



## 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 <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>WALKER, TYESHA                           | Program Number<br>000000900614302 | Program Type<br>FCC - Type B Home |
| Address<br>1446 Rambler Pl<br><br>Cincinnati<br>OH 45231 |                                   | County<br>HAMILTON                |

| Inspection Information        |                          |                                  |
|-------------------------------|--------------------------|----------------------------------|
| Inspection Type<br>Compliance | Inspection Scope<br>Full | Inspection Notice<br>Unannounced |
| Inspection Date<br>12/03/2022 | Begin Time<br>1:00 PM    | End Time<br>1:30 PM              |
| Reviewer:<br>Eryn Hunt        |                          |                                  |

| Summary of Findings      |                                     |                       |                        |                   |
|--------------------------|-------------------------------------|-----------------------|------------------------|-------------------|
| No. Rules Verified<br>68 | No. Rules with Non-compliances<br>2 | No. Serious Risk<br>0 | No. Moderate Risk<br>0 | No. Low Risk<br>2 |

| License Capacity and Enrollment at the Time of Inspection |                  |            |           |       |
|---|------------------|------------|-----------|-------|
| Age Group   | License Capacity | Enrollment |           | Total |
|   | Totals           | Full Time  | Part Time |       |
| Infant ( Birth to < 18 m)                                 | 3                | 0          | 0         | 0     |
| Young Toddler   |                  | 0          | 0         | 0     |
| <b>Total Under 2 Years</b>                                |                  | 0          | 0         | 0     |
| Older Toddler   | 3                | 0          | 0         | 0     |
| Preschool   |                  | 0          | 0         | 0     |
| School Age  |                  | 0          | 2         | 2     |
| <b>Total Capacity/Enrollment</b>                          | 6                | 0          | 2         | 2     |

| Staff-Child Ratios at the Time of Inspection |                 |                |         |
|--|-----------------|----------------|---------|
| Group  | Age Group/Range | Ratio Observed | Comment |
| PLACEMENTS 12/3/22                           |                 | 1 to 0         |         |



### 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

No Moderate Risk Non-Compliances were observed during this inspection

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#### Low Risk Non-Compliances

**Domain: 00 License & Approvals**

Rule: 5101:2-13-03 Inspection Requirements

Code: The program is required to respond to all non-compliances by the date noted in the inspection report.



Findings: During the inspection, it was determined the program had not responded to the non-compliances addressed in the inspection report dated 6/11/22. The rule requires the program complete and submit a corrective action plan in OCLQS to address non-compliances detailed in written inspection reports within the timeframe outlined in the report. Submit the program's corrective action plan, which includes a statement that current and future corrective action plans will be submitted timely, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/04/2023

**Domain: 05 Health & Safety**

Rule: 5101:2-13-16 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/ on the vehicle/ on a field trip] as required, that included all items listed in the appendix A of the rule. The kit(s) were missing the item(s) or the item(s) were not replaced after use and/or expired listed in number(s) 5 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: 01/04/2023



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**Rules In-Compliance/Not Verified**

| Rule                         | Status    | Documenting Statement(s), If applicable |
|------------------------------|-----------|---|
| 5101:2-13-02 License Visible | Compliant |   |

| Rule                                     | Status    | Documenting Statement(s), If applicable |
|--|-----------|---|
| 5101:2-13-02 Voluntary Temporary Closure | Compliant |   |

| Rule                            | Status    | Documenting Statement(s), If applicable |
|---------------------------------|-----------|---|
| 5101:2-13-02 Change of Location | Compliant |   |

| Rule                              | Status    | Documenting Statement(s), If applicable |
|-----------------------------------|-----------|---|
| 5101:2-13-02 Information in OCLQS | Compliant |   |

| Rule                          | Status    | Documenting Statement(s), If applicable |
|-------------------------------|-----------|---|
| 5101:2-13-02 Provider Medical | Compliant |   |

| Rule  | Status    | Documenting Statement(s), If applicable |
|---|-----------|---|
| 5101:2-13-04 Building Requirements for Type B Homes | Compliant |   |

| Rule                                      | Status    | Documenting Statement(s), If applicable |
|---|-----------|---|
| 5101:2-13-04 Fire Safety for Type B Homes | Compliant |   |

| Rule  | Status    | Documenting Statement(s), If applicable |
|---|-----------|---|
| 5101:2-13-04 Flammable and Combustible Materials in a Type B Home | Compliant |   |



| Rule   | Status    | Documenting Statement(s), If applicable |
|--|-----------|---|
| 5101:2-13-04 Heaters in a Type B Home        | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-07 Staff Records                   | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-07 Type B Provider - Foster Parent | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-08 Employee Requirements           | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-08 Child Care Staff Requirements   | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-08 Whistle Blower                  | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-09 Background Checks               | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-10 Health Training                 | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-10 Professional Development        | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-11 Outdoor Space                   | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |



|  |               |  |
|--|---------------|--|
| 5101:2-13-11 Outdoor Equipment                                 | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-11 Fall Zone   | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-12 Safe Equipment                                    | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-12 Safe Environment                                  | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-13 Clean environment and equipment                   | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-13 Handwashing                                       | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-13 Smoke Free  | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-13 Toothbrushing                                     | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-14 Requirements for Field and Routine Trips          | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-14 Ratio and Supervision for Field and Routine Trips | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-14 Driver Requirements                               | Compliant     |  |



| Rule   | Status    | Documenting Statement(s), If applicable |
|--|-----------|---|
| 5101:2-13-14 Vehicle Inspections                         | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-14 Vehicle Requirements                        | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-15 Child Medical and Enrollment Records        | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-15 Health Conditions                           | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-15 Child Records Retention and Confidentiality | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-16 Medical, Dental, and General Emergency Plan | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-16 Emergency Drills                            | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-16 Communicable Diseases                       | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-16 Incident/Injury                             | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-16 Disaster Plan                               | Compliant |   |



| Rule  | Status    | Documenting Statement(s), If applicable |
|---|-----------|---|
| 5101:2-13-18 Attendance                       | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-19 Supervision                      | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-19 School Age Supervision           | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-19 Child Guidance                   | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-20 Sleep and Nap Requirements       | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-20 Crib and Playpen Requirements    | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-21 Evening and Overnight Care       | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-21 Sanitary Environment and Hygiene | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-22 Meals and Snacks                 | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-22 Fluid Milk                       | Compliant |   |





| Rule   | Status    | Documenting Statement(s), If applicable |
|--|-----------|---|
| 5101:2-13-22 Food Handling                           | Compliant |   |
| 5101:2-13-23 Infant Daily Care                       | Compliant |   |
| 5101:2-13-23 Infant Bottle and Food Preparation      | Compliant |   |
| 5101:2-13-23 Diapering                               | Compliant |   |
| 5101:2-13-24 Parent Permission for Swimming          | Compliant |   |
| 5101:2-13-25 Medication Requirements                 | Compliant |   |
| 5101:2-13-07 Provider Responsibilities               | Compliant |   |
| 5101:2-13-18 Group Size and Ratios                   | Compliant |   |
| 5101:2-13 Written Policies and Procedures            | Compliant |   |
| 5101:2-13-12 Carbon Monoxide Detectors - Type B Only | Compliant |   |



| Rule                                 | Status    | Documenting Statement(s), If applicable |
|--------------------------------------|-----------|---|
| 5101:2-13-11 Indoor Space            | Compliant |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-17 Programming             | Compliant |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-24 On-site Pools           | Compliant |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-12 Pets                    | Compliant |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-24 Swimming Sites          | Compliant |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-17 Materials and Equipment | Compliant |   |