

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
RITCHIE, STACY	00000910785595	FCC - Type B Home
Address		County
633 SOUTH 8TH STREET		GUERNSEY
CAMBRIDGE		
OH 43725		

	Inspection Information				
Inspection Type	Inspection So	соре	Inspection Notice		
Compliance	Full		Unannounced		
Inspection Date	Begin Time		End Time		
07/20/2023	1:30 PM		2:35 PM		
Reviewer:					
Deana K. Haney					
Summary of Findings					
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk	
68	10	0	0	12	

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		1	0	1
Total Under 2 Years	3	2	0	2
Older Toddler		1	0	1
Preschool		0	0	0
School Age		0	0	0
Total Capacity/Enrollment	6	1	0	3

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Stacy's Kids	Mixed Age Group	1 to 1	Substitute was caring for child-no substitute in OCCRRA



Summary of Non-Compliances

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

Serious Risk Non-Compliances

No Serious Risk Non-Compliances were observed during this inspection

Moderate Risk Non-Compliances

No Moderate Risk Non-Compliances were observed during this inspection

Low Risk Non-Compliances

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to store cleaning and sanitizing supplies in a place that is inaccessible to children. Cleaning agents, aerosol cans and chemical substances must be stored in their original container or clearly labeled. School-age children may use cleaning supplies and equipment with adult supervision.



Findings: During the inspection, cleaning and sanitizing equipment and supplies were not used or stored properly as noted in number(s) 6 below:

- 1. Cosmetics were accessible to children in the [] area.
- 2. Disinfecting wipes were accessible to children in the [] area.
- 3. Fish food was accessible to children in the [] area.
- 4. Hand lotion was accessible to children in the [] area.
- 5. Hand sanitizer (for children under 24 months) was accessible to children in the [] area.
- 6. Laundry detergent was accessible to children in the bath room on the sink area.
- 7. Powder dish washing soap was accessible to children in the [] area.
- 8. Paint cans were accessible to children in the [] area.
- 9. White out was accessible to children in the [] area.
- 10. Potting Soil was accessible to children in the [] area.
- 11. Other potentially hazardous substance [] was accessible to children in the [] area.
- 12. Cleaning/sanitizing supplies had not been clearly labeled.
- 13. School-age children were using cleaning supplies, agents and/or equipment without adult supervision.
- 14. A spray aerosol was used in the [] group while children were in attendance.

15. Other: [].

Provide staff training. Submit the program's corrective action plan, which includes a statement that the potentially hazardous substance is no longer accessible to children and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 08/20/2023

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) 9 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: Bathroom shower stall is peeling and has mildew

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: 08/20/2023

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to provide an environment that protects the children in care from any items and conditions that may threaten their health, safety, and well-being.

Findings: Children in care shall be protected from any items and conditions which threaten their health, safety, and well being. During the inspection, it was determined that children were not protected from the following item(s) or condition(s) which may threaten their health, safety, or well being as noted in the following number(s) 17 below:

- 1. Surge protectors/outlets did not have childproof receptacle covers;
- 2. Open pull cords that are not closed loop;

3. Toys or other items small enough to be swallowed were present in the space where infants and/or toddlers were in care;

- 4. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled;
- 5. Stacked chairs;
- 6. Telephone cords;
- 7. Stacked chairs;
- 8. Employee(s) purse(s);
- 9. Diaper bags;
- 10. Television not securely anchored;
- 11. Small or lightweight pieces of shelving units are not securely anchored to the wall;
- 12. Staff member stepped over a barrier/gate while holding a child;
- 13. Chipping or peeling paint;
- 14. An area rug did not have a nonskid backing;
- 15. An area rug presented a tripping hazard;
- 16. A floor surface was unsafe in that [];
- 17. No platform was provided for the sink or toilet;
- 18. The platform provided for the sink or toilet was not sturdy;
- 19. The platform provided for the sink or toilet posed a safety hazard in that [];
- 20. Emergency exits were blocked by the following furniture in that [];
- 21. A mercury thermometer was being used to take a child's temperature.
- 22. Methods of ventilation used did not provide protection from rodents, insects, or other hazards.
- 23. Other [].

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

Corrective Action Plan Due: 08/20/2023



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 the updated form from 2021. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 08/20/2023

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) [] 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 prickers.
- 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: Chipping paint on the porch/steps].

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

Corrective Action Plan Due: 08/20/2023

Domain: 05 Health & Safety

Rule: 5101:2-13-22 Meals and Snacks



Code: The program is required to post the current menu in a noticeable location that is accessible to parents and note any substitutions at the time of the change.

Findings: During the inspection, it was determined that the program's weekly menu did not meet the requirement as noted in number(s) 1, 3 below.

- 1. The menu was not posted.
- 2. The posted menu was not in a visible place readily accessible to parents.
- 3. The menu was not currently dated.
- 4. The entire menu was substituted.
- 5. At least one item on menu did not match what was served.
- 6. The meal or snack served did not match the posted menu.

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

Corrective Action Plan Due: 08/20/2023

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) 6 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;



Department of Education Department of Job and Family Services

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: 08/20/2023

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) 5 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: 08/20/2023



Domain: 08 Staff Files

Rule: 5101:2-13-08 Child Care Staff Requirements

Code: The program is required to have staff complete the online staff orientation training. Additionally, the training must be completed before they are permitted to have sole responsibility of children.

Findings: In review of the staff records, it was determined that child care staff member(s) or substitute child care staff member(s) did not meet the requirements for completing the online orientation training as noted in number(s) 1-4 below:

1. The training was not completed within 30 days of starting employment at the program as a child care staff member.

2. No documentation of completing the training after December 31, 2016.

3. Completion of the training was not verified in the OPR.

4. A child care staff member had sole responsibility of children and had not completed the online orientation.

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

Corrective Action Plan Due: 08/20/2023

Domain: 08 Staff Files

Rule: 5101:2-13-08 Employee Requirements

Code: The program staff is required to obtain additional reports or examinations by a licensed physician as noted on the medical statement.

Findings: During the inspection, it was determined that an additional report or examination by a licensed physician or a mental health professional was required as there was a concern about an employee's ability to perform required duties. Submit the program's corrective action plan, which includes a copy of the completed medical documentation, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 08/20/2023

Domain: 08 Staff Files

Rule: 5101:2-13-08 Child Care Staff Requirements Code: The program staff is required to have educational verification on file at the program.

Findings: In review of the staff records, it was determined that verification of a high school education for the child care staff member(s) listed on the Employee Record Chart, did not meet the requirements as listed in number(s) 1-3 below:

1. Verification of completion of a high school education was not on file.

2. Documentation was not on file to verify that that a high school graduate was at least 16 years of age.



3. Documentation of a high school education was not on file for a person, counted in the staff/child ratio, and therefore was used as a Child Care Staff Member.

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

Corrective Action Plan Due: 08/20/2023

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) 16 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 1234 was not completed with all questions answered or NA if it does not apply.

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

Corrective Action Plan Due: 08/20/2023



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	
		1
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(c) If applicable
Rule	Status Compliant	Documenting Statement(s), If applicable
5101:2-13-03 Inspection	Status Compliant	Documenting Statement(s), If applicable
		Documenting Statement(s), If applicable
5101:2-13-03 Inspection		Documenting Statement(s), If applicable
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5101:2-13-03 Inspection Requirements	Compliant	
5101:2-13-03 Inspection Requirements Rule	Compliant Status	
5101:2-13-03 Inspection Requirements Rule 5101:2-13-04 Building Requirements	Compliant Status	
5101:2-13-03 Inspection Requirements Rule 5101:2-13-04 Building Requirements for Type B Homes	Compliant Status Compliant	Documenting Statement(s), If applicable
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5101:2-13-03 Inspection RequirementsRule5101:2-13-04 Building Requirements for Type B HomesRule5101:2-13-04 Fire Safety for Type B	Compliant Status Compliant	Documenting Statement(s), If applicable
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5101:2-13-13 Toothbrushing	Compliant	
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5101:2-13-14 Requirements for Field	Compliant	
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5101:2-13-14 Vehicle Inspections	Compliant	
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5101:2-13-14 Vehicle Requirements	Compliant	
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5101:2-13-16 Incident/Injury	Compliant	
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5101:2-13-16 Disaster Plan	Compliant	
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5101:2-13-18 Attendance	Compliant	
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5101:2-13-19 School Age Supervision	Compliant	
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5101:2-13-19 Child Guidance	Compliant	Documenting statement(s), if applicable
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5101:2-13-20 Sleep and Nap	Compliant	
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5101:2-13-20 Crib and Playpen	Compliant	
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5101:2-13-21 Evening and Overnight	Compliant	
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5101:2-13-21 Sanitary Environment and Hygiene	Compliant	
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5101:2-13-22 Fluid Milk	Compliant	
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5101.2 15 22 1000 Handling	compliant	
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5101:2-13-23 Infant Daily Care	Compliant	
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5101:2-13-23 Infant Bottle and Food	Compliant	
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5101:2-13-23 Diapering	Compliant	
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5101:2-13-24 Parent Permission for	Compliant	
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5101:2-13-25 Medication Requirements	Compliant	
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5101:2-13-07 Provider Responsibilities	Compliant	
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5101:2-13 Written Policies and Procedures	Compliant	
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5101:2-13-12 Carbon Monoxide Detectors - Type B Only	Compliant	
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5101:2-13-11 Indoor Space	Compliant	
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5101:2-13-17 Programming	Compliant	
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5101:2-13-24 On-site Pools	Compliant	
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