | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 First Aid/Standard | Compliant | Documenting Statement: During the |
| Precautions | | inspection, the program had complete |
| | | first aid kits available as required. |
| | | |
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| Rule | Status | Documenting Statement(s), If applicable |
|------------------------------------|-----------|---|
| 5101:2-12-16 Management of | Compliant | |
| Communicable Disease | | |
| | | I |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Incident/Injury | Compliant | |
| Reporting | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Written Disaster Plan | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Schedule | Compliant | |
| S101.2-12-17 Daily Schedule | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Materials and | Compliant | |
| Equipment | | |
| · · · | | |
| 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 |
| Rule: 5101:2-12-18 Ratio | Compliant | Documenting Statement: Staff/child |
| | compliant | ratios observed during the inspection |
| | | were in compliance. |
| | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 Group Size | Compliant | |
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| 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), if applicable |
| | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Child Guidance | Compliant | |
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Department of Education Department of Job and Family Services

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|---|---------------|---|
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-20 Cots and Napping | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-20 Cribs | Compliant | |
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| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Meal and Snack | Compliant | |
| Requirements | | |
| L • | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Fluid Milk Requirements | Compliant | |
| 5101.2-12-22 Huld Wilk Requirements | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Safe Food | Compliant | |
| | Compliant | |
| Handling/Storage | | |
| | • •••• | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Infant Daily Care | Compliant | |
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| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Infant Bottle and Food | Compliant | |
| Preparation | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Diapering and Toilet | Compliant | |
| Training | 1 | |
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