

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
MONTGOMERY, LINDA	00000906026354	FCC - Type B Home
Address		County
10408 BELMEADOW DRIVE		SUMMIT
TWINSBURG		
OH 44087		

	Inspection Information				
Inspection Type	Inspectio	n Scope	Inspection Notice		
Compliance	Full		Unannounced		
Inspection Date	Begin Tin	e	End Time		
07/17/2024	9:00 AM		11:30 AM		
Reviewer:	2.		50 		
Kaitlin Duncan					
Summary of Findings					
No. Rules Verified	No. Rules with Non-compliance	No. Serious Risk	No. Moderate Risk	No. Low Risk	
68	13	0	2	13	

License Capacity and Enrollment at the Time of Inspection				
Age Group	License Capacity	Enrollment		
Guerry B	Totals	Full Time	Part Time	Total
Infant (Birth to < 18 m)		2	0	2
Young Toddler		0	0	0
Total Under 2 Years	3	2	0	2
Older Toddler		0	0	0
Preschool		1	2	3
School Age		0	4	4
Total Capacity/Enrollment	6	1	6	9

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Linda	Mixed Age Group	1 to 2	



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: 5101:2-13-12 Safe Environment

Code: The program is required to refrain from using and storing potentially hazardous items, toxic substances, and outdoor machinery around children.

Findings: During the inspection, a potentially hazardous item or toxic substance was used or stored where children present had access to it as noted in number(s) [] below. The potentially hazardous substance or item that posed a risk to children was determined to be accessible to children in 1,5,6,7,8,9,10,&14.

- 1. Bleach.
- 2. Cleaning agent.
- 3. Fish tank chemicals.
- 4. Gasoline.
- 5. Pesticide.
- 6. Poison, including insect/rodent poison.
- 7. Flammable substance.
- 8. Windshield washer fluid.
- 9. Aerosol cans.
- 10. A lawn mower.
- 11. A weed trimmer.
- 12. Hedge trimmers.
- 13. A snow blower.

14. Other potentially hazardous substance, equipment or machinery: round up, rustoleen, breaker fluid, power steering fluid, various tools, lawn trimmers, and a pressure washer.



Provide staff training. Submit the program's corrective action plan, which includes a statement that the potentially hazardous substance or item is no longer accessible to children and/or children will not be outside when machinery is in use and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 08/16/2024

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 1 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 [].

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: 08/16/2024

Low Risk Non-Compliances

Domain: 01 Ratio & Supervision



Rule: 5101:2-13-18 Attendance

Code: The program is required to have a tracking method for children.

Findings: During the inspection, it was determined that the method for tracking the children in the group did not meet the requirements in rule as noted in the number(s) 5 below:

- 1. There was no method in place.
- 2. The method did not include each child's name.
- 3. The method did not include each child's birthdate.
- 4. The tracking method did not remain with the group at all times.
- 5. The tracking method was not updated throughout the day as children entered or left the group.

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

Corrective Action Plan Due: 08/16/2024

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 below:

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: 08/16/2024

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-13-11 Outdoor Equipment

Code: The program is required to provide equipment that does not pose a safety risk and must follow the manufacturer's guidelines for assembling, installing and using the equipment.

Findings: During the inspection, it was determined that outdoor play equipment was unsafe as noted in the number(s) 1 &2 below:

1. There was rust exposed.

2. There was protruding bolts.



Department of Education Department of Job and Family Services

- 3. There were cracks.
- 4. There were holes.
- 5. There was splintering wood.
- 6. There were sharp edges or points.
- 7. There were lead hazards.
- 8. There were toxic substances.
- 9. There were tripping hazards.
- 10. The sandbox was not covered when the program was closed or during non-daylight hours.
- 11. Outdoor equipment, [], was not developmentally appropriate.
- 12. Outdoor equipment, [], was placed in the main traffic pattern.
- 13. Outdoor play equipment, [], was positioned too closely together, posing a risk of injury if a child were to fall from one piece of equipment into another.
- 14. Outdoor equipment, [], was not securely anchored but did not present a risk of imminent danger of the structure collapsing when children are using the equipment
- 15. Outdoor equipment, [], was 30 inches or more from the ground and did not have a
- protective barrier that would prevent a child from falling off this piece of equipment.
- 16. The manufacturer's guidelines for assembly and installation were not followed for the []. 17. Other [].
- Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.
- Corrective Action Plan Due: 08/16/2024

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 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: 08/16/2024

Domain: 05 Health & Safety

Rule: 5101:2-13-22 Fluid Milk

Code: The program is to ensure that children are served age-appropriate fluid milk.



Findings: During the inspection, it was determined that the program did not have the type of milk on-site to ensure that all children were served age-appropriate fluid milk requirements. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 08/16/2024

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) 11 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: 08/16/2024



Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-23 Infant Bottle and Food Preparation Code: The program is required to have breast milk labeled and stored appropriately.

Findings: During the inspection, it was determined that breast milk provided by the parent was not stored appropriately as noted in number(s) 1 below.

- 1. Not labeled with infant's name, date pumped, and date bottle was prepared;
- 2. Not immediately refrigerated or frozen;
- 3. Stored at room temperature longer than eight hours;
- 4. Stored at the provider for more than five days after it was expressed;
- 5. Stored longer than two weeks in the freezer compartment of the refrigerator;
- 6. Stored longer than six months in the refrigerator/freezer;
- 7. Stored longer than twelve months in the deep freezer.

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

Corrective Action Plan Due: 08/16/2024

Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-23 Infant Bottle and Food Preparation Code: The program staff is required to have all bottles labeled.

Findings: During the inspection, it was determined that bottles containing [milk/formula] for a particular infant were not labeled with the child's name and date of preparation. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 08/16/2024

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 provider did not have current valid documentation for training(s) listed in number(s) 10 & 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: 08/16/2024

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) 9 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.

11.0ther: []

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

Corrective Action Plan Due: 08/24/2024

Domain: 08 Staff Files

Rule: 5101:2-13-10 Professional Development Code: The program staff is required to complete at least six clock hours of training annually.

Findings: In review of records, it was determined the Child Care Staff Member(s) indicated on the Employee Record Chart did not meet the annual professional development requirement as noted in number(s) 1.

1. The child care staff member(s) had not completed at least six hours of professional development.

2. Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.

3. Training topic did not meet the requirements listed in appendix A of this rule.

4. Documentation of training did not meet the requirements of this rule.

5. The substitute(s) had been used more than ninety days annually between July first and June thirtieth and had not completed at least six hours of professional development.

6. Other [].

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

Corrective Action Plan Due: 08/24/2024

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) 2 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: 08/16/2024

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) 1 & 2 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: 08/16/2024

Rules In-Compliance/Not Verified

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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	Compliant	
Closure		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Change of Location	Compliant	
	I	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Information in OCLQS	Compliant	
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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	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Building Requirements	Compliant	
for Type B Homes		



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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Fire Safety for Type B	Compliant	
Homes		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Flammable and	Compliant	
Combustible Materials in a Type B		
Home		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Heaters in a Type B	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-07 Type B Provider - Foster	Compliant	
Parent		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Employee Requirements	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Whistle Blower	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-09 Background Checks	Compliant	5 (<i>n</i> H
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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	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Clean environment and	Compliant	bootimenting statement(s), it applicable
equipment		



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Handwashing	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Smoke Free	Compliant	
5101.2 15 15 5110 Ke Tree	compliant	
	C	
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	Compliant	
and Routine Trips		
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Rule	Status	Documenting Statement(s), If applicable
	Status	Documenting statement(s), if applicable
5101:2-13-14 Ratio and Supervision	Compliant	
for Field and Routine Trips		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Driver Requirements	Compliant	
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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	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Child Records Retention	Compliant	
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5101:2-13-22 Food Handling	Compliant	Documenting statement(s), if applicable
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5101:2-13-23 Infant Daily Care	Compliant	Documenting statement(s), if applicable
Rule 5101:2-13-23 Diapering	Status Compliant	Documenting Statement(s), If applicable
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Rule 5101:2-13-24 Parent Permission for Swimming	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-13-25 Medication Requirements	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-13-07 Provider Responsibilities	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-13-18 Group Size and Ratios	Status Compliant	Documenting Statement(s), If applicable
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5101:2-13 Written Policies and Procedures	Status Compliant	Documenting Statement(s), If applicable
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5101:2-13-12 Carbon Monoxide Detectors - Type B Only	Compliant	bocumenting statement(s), if applicable
Rule	Status	Documenting Statement(s), If applicable



5101:2-13-08 Child Care Staff	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Indoor Space	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-17 Programming	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	
<u>.</u>	t.	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-17 Materials and	Compliant	
Equipment		
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