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	Program Number	Program Type
GAMBLE, HEATHER	000000903412238	FCC - Type B Home
Address		County
122 N. WOOD ST		SANDUSKY
FREMONT		
OH 43420		

	Inspection Information				
Inspection Type	Inspection So	cope	Inspection Notice		
Compliance	Full		Unannounced		
Inspection Date	Begin Time		End Time		
07/21/2021	5:33 PM	5:33 PM		7:02 PM	
Reviewer:					
Meghan Birkholz					
Summary of Findings					
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk	
78	5	0	0	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		0	0	0
Total Under 2 Years	3	1	0	1
Older Toddler		0	0	0
Preschool		0	0	0
School Age		6	0	6
Total Capacity/Enrollment	6	6	0	7

Staff-Child Ratios at the Time of Inspection			
Group Age Group/Range Ratio Observed Comment			Comment
Heather	Mixed Age Group	2 to 7	



Summary of Non-Compliances

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

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			

Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5101:2-13-04 Fire Safety for Type B Homes

Code: The program is required to meet all requirements for fire extinguishers.

Findings: During the inspection, it was determined the fire extinguisher was not meeting the requirements in the following number(s) 4 listed below:

- 1. There was no fire extinguisher;
- 2. The fire extinguisher was not working;
- 3. Was not rated at the minimum rating;
- 4. The fire extinguisher had expired;
- 5. The fire extinguisher was not located in the kitchen.

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

Corrective Action Plan Due: 08/21/2021

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Equipment

Code: The program is required to remove equipment that needs repaired or poses as a hazard to children.

Findings: During the inspection it was observed that [the following equipment was observed to be in need of repair or hazardous to children/the following broken or hazardous furniture, equipment or materials were not removed from the child care area]: porch hand rail is broke and has exposed nails sticking out. Kitchen sink cabinet has a broke child lock, therefore children could get into it and there are chemicals located in the cabinet. Submit the program's corrective action plan to verify compliance with this rule.

Corrective Action Plan Due: 08/21/2021

Domain: 08 Staff Files

Rule: 5101:2-13-07 Provider Requirements

Code: The provider is required to maintain the required liability insurance or have a completed JFS 01933

"Liability Insurance Statement for Family Child Care Providers" on file for each child in care.

Findings: During the inspection, it was determined the provider did not [obtain or maintain the required liability insurance/have a completed JFS 01933 "Liability Insurance Statement for Family Child Care Providers" completed for each child in care]. Correct the violation and submit proof of insurance with the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 08/21/2021

Domain: 08 Staff Files

Rule: 5101:2-13-08 Employee Requirements

Code: The program is required to obtain completed medical statements for all program staff.



Findings: In review of the staff records, it was determined that the medical statements for those individuals listed on the Employee Record Chart did not include the required information listed below in number(s) d

- 1. Date of examination;
- 2. Signature, business address, and telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination;
- 3. A statement that verifies that the employee is:
- a. Physically fit for employment as a provider caring for children;
- b. Immunized against Tetanus, Diphtheria, Pertussis (Tdap);
- c. Immunized against Measles, Mumps, and Rubella (MMR);
- d. Immunized against Pertussis by January 1, 2018.

Submit the program's corrective action plan, which includes a copy of the completed medical statement, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 08/21/2021

Domain: 09 Children's Files

Rule: 5101:2-13-15 Child's Medical

Code: The program is required to have a completed medical on file for each child.

Findings: In review of 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 number(s) 1 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. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care
- 6. 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

- 7. Medical(s) were missing a record of immunizations the child has had specifying month, day and year
- 8. 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

9. 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

10. Other []

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

Corrective Action Plan Due: 08/21/2021

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Driver Requirements	Compliant	<u> </u>
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-21 Evening and Overnight Care	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 License Posted	Compliant	J (" 11
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Infant Daily Care	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-10 Health Training B	Compliant	bocumenting statement(s), if applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 JFS 01234 'Child Enrollment and Health Information'	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 Ratio and Group Size	Compliant	
Rule	Status	Documenting Statement(s), If applicable

5101:2-13-18 Ratio and Group Size	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-07 Provider Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Indoor Space	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Child Care Staff Requirements	Compliant	Joanness and State of the State
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Flammable and Combustible Materials in Type B Home	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-25 Topical Products and Lotions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Handwashing	Compliant	0 (" 11
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-17 Programming	Compliant	Documenting Statement(s), if applicable
Rule	Chahus	Decumenting Statement(a) If applicable
5101:2-13-24 On-site Pools	Status Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-24 Parent Permission for Swimming	Compliant	Documenting Statement(s), if applicable
Rule	Status	Documenting Statement(s), If applicable

5101:2-13-20 Sleep and Napping Requirements for a Licensed Family Child Care Provider	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Smoke Free	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Standard Precautions	Compliant	o tate of the same
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Vehicle Inspections	Compliant	bocumenting statement(s), if applicable
Rule 5101:2-13-08 Review Policies and	Status	Documenting Statement(s), If applicable
Procedures	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Voluntary Temporary Closure	Compliant	bocumenting statement(s), it applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-22 Fluid Milk	Compliant	bocumenting statement(s), it applicable
Rule 5101:2-13-20 Crib and Playpen Requirements	Status Compliant	Documenting Statement(s), If applicable
	T	
S101:2-13-14 Vehicle Requirements	Status Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Fall Zone	Compliant	
P. J.	Chatha	December 6th 1/1/16
Rule 5101:2-13-08 Staff Records	Status	Documenting Statement(s), If applicable
STUT.2-15-08 Stall Records	Compliant	

Designating:	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Incident/Injury	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
		bocumenting statement(s), if applicable
5101:2-13-23 Diapering	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Pets	Compliant	
	·	
Rule	Status	Documenting Statement(s), If applicable
		bocumenting statement(s), if applicable
5101:2-13-24 Swimming Sites	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-22 Food Handling	Compliant	
	·	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Safe Environment	Compliant	
5101.2 15 12 Sale Environment	Compilant	
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Outdoor Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 Child Guidance	Compliant	
	1	
Rule	Status	Documenting Statement(s) If applicable
		Documenting Statement(s), If applicable
5101:2-13-16 First Aid Kit	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Heaters in a Type B	Compliant	
Home	·	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Ratio and Supervision	Compliant	and the second s
for Field and Routine Trips		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Medical, Dental, and	Compliant	
General Emergency Requirements		
DI-	Chahara	Danis ation Chatana attal If a militable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Medical, Dental, and	Compliant	
General Emergency Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-25 Medication Storage	Compliant	1,7, -11
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 School Age Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-07 Type B Provider - Foster	Compliant	boomening statement(5), it approaches
Parent		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Infant Bottle and Food	Compliant	
Preparation		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Toothbrushing	Compliant	bocamenting statement(s), it applicable
3101.2 13 13 100thbru3hing		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-17 Materials and	Compliant	
Equipment		
	<u> </u>	
Dula	Chabus	Decree onting Chatera and (1) If a realizable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 Supervision	Compliant	
	1	
Rule	Status	Documenting Statement(s), If applicable
		J 11

5101:2-13-13 Clean Environment and Equipment	Compliant	
Pulo	Ctatus	Documenting Statement(c) If applicable
Rule 5101:2-13-16 Communicable Diseases	Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-21 Sanitary Environment and Hygiene	Compliant	bocumenting statement(s), if applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-25 Medication Requirements	Compliant	bocumenting statement(s), if applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Information in Provider Portal	Compliant	Documenting Statement(s), if applicable
Rule 5101:2-13-14 Requirements for Field and Routine Trips	Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Whistle Blower	Compliant	Documenting ottatement(s)) if applicable
Rule 5101:2-13-16 Serious Incident	Status Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-10 Professional Development	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-20 Use of Crib and Playpen	Compliant	2 3 3 3 4 4 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1
D.J.	I Chat.	Daniel Chalana II VIII II II II
Rule 5101:2-13-22 Meals and Snacks	Status Compliant	Documenting Statement(s), If applicable
STOTIZ TO ZZ WICKIS WITH SHIRKS	Compliant	

Beginning!		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Substitute	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Substitute	Compliant	
Requirements		
Dula	Chahara	December 1 Chatana and 1 If a malicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Health Conditions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Information in OCLQS	Compliant	bocamenting statement(3), it applicable
3101.2-13-02 IIIIOIIIIatioii III OCLQ3	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Outdoor Space	Compliant	Documenting statement(s), it approaches
3101.2 13 11 Odtaoor space	Compilant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Provider Medical	Compliant	
	·	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-09 Background Checks	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-09 Background Checks	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-09 Background Checks	Compliant	
Dula	Chahua	Decumenting Chatagorital II
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-09 Background Checks	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-18 Attendance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Change of Location	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-03 Inspection	Compliant	
Requirements		