## Center Licensing Inspection Full Report

All licensed child care programs are inspected at least once each year. Non-compliances are documented and grouped as Serious, Moderate or Low risk violations. Documenting statements and supplemental information may be included in this report. Licensing inspection reports from the previous three years can be viewed on the child care website at http://jfs.ohio.gov/CDC/childcare.stm. This includes complaint investigation reports with substantiated allegations. For any other child care records, please contact the Child Care Help Desk at 1-877-302-2347, option 4.

| Program Details |  |  |  |
| :--- | :--- | :--- | :---: |
| Program Name <br> GLENMONT HOLMES COUNTY HEAD START | Program Number <br> 000000408235 | Program Type <br> Child Care Center |  |
| Address <br> 108 MAIN STREET GLENMONT <br> OH 44628 | County <br> HOLMES |  |  |
|  |  |  |  |
| Building Approval Date <br> 06/09/2004 | Use Group/Code <br> E | Occupancy Limit <br> 72 |  |
| Fire Inspection Approval Date <br> 08/17/2023 | Food Service Risk Level <br> Level III | Maximum Under 2 1/22 <br> 0 |  |


| Inspection Information |  |  |
| :--- | :--- | :--- |
| Inspection Type <br> Annual | Inspection Scope <br> Full | Inspection Notice <br> Unannounced |
| Inspection Date <br> $11 / 14 / 2023$ | Begin Time 10:04 AM | End Time 5:30 PM |

## Reviewer:

MICHELE FAKAN

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

License Capacity and Enrollment at the Time of Inspection

| Age Group | License Capacity | Enrollment |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: |
|  | Totals | Full Time | Part Time | Total |
| Infant ( Birth to < 18 m) |  | 0 | 0 | 0 |
| Young Toddler |  | 0 | 0 | 0 |
| Total Under 2 $1 / 2$ Years | 0 | 0 | 0 | 0 |
| Older Toddler |  | 0 | 0 | 0 |
| Preschool |  | 0 | 0 | 48 |
| School Age |  | 0 | 0 | 0 |
|  |  |  | 0 | 48 |

## Staff-Child Ratios at the Time of Inspection

Group

Beginning!

## Department of Education

Department of Job and Family Services

| PS room 5703 | Mixed Age Group | 2 to 15 | outside play |
| :---: | :---: | :---: | :---: |
| PS room 5703 | Mixed Age Group | 2 to 15 | lunch |
| PS room 5703 | Mixed Age Group | 2 to 15 | nap |
| PS room 5705 | Mixed Age Group | 2 to 12 | am |
| PS room 5707 | Mixed Age Group | 2 to 14 | nap |
| PS room 5707 | Mixed Age Group | 2 to 14 | outside play |
| PS room 5707 | Mixed Age Group | 2 to 14 | lunch |

## Summary of Non-Compliances

If a program disagrees with a licensing finding, the program may request a review of the finding(s). Ohio Administrative Code 5101:2-12-03 and 5101:2-13-03 detail the process for submitting a request for review. The request for review must be submitted within seven business days from the receipt of the licensing report. In addition, if the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited.

## Serious Risk Non-Compliances

No Serious Risk Non-Compliances were observed during this inspection

| Moderate Risk Non-Compliances |
| :--- |
| No Moderate Risk Non-Compliances were observed during this inspection  <br>   |

## Low Risk Non-Compliances

## Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement
Code: The program staff's medical statements are required to be completed and on file at the program.

Finding: In review of the staff records, it was determined that the medical statements for the employees listed on the Employee Record Chart did not meet the requirements as listed in number 5b and 5c below.

1. A medical statement was not on file for at least one employee;
2. The medical statement(s) on file did not have a date of examination within 12 months of the employee's first day of employment;
3. Date of examination was missing;
4. Signature, business address, or telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination was missing;
5. A statement was missing that verifies the employee is:
a. Physically fit for employment in a program caring for children;
b. Immunized against Tetanus, Diphtheria, Pertussis (Tdap);
c. Immunized against Measles, Mumps, and Rubella (MMR);
6. Tuberculosis (TB) screening/test information was missing:
a. Documentation of the screening process to determine if the employee resided in a country identified by the world health organization as having a high burden of TB and arrived in the United States within the five years preceding the date of application for employment.
b. Results of a TB test for employees meeting both criteria in 6 a.
c. Results of additional testing for employees with a positive TB test.
d. Written statement, signed by a representative of the TB control unit, that the employee's TB is no longer infectious or the individual is receiving a TB treatment regimen for employees with a positive TB test.

Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, or TB results/documentation, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/14/2023

## Domain: 08 Staff Files

Rule: 5101:2-12-08 Orientation Training \& Whistle Blower Protection
Code: The program is required to have staff complete the online staff orientation training. Additionally, the training must be completed before they are permitted to have sole responsibility of children.

Finding: In review of the staff records, it was determined that child care staff member(s) did not meet the requirements for completing the online orientation training as noted in number 4 below:

1. The training was not completed within 30 days of starting employment at the program as a child care staff member.
2. Documentation of completing the training after December 31, 2016 was not on file.
3. Completion of the training was not verified in the OPR.
4. A child care staff member had sole responsibility of children and had not completed the online orientation.

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

Corrective Action Plan Due: 12/14/2023

## Domain: 08 Staff Files

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

Finding: 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 1 and 2 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 name(s) of the child care staff member(s) who must complete the required health and safety training(s). Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/14/2023

## Domain: 09 Children's Files

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

Code: The program is required to use the updated JFS 01234 "Child Enrollment and Health Information For Child Care" .

Finding: 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 $3,4,8,9$, 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 [ ]

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 required at this time.

Corrective Action Plan Due: 12/14/2023

## Domain: 09 Children's Files

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

Code: The program is required to have a completed medical on file at the program for each child enrolled.
Finding: 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 1 and 11 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 - physician statement missing from form

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

Corrective Action Plan Due: 12/14/2023

## 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 |  |


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


| Rule | Status | Documenting Statement(s), If applicable |
| :--- | :--- | :--- |
| 5101:2-12-04 Building Department <br> Inspection | Compliant |  |


| 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 $8 / 17 / 2024$. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Food Service Requirements | Compliant | Documenting Statement: The food service license was observed posted. Following is the audit number and date of expiration: \# 9955336 and expires $3 / 1 / 2024$. |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator Qualifications | Compliant |  |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator Responsibilities/Requirements | Compliant |  |


| Rule | Status | Documenting Statement(s), If applicable |
| :--- | :--- | :--- |
| 5101:2-12-07 Written Program <br> Policies and Procedures | Compliant |  |


| Rule | Status | Documenting Statement(s), If applicable |
| :--- | :--- | :--- |
| 5101:2-12-09 Background Check <br> Requirements | Compliant |  |


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


| Rule | Status | Documenting Statement(s), If applicable |
| :--- | :--- | :--- |
| 5101:2-12-11 Indoor Space <br> Requirements | Compliant |  |


| Rule | Status | Documenting Statement(s), If applicable |
| :--- | :--- | :--- |
| Rule: 5101:2-12-11 Outdoor Space <br> Requirements | Compliant | Documenting Statement: The outdoor <br> play area is separated from traffic and <br> other hazards by a fence. |
| Rule: 5101:2-12-11 Outdoor Space <br> Requirements | Compliant | Documenting Statement: The quarterly <br> playground inspections were completed <br> and documented, as required. The most |


|  |  | recent inspection report form was dated 8/28/2023. |
| :---: | :---: | :---: |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Equipment | Compliant |  |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Play Fall Zones | Compliant | Documenting Statement: The protective material used under outdoor equipment was poured rubber under new equipment, mulch under swings. |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Equipment | Compliant |  |
| 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 Environment | Compliant |  |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Handwashing Requirements | Compliant |  |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-13 Smoke Free Environment | Compliant | Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program. |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Toothbrushing Requirements | Compliant |  |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-14 Transportation and Field Trip Procedures | Compliant | Documenting Statement: The driver(s) had current and valid training in first aid, management of communicable disease, and CPR. |
| Rule | Status | Documenting Statement(s), If applicable |


| Rule: 5101:2-12-14 Transportation - <br> Driver Requirements | Compliant | Documenting Statement: The driver(s) <br> had completed the required ODJFS driver <br> training. |
| :--- | :--- | :--- |


| Rule | Status | Documenting Statement(s), If applicable |
| :--- | :--- | :--- |
| Rule: 5101:2-12-14 Transportation - <br> Vehicle Requirements | Compliant | Documenting Statement: The vehicle(s) <br> used by the program to transport children <br> are inspected and licensed by the Ohio <br> State Highway Patrol. |


| Rule | Status | Documenting Statement(s), If applicable |
| :--- | :--- | :--- |
| Rule: 5101:2-12-15 Medical/Physical <br> Care Plans | Compliant | Documenting Statement: The program <br> had current information on the medical <br> status and the required treatment plan <br> for the children with health conditions. |


| Rule | Status | Documenting Statement(s), If applicable |
| :--- | :--- | :--- |
| 5101:2-12-16 Medical, Dental, and <br> 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 |
| :--- | :--- | :--- |
| 5101:2-12-16 First Aid/Standard | Compliant |  |
| Precautions |  |  |


| Rule | Status | Documenting Statement(s), If applicable |
| :--- | :--- | :--- |
| Rule: 5101:2-12-16 Management of <br> Communicable Disease | Compliant | Documenting Statement: The JFS 08087 <br> "Communicable Disease Chart" was <br> posted and was readily available to staff <br> and parents. |


| Rule | Status | Documenting Statement(s), If applicable |
| :--- | :--- | :--- |
| 5101:2-12-16 Incident/Injury <br> Reporting | Compliant |  |


| Rule | Status | Documenting Statement(s), If applicable |
| :--- | :--- | :--- |
| 5101:2-12-16 Written Disaster Plan | Compliant |  |


| Rule | Status | Documenting Statement(s), If applicable |
| :--- | :--- | :--- |
| 5101:2-12-17 Daily Schedule | Compliant |  |



| Rule: 5101:2-12-22 Meal and Snack <br> Requirements | Compliant | Documenting Statement: Water was <br> provided to children throughout the day <br> by pitchers of water. |
| :--- | :--- | :--- |


| 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 <br> Handling/Storage | Compliant |  |


| Rule | Status | Documenting Statement(s), If applicable |
| :--- | :--- | :--- |
| 5101:2-12-25 Medication | Compliant |  |
| Administration |  |  |


| Rule | Status | Documenting Statement(s), If applicable |
| :--- | :--- | :--- |
| 5101:2-12-08 Child Care Staff Member <br> Educational Requirements | Compliant |  |

