

# **Family Child Care 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	
MOSS DAY CARE	000000406189		FCC - Type A Home	
Address	IS.		County	
4060 HAMBURG ROAD	4060 HAMBURG ROAD		FAIRFIELD	
LANCASTER				
OH 43130				
Building and Fire Approvals apply to Type A Family Child Care Homes only				
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½	
1780 MA 60	Seebs			
Fire Inspection Approval Date				
07/09/2020				

Inspection Information				
Inspection Type	Inspection So	соре	Inspection Notice	
Compliance	Full	2396	Unannounced	
Inspection Date	Begin Time		End Time	
04/08/2025	11:07 AM		1:20 PM	
Reviewer:	*			
Shannon Adams				
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
66	6	0	2	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)		1	0	1
Young Toddler		5	0	5
Total Under 2 Years	5	6	0	6
Older Toddler		1	0	1
Preschool		6	0	6
School Age		7	0	7
Total Capacity/Enrollment	12	14	0	20

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Moss Daycare Mixed Age Group	Mixed Age Group	2 to 12	





## **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: 02 Safe & Sanitary Environment

Rule: 5180:2-13-12 Safe Environment

Code: The program is required to protect children from any items and conditions which threaten their health, safety, and well-being.

Findings: 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 the program did not protect children from an unsafe item or condition or equipment due to the following number 18 below:

- 1. Pull cord(s) on the window blind(s).
- 2. Extension cord(s); electrical cord(s) attached to an object that could result in a severe injury if pulled.
- 3. Stacked tables.
- 4. Folding tables.
- 5. Matches and/or a lighter.
- 6. Power tool(s).
- 7. Live wires.
- 8. Stove(s) that are either on or able to be turned on by a child.
- 9. Asbestos.
- 10. Traffic.
- 11. A body of water.
- 12. A well.
- 13. Environmental hazard(s) confirmed by local authorities having jurisdiction over the hazard.
- 14. A crockpot used to heat bottles.



- 15. Immediate access to a knife.
- 16. Large or heavy pieces of shelving units are not securely anchored to the wall.
- 17. Marijuana was accessible to children.
- 18. Other space heater in use within reach.

Any hazardous equipment must be removed, replaced, or repaired and any hazardous condition must be corrected and must be made inaccessible to children. Provide staff training. Submit the program's corrective action plan, which includes a statement that the item or condition has been removed and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/09/2025

Domain: 07 Diapering & Infant Care

Rule: 5180:2-13-20 Crib and Playpen Requirements

Code: The program staff is required to place infants in a crib or playpen with no strangulation hazards.

Findings: During the inspection, it was determined that an infant was placed in a crib with the following suffocation or strangulation hazard - blanket. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 05/09/2025

## **Low Risk Non-Compliances**

Domain: 05 Health & Safety

Rule: 5180:2-13-16 First Aid Kit/Standard Precautions

Code: The program is required to meet the requirements for first aid kits.

Findings: During the inspection, it was determined that the program did not have a first aid kit onsite as required, that included all items listed in the appendix A of the rule. The kit was missing the item or the item was not replaced after use and/or expired listed in number 12 below:

- 1. One roll of first-aid tape;
- 2. Individually wrapped sterile gauze;

squares in assorted sizes;

- 3. Sterile adhesive bandages in assorted sizes;
- 4.Tweezers;



- 5. Gauze rolled bandage;
- 6. Triangular bandage;
- 7. Rounded end scissors;
- 8. Tooth preservation system or fresh chilled liquid milk in which to transport a lost permanent tooth, including a written reference indicating location of the refrigerator/freezer where milk is stored if a tooth preservation system is not part of the first aid kit (for programs serving school age children only);
- 9. A working digital thermometer;
- 10. Disposable non-latex gloves;
- 11. A working flashlight;
- 12. An instant cold pack that has not been activated or ice, including a written reference indicating location of the refrigerator/freezer where the ice is stored if an instant cold pack is not part of the first aid kit;
- 13. Sealable leak-proof plastic bags in assorted sizes or double bagged plastic bags that can be securely tied for materials soiled with blood or bodily fluids;
- 14. Pocket mask or face shield, appropriate; for all ages of children in care, for cardiopulmonary resuscitation (CPR) administration;
- 15. Soap or waterless sanitizer (field trip or transporting away from the program only);
- 16. Bottled water (field trip or transporting away from the program only).

Correct the violation and submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/09/2025

#### **Domain: 08 Staff Files**

Rule: 5180:2-13-07 Staff Records

Code: The program is required to maintain a file for each staff member at the program.

Findings: During the inspection, it was determined that documentation was not on file at the program to meet the requirements of this rule for the employee and/or child care staff members, as noted on the Employee Record Chart. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/09/2025

### **Domain: 08 Staff Files**

Rule: 5180:2-13-10 Health Training

Code: The program is required to meet the health training requirements.

Findings: In review of records, it was determined the CCSM or Substitute CCSM was left alone with children and did not have current valid documentation for training listed in number 14 below:

1. First Aid - expired training



- 2. First Aid did not have verification of completion of First Aid training
- 3. First Aid documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
- 4. CPR expired training
- 5. CPR had not taken CPR training
- 6. CPR did not have verification of the completion of CPR training
- 7. CPR training taken did not include all age groups the program serves and developmental levels of all children in care
- 8. CPR documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
- 9. CPR audiovisual or electronic media training taken by staff did not include an in-person component of the training
- 10. Communicable Disease expired training
- 11. Communicable Disease had not taken CD training
- 12. Communicable Disease did not have verification of the completion of the CD training
- 13. Communicable Disease documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
- 14. Child Abuse expired training
- 15. Child Abuse had not taken Child Abuse training
- 16. Child Abuse documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule

Correct the violation and submit the documentation of current certification with the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 05/09/2025

## **Domain: 08 Staff Files**

Rule: 5180:2-13-10 Health Training

Code: The program is required to meet the health training requirements.

Findings: In review of records, it was determined the provider did not have current valid documentation for training listed in number 14 below:

- 1. First Aid expired training
- 2. First Aid did not have verification of the completion of First Aid training
- 3. First Aid documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
- 4. CPR expired training
- 5. CPR had not taken CPR training
- 6. CPR did not have verification of the completion of CPR training
- 7. CPR training taken did not include all age groups and developmental levels of all children in care
- 8. CPR documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
- 9. CPR- audiovisual or electronic media training taken did not include an in-person component of the training



- 10. Communicable Disease expired training
- 11. Communicable Disease had not taken CD training
- 12. Communicable Disease did not have verification of the completion of CD training
- 13. Communicable Disease documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
- 14. Child Abuse expired training
- 15. Child Abuse had not taken Child Abuse training
- 16. Child Abuse documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule

Correct the violation and submit the documentation of current certification with the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 05/09/2025

#### Domain: 09 Children's Files

Rule: 5180:2-13-15 Child Medical and Enrollment Records

Code: The program is required to have a completed JFS 01234 "Child Enrollment and Health Information for Child Care" on file on the premises for each child.

Findings: In review 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 6, 10 and 13 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 [ ]

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

Corrective Action Plan Due: 05/09/2025



# Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Voluntary Temporary	Compliant	bocumenting statement(3), if applicable
Closure	Compliant	
Closure		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 License Visible	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Change of Location	Compliant	
L		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Information in OCLQS	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Provider Medical	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Type A Ownership	Compliant	
	1	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-03 Inspection	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Building Inspections for	Compliant	
Type A Homes		
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Rule	Status	Documenting Statement(s), If applicable



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5180:2-13-04 Fire Inspections for Type	Compliant	
A Homes		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-07 Provider Responsibilities	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13 Written Policies and	Compliant	
Procedures		
Freedures		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Employee Requirements	Compliant	bocamenting statement(s), it applicable
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D. I.		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Child Care Staff	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Whistle Blower	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-09 Background Checks	Compliant	0 (7)
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Pulo	Chatus	Desumenting Statement/s) If applicable
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-10 Professional	Compliant	
Development		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Outdoor Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Outdoor Space	Compliant	······································
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Fall Zone	Compliant	



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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Safe Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Pets	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Handwashing	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Clean environment and	Compliant	
equipment		
Conf. Commercial to		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Toothbrushing	Compliant	With the second
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Driver Requirements	Compliant	The second secon
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Requirements for Field	Compliant	
and Routine Trips	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Ratio and Supervision	Compliant	bootinenting statement(s), it approache
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for Field and Routine Trips		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Smoke Free	-	Documenting Statement(s), it applicable
2190:5-13-13 2WOKE FLEE	Compliant	
D. I.	C: 1	D
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Vehicle Inspections	Compliant	



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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Vehicle Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-15 Health Conditions	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-15 Child Records Retention	Compliant	
and Confidentiality		
Rule	Status	Documenting Statement(s), If applicable
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5180:2-13-16 Medical, Dental, and	Compliant	
General Emergency Plan		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Emergency Drills	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Communicable Diseases	Compliant	
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Rule	Status	Desumenting Statement(s) If applicable
THE CONTROL OF THE CO		Documenting Statement(s), If applicable
5180:2-13-16 Incident/Injury	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Emergency	Compliant	
	Compilant	
Preparedness and Response Plan		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-17 Programming	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-17 Materials and	Compliant	
Equipment		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-18 Group Size and Ratios	Compliant	



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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-18 Attendance	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 School Age Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 Child Guidance	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-20 Sleep and Nap	Compliant	
Requirements		
D. E.	C11	D
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-21 Evening and Overnight	Compliant	
Care		
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	Status	Documenting Statement(s), If applicable
5180:2-13-21 Sanitary Environment	Compliant	
and Hygiene		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-22 Meals and Snacks	Compliant	Documenting Statement(s), if applicable
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Infant Daily Care	Compliant	Documenting Statement(s), it applicable
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-22 Fluid Milk	Compliant	Documenting Statement(3), it applicable
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-22 Food Handling	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Infant Bottle and Food	Compliant	beamening statement(s), in approach
CONTRACTOR	Compliant	
Preparation		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Diapering	Compliant	
observation of appeals. Secondary specialists of a constraint	Schrodocaland Representation to	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-25 Medication	Compliant	
Requirements	**	
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Rule	Status	Documenting Statement(s), If applicable
		Documenting Statement(S), if applicable
5180:2-13-11 Indoor Space	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 On-site Pools	Compliant	
5180.2-13-24 Off-site Foots	Compilant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 Swimming Sites	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 Parent Permission for	Compliant	
Swimming		
Rule	Status	Documenting Statement(s), If applicable
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5101:2-13-08 Review Policies and	Compliant	
Procedures		
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