



## 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 WATKINS, ROSETTA	Program Number 000000905216928	Program Type FCC - Type B Home
Address 102 N Maryland  Youngstown OH 44503		County MAHONING

Inspection Information		
Inspection Type Compliance	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 05/13/2024	Begin Time 1:00 PM	End Time 3:27 PM
Reviewer: Leshawnda Blackwell		

Summary of Findings				
No. Rules Verified 68	No. Rules with Non-compliances 18	No. Serious Risk 0	No. Moderate Risk 3	No. Low Risk 24

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)		0	0	0
Young Toddler		1	0	1
<b>Total Under 2 Years</b>		3	1	0
Older Toddler		0	0	0
Preschool		0	0	0
School Age		0	3	3
<b>Total Capacity/Enrollment</b>	6	0	3	4

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
mixed ages		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

#### Moderate Risk Non-Compliances

##### Domain: 00 License & Approvals

Rule: 5101:2-13-04 Flammable and Combustible Materials in a Type B Home

Code: The program is required to properly store flammable and combustible materials and substances.

Findings: During the inspection, it was determined flammable and combustible materials and substances were stored near number(s) [ 2 ] below:

1. Heater;
2. Furnace;
3. Water Heater;
4. Gas Appliance.

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

Corrective Action Plan Due: 06/12/2024

##### Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Carbon Monoxide Detectors - Type B Only

Code: The program is required to meet all requirements for carbon monoxide detectors.



Findings: During the inspection, it was determined that the Type B Home did not have a working carbon monoxide detector [in the building/on each floor where care is provided] or carbon monoxide detector(s) were not [placed/installed/tested/maintained] in accordance with manufacturer's recommendations. A working carbon monoxide detector must be placed, installed, tested, and maintained in accordance with manufacturer's recommendations. Submit the program's corrective action plan to verify compliance with this rule.

Corrective Action Plan Due: 06/12/2024

**Domain: 04 Indoor/Outdoor Space**

Rule: 5101:2-13-11 Outdoor Space

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

Findings: During the inspection, it was determined that an area was used which was not protected from traffic and other hazards by a continuous fence in good condition, or natural barrier, that ensured children were not able to leave the playground area. The fence or natural barrier was determined to present an immediate risk for a child to be able to leave the playground as noted in number [ 10 ] below:

1. The fence, natural barrier, or combination of fence and natural barrier was not continuous.
2. The fencing had missing slat boards through which children could leave the playground.
3. The gate was broken and did not close.
4. The latch on the gate was broken.
5. The gate had no latch.
6. The fencing was broken.
7. The latch was easily opened by children on the playground.
8. The latch was not engaged to prevent children from opening the gate.
9. The portable fencing approved for use by the Department was not being used.
10. Other [ No natural barrier or other barrier of any type].

Discontinue use of the playground and provide a space for outdoor play which is well defined by a continuous fence or natural barrier and protected from other hazards. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/12/2024

**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 refrain from using extension cords as permanent wiring.

Findings: During the inspection, it was determined an extension cord was used as permanent wiring in the following rooms [ ]. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 06/12/2024

**Domain: 01 Ratio & Supervision**

Rule: 5101:2-13-18 Attendance

Code: The program is required to maintain a record of the arrival and departure of each child. The program is also required to retain the original attendance record at the program for a period of one year.

Findings: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number(s) [ 1 ] below:

1. No attendance record was being maintained.
2. The attendance record was not being consistently completed.
3. The record did not include the name of at least one child.
4. The record did not include the birth date of at least one child.
5. The record did not include the assigned group.
6. The record did not include the child's weekly schedule.
7. The record did not include the time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.
8. The original attendance record was not kept at the program for a period of one year.

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

Corrective Action Plan Due: 06/12/2024

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to have running water below the temperature of 120 degrees Fahrenheit.

Findings: During the inspection, it was determined the water temperature was [ 136.5 ] in the following room(s) [ upstairs bathroom ]. This temperature exceeds the requirement of remaining below 120 degrees Fahrenheit. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.



Corrective Action Plan Due: 06/12/2024

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-13-13 Smoke Free

Code: The program is required to provide a smoke free environment during operating hours, ensure smoking is not seen by children, post a "No Smoking Sign" by the main entrance, provide notification to parents if smoking occurs on the premises outside of operating hours, and refrain from exposing children to smoking paraphernalia.

Findings: During the inspection, it was determined that the program was not maintaining a smoke free environment, as noted in the number(s) below:

1. The program did not provide a smoke free environment for children during the hours of child care in that [ 1 ].
2. An individual left the home to smoke, however, this smoking occurred in an area within view of the children.
3. A "No Smoking" sign was not displayed in a conspicuous place at the main entrance.
4. Smoking had occurred in the program or vehicle during hours the program was not in operation; however, parents had not been given written notice of this.
5. Children had access and/or were exposed to smoking paraphernalia in that [cigarettes/cigars/pipe butts/ashes/chewing or smokeless tobacco/electronic cigarettes/vaporizers/bong] was/were observed in view of children.
6. Other [ ].

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

Corrective Action Plan Due: 06/12/2024

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-13-13 Clean environment and equipment

Code: The program is required to have all required items in the restroom(s) and keep them sanitary.

Findings: During the inspection, it was determined that unsanitary conditions, as noted in the following number(s) [ 3,4,5,] below, were in the [ ] restroom:

1. There was no liquid soap.
2. There was no toilet tissue.
3. There were no individually assigned towels or disposable towels.
4. The toilet cleaning brush was accessible to the children.
5. The plunger was accessible to the children.
6. The toilet was not flushed.
7. The trash was not emptied from the day before.
8. There was a strong urine odor.
9. Other [ ].



The restroom(s) must be kept sanitary at all times. Submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 06/12/2024

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-13-13 Clean environment and equipment

Code: The program is required to follow the cleaning schedule for equipment.

Findings: During the inspection, it was determined that the program was not providing a clean and healthy environment, furniture, materials and equipment as required by Appendix A, as noted in number(s) [ ] below:

1. Item(s) soiled with blood or bodily fluids were not cleaned/sanitized immediately.
2. Blankets/sheets were not cleaned weekly, when soiled, or before use by another child.
3. Children's individual blankets and belongings were stored in an unsanitary manner.
4. Bottles, bottle caps, nipples and other equipment used for bottle feeding were not cleaned and sanitized in a dishwasher or by washing, rinsing, and boiling for one minute.
5. Carpets were not vacuumed weekly or cleaned when soiled.
6. Changing table/pad was not sanitized after each use or cleaned when visibly soiled.
7. Reusable cloths were not being washed daily or when visibly soiled.
8. Cots/Pads/Mats were not cleaned and sanitized before assigning to a different child, when used by a sick child, when soiled or at least every three months.
9. Cribs were not cleaned and sanitized monthly, or when soiled, or before use by another child.
10. Diaper Receptacles were not cleaned and sanitized daily or more frequently as needed to eliminate odor.
11. Dishes/Cups/Silverware were not cleaned and sanitized after each use.
12. Water Containers were not labeled with the child's name, or were not cleaned and sanitized before use again on another day.
13. Dress up clothes and hats (dramatic play) were not cleaned monthly or when soiled.
14. Floors were not cleaned weekly or when soiled.
15. The food prep area, including sinks, were not cleaned before and after preparing food (including bottle preparation) or between preparing raw or cooked food.
16. Potty chairs were not cleaned after each use, rinsed with water, cleaned and sanitized or contents were not emptied into a toilet.
17. Food tables, highchair trays were not cleaned before and after each use.
18. Tables used for play were not cleaned when visibly soiled or sanitized daily.
19. Toilet bowls were not cleaned when visibly soiled or sanitized weekly.
20. Toilet seat(s), handle(s) and hand washing sink(s) were not cleaned when visibly soiled or sanitized daily.
21. Mouthed toys were not cleaned and sanitized after each child's use.
22. Toys, other than those mouthed by children, were not cleaned monthly or when visibly soiled.
23. Washable furniture, including fabrics on infant equipment, were not cleaned weekly or when soiled.
24. Upholstered furniture was not steam cleaned when soiled.
25. Slip covers were not washed at least every six months or when soiled.
26. Wastebaskets/rinse buckets, including lids, were not being emptied daily or cleaned and sanitized when visibly soiled.
27. The manufacturer's directions for the cleaning product were not followed.



28. The solution used for sanitizing was not a commercial product registered by the United States Environmental Protection Agency as a sanitizer.

29. Other [ ].

Furniture, materials and equipment must be maintained according to the cleaning and sanitizing schedule in Appendix A to this rule. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/12/2024

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to store marijuana in a space not used by children.

Findings: During the inspection, marijuana was determined to be in a space that was accessible to children during hours of operation but no children were present. This item must be removed or stored in space not approved or used for children as required. Submit the program's corrective action plan to verify compliance with this rule.

Corrective Action Plan Due: 06/12/2024

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to anchor and amount gates that are free from entrapment and are the approved style.

Findings: During the inspection, it was determined the gate(s) used were not safe as noted in number(s) [1,2,] below:

1. Anchored;
2. Mounted;
3. Free of Entrapment;
4. The Approved Style;
5. Other [ ].

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

Corrective Action Plan Due: 06/12/2024



**Domain: 03 Postings & Equipment**

Rule: 5101:2-13-16 Medical, Dental, and General Emergency Plan

Code: The program is required to post the completed JFS 01242 "Medical, Dental, and General Emergency Plan for Child Care" and implement as required by rule.

Findings: During the inspection, it was determined the requirements for the JFS 01242 "Medical, Dental and General Emergency Plan" were not followed as noted in number(s) [1 ] below:

1. The plan was not posted on each level of the home used for child care.
2. The name, address and telephone number of the program were not complete.
3. The location of the first aid kit, fire extinguisher and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.
4. The telephone number for emergency squad, fire department hospital, poison control program, public children services agency, local health department, local emergency management agency and police department were not complete.
5. Location of children's records was not complete.
6. Emergency information including any medications or supplies needed i the event of an evacuation was not complete.
7. The current version of the prescribed form was not used.
8. The plan was not implemented when necessary in that [ ].

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

Corrective Action Plan Due: 06/12/2024

**Domain: 03 Postings & Equipment**

Rule: 5101:2-13-17 Programming

Code: The program is required to have a daily schedule posted in a visible place.

Findings: During the inspection, it was determined the daily schedule was not [posted/in a visible place] in the program. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 06/12/2024

**Domain: 03 Postings & Equipment**

Rule: 5101:2-13-16 Medical, Dental, and General Emergency Plan

Code: The program is required to post the fire and weather alert plan with a diagram.





Findings: During the inspection, it was determined the following information was not posted for item number(s) [1, 3 ] below:

- 3
1. Fire alert plan, including a diagram indicating evacuation routes.
  2. Weather alert plan was missing details for [ ].
  3. Weather alert plan was missing a diagram indicating evacuation routes.

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

Corrective Action Plan Due: 06/12/2024

**Domain: 03 Postings & Equipment**

Rule: 5101:2-13-16 Medical, Dental, and General Emergency Plan

Code: The program is required to post the completed JFS 01201 "Dental First Aid" and implement as required by rule.

Findings: During the inspection, it was determined the JFS 01201 "Dental First Aid" was not [completed/posted]. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 06/12/2024

**Domain: 04 Indoor/Outdoor Space**

Rule: 5101:2-13-11 Outdoor Space

Code: The program is required to have an outdoor play space free from trash and foreign objects.

Findings: During the inspection, it was determined that the following hazardous conditions existed in the off-site outdoor play area, as noted in number(s) [ ] below:

1. There was broken glass.
2. There were tall weeds.
3. There was poison ivy.
4. There were tree branches.
5. There was mold visible.
6. The sandbox was contaminated.
7. There were thistles with pricklers.
8. There were bird droppings.
9. The outdoor area was littered with trash.
10. The trash can was missing a lid.
11. The trash was not emptied from the day(s) before.
12. The trash can was overflowing with trash.



13. The trash can was infested with insects.
14. The trash can was visibly dirty.
15. Other [ ].

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

Corrective Action Plan Due: 06/12/2024

**Domain: 04 Indoor/Outdoor Space**

Rule: 5101:2-13-11 Outdoor Space

Code: The program staff is required to protect the children from hazardous conditions in the outdoor play area.

Findings: During the inspection, it was determined that the following hazardous conditions existed in the outdoor play area, as noted in number(s) [9 ] below:

1. There was broken glass.
2. There were tall weeds.
3. There was poison ivy.
4. There were tree branches.
5. There was mold visible.
6. The sandbox was contaminated.
7. There were thistles with pricklers.
8. There were bird droppings.
9. The outdoor area was littered with trash.
10. The trash can was missing a lid.
11. The trash was not emptied from the day(s) before.
12. The trash can was overflowing with trash.
13. The trash can was infested with insects.
14. The trash can was visibly dirty.
15. Other [ ].

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

Corrective Action Plan Due: 06/12/2024

**Domain: 05 Health & Safety**

Rule: 5101:2-13-16 Communicable Diseases

Code: The program is required to post the Ohio Communicable Disease Chart in a noticeable area.



Findings: During the inspection, it was determined that the Ohio Communicable Disease Chart was not posted as required , as indicated in the number(s) [ 2 ]below:

1. In a location readily available to provider, child care staff members, employees, and residents;
2. The chart was not posted.
3. The posted chart was not the current version and the Child Care Manual Procedural Letter No. 159 was not posted next to the chart.
4. The posted chart was not displayed in the size available in the ODJFS forms central to be easily read.

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

Corrective Action Plan Due: 06/12/2024

**Domain: 05 Health & Safety**

Rule: 5101:2-13-16 Emergency Drills

Code: The program is required to complete and document the required drills.

Findings: During the inspection, it was determined that the required drills were not completed for item number(s) [1,2,3 ] below:

1. Monthly fire drills
2. Monthly weather emergency drills (March through September)
3. Emergency/lockdown drills in each quarter of the calendar year

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

Corrective Action Plan Due: 06/12/2024

**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) [ 4,6,11,13 ] 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: 06/12/2024

**Domain: 06 Program Information**

Rule: 5101:2-13-21 Sanitary Environment and Hygiene

Code: The program is required to provide clean bathing facilities that are cleaned and disinfected after each use, and have children separated appropriately.

Findings: During the inspection, it was determined that the bathing facilities were not being cleaned and disinfected after each use. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 06/12/2024

**Domain: 08 Staff Files**

Rule: 5101:2-13-10 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(s) listed in number(s) [2,6,12,15 ] 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: 06/12/2024

**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) [ 1 ].

1. A medical statement was not on file;
2. The medical statement(s) on file were not dated within 12 months of the individual'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 individual 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);



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

Corrective Action Plan Due: 06/12/2024

**Domain: 08 Staff Files**

Rule: 5101:2-13-07 Staff Records

Code: The program is required to retain staff files for three years if not yet verified in the OPR.

Findings: During the inspection, it was determined that employment records were not maintained on file at the program for the current employees as well as for past employees who had left the program's employment in the past three years, if not yet verified in the OPR. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/12/2024

**Domain: 08 Staff Files**

Rule: 5101:2-13-07 Staff Records

Code: The provider is required to maintain current employee, child care staff members and resident records in the Ohio Professional Registry.

Findings: During the inspection, it was determined that employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) [ 3] below:

1. The provider had not created or updated their individual profile in the OPR.
2. The provider had not created or updated the program's organizational dashboard in the OPR.
3. At least one employee, child care staff member, or substitute child care staff member had not created or updated their individual profile in the OPR.
4. At least one employee, child care staff member, or substitute child care staff member had not created an employment record in the OPR for the program on or before the first day of employment, including date of hire.
5. At least one employee, child care staff member, or substitute child care staff member had not updated changes to positions or roles in the OPR within five calendar days of the change.
6. The program's organizational dashboard in the OPR was not updated within five business days when at least one employee, child care staff member, or substitute child care staff member's scheduled days and hours changed.
7. The program's organizational dashboard in the OPR was not updated within five business days when at least one employee, child care staff member, or substitute child care staff member's group assignments changed, if applicable.
8. The program's organizational dashboard in the OPR was not updated with the employment end date within five business days when at least one employee, child care staff member, or substitute child care staff member ended employment.
9. At least one resident over the age of eighteen had not created a profile and employment record for the family child care provider within five days of becoming a resident or turning eighteen.



10. The program's organizational dashboard in the OPR was not updated within five calendar days of a change in residency for at least one resident over the age of eighteen.

11. Other:

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

Corrective Action Plan Due: 06/12/2024

**Domain: 09 Children's Files**

Rule: 5101:2-13-15 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 number(s) [ 3,14 ] 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: 06/12/2024

**Domain: 09 Children's Files**

Rule: 5101:2-13-15 Child Medical and Enrollment Records

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. 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 [ ]

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

Corrective Action Plan Due: 06/12/2024

**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
5101:2-13-03 Inspection Requirements	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 Heaters in a Type B Home	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 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 Professional Development	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Outdoor Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Fall Zone	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Safe Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Handwashing	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Toothbrushing	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Requirements for Field and Routine Trips	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Ratio and Supervision for Field and Routine Trips	Compliant	
Rule	Status	Documenting Statement(s), If applicable
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 Health Conditions	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-15 Child Records Retention and Confidentiality	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-16 Incident/Injury	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-16 Emergency Preparedness and Response Plan	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-19 Supervision	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-19 School Age Supervision	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-19 Child Guidance	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-20 Sleep and Nap Requirements	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-20 Crib and Playpen Requirements	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-21 Evening and Overnight Care	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
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	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Infant Daily Care	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Infant Bottle and Food Preparation	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Diapering	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-24 Parent Permission for Swimming	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-25 Medication Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-07 Provider Responsibilities	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-18 Group Size and Ratios	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13 Written Policies and Procedures	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Child Care Staff Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Indoor Space	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	