

## **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       |  |
| KIDDY GROVE DAY CARE CENTER                               | 000000403642            |                 | Child Care Center  |  |
| Address<br>3266 E CLEVELAND AVENUE GROVE CITY<br>OH 43123 |                         |                 | County<br>FRANKLIN |  |
| Building Approval Date                                    | Use Group/Code          | Occupancy Limit | Maximum Under 2 ½  |  |
| 03/15/1991  | BB 61 (1972-<br>1979)   | 121             |                    |  |
| Fire Inspection Approval Date                             | Food Service Risk Level |                 |                    |  |
| 12/11/2017  | Level IV                |                 |                    |  |

| Inspection Information     |                                |                  |                               |              |
|----------------------------|--------------------------------|------------------|-------------------------------|--------------|
| Inspection Type<br>Annual  | Inspection So<br>Full          | cope             | Inspection Notice Unannounced |              |
| Inspection Date 11/23/2022 | Begin Time 9                   | :15 AM           | End Time 1:15 PM              |              |
| Reviewer: Bradie McAfee    |                                |                  |                               |              |
| Summary of Findings        |                                |                  |                               |              |
| No. Rules Verified         | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk             | No. Low Risk |
| 56                         | 10                             | 0                | 1                             | 9            |

| 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)                                 |                  | 3          | 0         | 3     |
| Young Toddler   |                  | 3          | 0         | 3     |
| Total Under 2 ½ Years                                     | 32               | 6          | 0         | 6     |
| Older Toddler   |                  | 2          | 0         | 2     |
| Preschool   |                  | 11         | 0         | 11    |
| School Age  |                  | 36         | 0         | 36    |
| Total Capacity/Enrollment                                 | 111              | 49         | 0         | 55    |

| Group      | Age Group/Range          | Ratio Observed | Comment                |
|------------|--------------------------|----------------|------------------------|
| School Age | School-Age to < 11 years | 1 to 17        |                        |
| School Age | School-Age to < 11 years | 2 to 17        |                        |
| 2's        | 30 months to < 36 months | 1 to 8         | Combined with 3's      |
| 2's        | 18 months to < 30 months | 2 to 10        | Combined with 3's      |
| 3's        | 30 months to < 36 months | 1 to 8         | Combined with<br>Two's |
| 3's        | 18 months to < 30 months | 2 to 10        | Combined with 2's.     |
| Infant     | 0 to < 12 months         | 1 to 5         |                        |

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

Domain: 07 Diapering & Infant Care

Rule: 5101:2-12-20 Cribs

<u>Code</u>: The program is required to place infants in cribs while sleeping.

<u>Finding</u>: During the inspection, it was determined that the equipment in number 8 below had been used for sleeping infants and did not allow the infant to sleep on a firm mattress:

- 1. Mesh cribs;
- 2. Play pens;

- 3. Bassinets;
- 4. Cots;
- 5. Car seats;
- 6. Infant swing;
- 7. The floor;
- 8. Infant seats;
- 9. An infant placed in a car seat in a crib;
- 10. Other [ ].

Infants must be provided with a crib, which meets requirements specified in this rule, for resting and sleeping. Provide staff training. Submit the program's corrective action plan, which includes a statement that staff training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/23/2022

## **Low Risk Non-Compliances**

## **Domain: 00 License & Approvals**

Rule: 5101:2-12-04 Building Department Inspection

<u>Code</u>: The program is required to maintain a copy of the certificate of occupancy on file at the center for review.

<u>Finding</u>: During the inspection, it was determined the program did not have a copy of the certificate of occupancy available on-site for review. Submit the program's corrective action plan, which includes a copy of the certificate of occupancy, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/23/2022

#### **Domain: 04 Indoor/Outdoor Space**

Rule: 5101:2-12-11 Outdoor Play Equipment

<u>Code</u>: The program is required to provide equipment that does not pose a safety risk.

<u>Finding</u>: During the inspection, it was determined that outdoor play equipment was unsafe as noted in numbers 1 and 11 below:

- 1. There was rust exposed; (Bikes, Large Playground structure, Swings)
- 2. There was protruding bolts;
- 3. There were cracks;
- 4. There were holes;
- 5. There was splintering wood;
- 6. There were sharp edges or points;
- 7. There were lead hazards;
- 8. There were toxic substances;
- 9. There were tripping hazards;
- 10. There was chipped and/or peeling paint;
- 11. Other- Pole by rear fence that needs removed.

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

Corrective Action Plan Due: 12/23/2022

#### Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Space Requirements

<u>Code</u>: The program is required to have an outdoor play space free from immediate risk.

<u>Finding</u>: During the inspection, it was determined that an area was used which was not protected from traffic and other hazards by a fence in good repair, or other barrier. Although the fence or natural barrier was not meeting the rule requirements, it was determined to not present an immediate risk for a child to be able to leave the playground. The fence or gate was not in good repair and/or being used inappropriately as noted in number 3 below:

- 1. The fencing had missing slat boards.
- 2. The fencing was broken.
- 3. The fencing was loose. (Fencing along field side)
- 4. The fencing was rotting.
- 5. The gate was broken and did not close.
- 6. The gate was locked.
- 7. The latch on the gate was broken.
- 8. The latch was easily opened by children on the playground.
- 9. The gate had no latch.

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

Corrective Action Plan Due: 12/23/2022

#### Domain: 05 Health & Safety

Rule: 5101:2-12-22 Meal and Snack Requirements

<u>Code</u>: The program is required to post the current weekly menu in a noticeable location that is accessible to parents and note any substitutions at the time of the change.

<u>Finding</u>: During the inspection, it was determined that the program's weekly menu did not meet the requirement as noted in numbers 3 and 6 below.

- 1. The menu was not posted.
- 2. The posted menu was not in a visible place readily accessible to parents.
- 3. The menu was not currently dated.
- 4. The entire menu was substituted.
- 5. At least one item on menu did not match what was served.
- 6. The meal or snack served did not match the posted menu.

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: 05 Health & Safety

Rule: 5101:2-12-16 Management of Communicable Disease

Code: The program is required to post the JFS 08087 "Ohio Communicable Disease Chart".

<u>Finding</u>: During the inspection, it was determined that the JFS 08087 "Ohio Communicable Disease Chart" was not posted as required, as indicated in number 3 below:

- 1. The chart was not posted.
- 2. In a location readily available to program staff and parents.
- 3. The posted chart was not the current version.
- 4. The posted chart was not displayed in the size available in the ODJFS forms central to be easily read.

Technical assistance was provided at the time of inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.



**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.

<u>Finding</u>: 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: 12/23/2022

**Domain: 08 Staff Files** 

Rule: 5101:2-12-07 Administrator Qualifications

<u>Code</u>: The program administrator is required to complete the rules course reivew within the defined time

period.

<u>Finding</u>: During the inspection, it was determined that the administrator had not completed the required rules review course provided by this Department for program administrators within the time period defined in 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: 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, medical foods and topical products. The program is also required to obtain separate documentation for each medication/product and child.

<u>Finding</u>: During the inspection, it was determined the program did not meet the requirements for the JFS 01217 "Request for Administration of Medication for Child Care" as noted in number 6 below:

- 1. The program used an old version of the JFS 01217.
- 2. The signature date on the JFS 01217 exceeded more than 12 months.
- 3. The time period to administer the medication or medical food on the JFS 01217 was exceeded.
- 4. The JFS 01217 included more than one medication or medical food.
- 5. The JFS 01217 included more than one child's name.
- 6. The prescription label was not current.

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

Corrective Action Plan Due: 12/23/2022

#### **Domain: 09 Children's Files**

Rule: 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 number 12 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.



# 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    | bocumenting statement(s), it applicable |
|                                      | Sompliant .  |   |
|                                      |              |   |
| Rule                                 | Status       | Documenting Statement(s), If applicable |
| 5101:2-12-03 Inspection              | Compliant    |   |
| Requirements                         |              |   |
| Rule                                 | Status       | Documenting Statement(s), If applicable |
|                                      | Compliant    | Documenting Statement(s), if applicable |
| 5101:2-12-04 Fire Inspection         | Comphant     |   |
|                                      |              |   |
| Rule                                 | Status       | Documenting Statement(s), If applicable |
| 5101:2-12-04 Food Service            | Compliant    |   |
| Requirements                         |              |   |
|                                      |              |   |
| 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         | Not Verified |   |
| Policies and Procedures              |              |   |
|                                      | 1            |   |
| Rule                                 | Status       | Documenting Statement(s), If applicable |
| 5101:2-12-08 Child Care Staff Member | Compliant    |   |
| Educational Requirements             |              |   |
|                                      | T            |   |
| 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                                 | Compliant           |   |
| Requirements  |                     |   |
|   | 1.                  |   |
| Rule  | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-10 Health Training                                  | Compliant           |   |
| Requirements  |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-10 Professional                                     | Compliant           | 0                                       |
| Development Requirements                                      |                     |   |
|   |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-11 Indoor Space                                     | Compliant           |   |
| Requirements  |                     |   |
| Rule  | Ctatus              | Decumenting Statement/s\ If applicable  |
| 5101:2-12-11 Separation of Children                           | Status<br>Compliant | Documenting Statement(s), If applicable |
| Under 2 1/2 Years   | Compliant           |   |
| 0.1.0.0. 2 2,2 1 00.0   | <u> </u>            |   |
| 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           | Documenting statement(s), it applicable |
| STOTIL IL IL SUITE EQUIPMENT                                  |                     |   |
|   |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Environment                                 | Compliant           |   |
|   |                     |   |
| Rule  | Status              | Documenting Statement(s), If applicable |
| 5101:2-12-13 Sanitary Equipment and                           | Compliant           | 0 (7 )                                  |
| Environment   |                     |   |
|   |                     |   |
| 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           | Documenting Statement(s), it applicable |
| Environment   | Joniphane           |   |
|   | 1                   |   |
| Rule  | Status              | Documenting Statement(s), If applicable |

| D   5404 0 40 44 = 1 11 11 11         | 0 1: 1        | D                                       |
|---------------------------------------|---------------|---|
| Rule: 5101:2-12-14 Transportation and | Compliant     | Documenting Statement: The form(s)      |
| Field Trip Procedures                 |               | used by the program for routine and/or  |
|                                       |               | field trips were verified to meet the   |
|                                       |               | requirements of the rule.               |
|                                       |               | requirements of the fule.               |
|                                       | 1             |   |
|                                       |               |   |
| Rule                                  | Status        | Documenting Statement(s), If applicable |
| 5101:2-12-14 Transportation - Driver  | Compliant     |   |
| Requirements                          |               |   |
|                                       |               |   |
| Rule                                  | Status        | Documenting Statement(s), If applicable |
| 5101:2-12-14 Transportation - Vehicle | Compliant     | Doddinenting statement(s); it approasts |
|                                       | Compliant     |   |
| Requirements                          |               |   |
|                                       |               |   |
| Rule                                  | Status        | Documenting Statement(s), If applicable |
| 5101:2-12-15 Medical/Physical Care    | Compliant     |   |
| Plans                                 |               |   |
|                                       | 1             | l                                       |
| Rule                                  | Status        | Documenting Statement(s), If applicable |
|                                       |               | bocumenting 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     |   |
|                                       |               |   |
|                                       |               | <u> </u>                                |
| Rule                                  | Status        | Documenting Statement(s), If applicable |
| 5101:2-12-16 First Aid/Standard       | Compliant     |   |
| Precautions                           | Compilant     |   |
| Precautions                           |               |   |
|                                       |               |   |
| 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    | Not Verified  |   |
| JIOI.2 12 10 WHILLEH DISUSCELLIAN     | Troc verifica |   |
| L                                     | 1             |   |
| Dulo                                  | Ctatus        | Decumenting Statement(s) If a relicible |
| Rule                                  | Status        | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Schedule           | Compliant     |   |
|                                       | 1             |   |
|                                       |               |   |
| Rule                                  | Status        | Documenting Statement(s), If applicable |
| 5101:2-12-17 Materials and            | Compliant     |   |
| Equipment                             |               |   |
| ' '                                   | 1             | ı                                       |
| Rule                                  | Status        | Documenting Statement(s), If applicable |
|                                       |               | bocumenting 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  |   |
|                                      |            |   |
|                                      | Т          |   |
| 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  | bocamenting statement(s), it applicable |
| 3101.2 12 10 Group 3:20              | Compliant  |   |
|                                      | <u>.I</u>  |   |
| 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  |   |
|                                      |            |   |
|                                      | Chatana    | December Chatamant (a) If applicable    |
| 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  | Documenting statement (4),              |
| 3101.2 12 20 0000 0                  | Compliant  |   |
|                                      | . <u>.</u> |   |
| 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                     |            |   |
|                                      | Т          | 12                                      |
| Rule                                 | Status     | Documenting Statement(s), If applicable |
| 5101:2-12-23 Infant Daily Care       | Compliant  |   |
|                                      | <u> </u>   |   |
| Rule                                 | Status     | Documenting Statement(s), If applicable |
| 5101:2-12-23 Infant Bottle and Food  | Compliant  | Documenting Statement(5), if applicable |
| Preparation                          | Compliant  |   |
| Freparation                          | <u>l</u>   |   |
| Rule                                 | Status     | Documenting Statement(s), If applicable |
| 5101:2-12-23 Diapering and Toilet    | Compliant  | Documenting statement(s), it applicable |
| Training                             | Compliant  |   |
| Halling                              | <u> </u>   |   |
|                                      |            |   |

