



## 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 LAMAR, ZELDA	Program Number 000000917483959	Program Type FCC - Type B Home
Address 12020 CONTINENTAL  CLEVELAND OH 44120		County CUYAHOGA

Inspection Information		
Inspection Type Compliance	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 05/17/2023	Begin Time 8:53 AM	End Time 12:02 PM
Reviewer: Linda Golson		

Summary of Findings				
No. Rules Verified 68	No. Rules with Non-compliances 18	No. Serious Risk 0	No. Moderate Risk 1	No. Low Risk 20

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
<b>Total Under 2 Years</b>	3	2	0	2
Older Toddler		2	0	2
Preschool		1	0	1
School Age		4	0	4
<b>Total Capacity/Enrollment</b>	6	7	0	9

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Zelma Lamar	Mixed Age Group	2 to 3	



### 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: 08 Staff Files**

Rule: 5101:2-13-09 Background Checks

Code: The program is required to have background checks for all staff and residents over 18 years of age.

Findings: In review of staff records, it was determined that background checks were not requested for the persons listed on the Employee Record Chart as noted in number 1 below:

1. Submitting the request for a background check for child care in the OPR for provider and CCSM
2. Submitting fingerprints electronically according to the process established by the BCI.

Submit the program's corrective action plan, which includes a copy of the individual(s) JFS 01176, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/22/2023



### Low Risk Non-Compliances

#### Domain: 01 Ratio & Supervision

Rule: 5101:2-13-20 Sleep and Nap Requirements

Code: The program is required to provide a mat, pad, or cot for children to rest.

Findings: During the inspection, it was determined that a child was sleeping as noted in number 5 below:

1. On the floor.
2. At the table.
3. On a bean bag chair.
4. On a chair.
5. Cots were not labeled.

Children shall be provided an individually assigned cot or mat to rest, nap, or sleep.

Corrective Action Plan Due: 06/22/2023

#### Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to refrain from using and storing outdoor machinery around children.

Findings: During the inspections, a potentially hazardous substance, which was determined to not present a serious risk to a child, was accessible to children as noted in number 11 below:

1. Cosmetics
2. Disinfecting wipes
3. Fish food
4. Hand lotion
5. Hand sanitizer (for children under 24 months).
6. Laundry detergent
7. Powder dish washing soap
8. Paint cans
9. White out
10. Potting soil
11. Mouthwash on bathroom sink

The potentially hazardous substance was determined to be accessible to children in the following area: [ ]

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

Corrective Action Plan Due: 06/22/2023



**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 6 below, were in the second floor 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: 06/22/2023

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-13-13 Handwashing

Code: The program staff is required to have children wash their hands at the appropriate times as outlined in rule.

Findings: During the inspection, it was determined the handwashing requirements were not being followed by the children in care at the program, in that child's hands were not washed after diaper change. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/22/2023

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-13-12 Pets

Code: The program is required to properly care for all pets.

Findings: During the inspection, it was determined that a pet at the program posed a threat to the safety or health of the children, in that proper licensing was not on file. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/22/2023



**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 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 numbers 2, 3, 4, 5, 6 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 in 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: 06/22/2023

**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 1 & 3 in bathroom and playroom 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: 06/22/2023



**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: 06/22/2023

**Domain: 07 Diapering & Infant Care**

Rule: 5101:2-13-20 Crib and Playpen Requirements

Code: The program is required to remove objects from cribs/playpens that could block the child.

Findings: During the inspection, it was determined that a child had been placed in a crib or playpen with the following number 4 below which could obstruct a provider or child care staff member's view of the infant:

1. Busy box or other toy attached to the side of the crib or playpen.
2. A blanket hanging over the side of the crib or playpen.
3. Stuffed animal that is not large/soft enough that it could conform to the shape of the child's face.
4. Blanket and toys

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

Corrective Action Plan Due: 06/22/2023

**Domain: 07 Diapering & Infant Care**

Rule: 5101:2-13-23 Diapering

Code: The program staff is required to change diapers immediately when wet or soiled.

Findings: During the inspection, it was determined that a child's basic diapering needs were not being met in number 4 below:

1. Diapers were not checked and immediately changed when needed.
2. Diapers not checked regularly.
3. Diapers not changed when found to be wet or soiled.
4. Changing pad was not sanitized after use

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



Corrective Action Plan Due: 06/22/2023

**Domain: 07 Diapering & Infant Care**

Rule: 5101:2-13-23 Infant Daily Care

Code: The program staff is required to provide appropriate infant daily care.

Findings: During the inspection, it was determined that the program's infant daily care did not meet the requirements of this rule as noted in number 3 below:

1. Infants could not safely and comfortably sit, crawl, toddle, or walk and play according to the infant's stage of development;
2. Infants were not removed from the crib, swing, infant seat, exercise seat or other equipment throughout the day for individual attention;
3. Each non-crawling infant was not provided the opportunity for tummy time each day;
4. Other [ ].

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

Corrective Action Plan Due: 06/22/2023

**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: 06/22/2023

**Domain: 07 Diapering & Infant Care**

Rule: 5101:2-13-23 Diapering

Code: The program is required to use a disposable separation material during diaper changes.

Findings: During the inspection, it was determined that the staff did not use a/discard separation material between each diaper change, as required by the rule, at the [infant/toddler diaper changing station. Submit the program's corrective action plan to verify compliance with the requirements of this rule.



Corrective Action Plan Due: 06/22/2023

**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 did not have current valid documentation for training listed in number 1 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: 06/22/2023

**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: During the inspection, it was determined that a completed medical examination statement for the CCSM listed on the Employee Record Chart was not on file, as required by this rule. Submit the program's





corrective action plan, which includes a copy of the completed medical statement with all required information, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/22/2023

**Domain: 08 Staff Files**

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

Code: The program staff is required to complete the prescribed orientation within 30 days of starting employment.

Findings: In review of the staff records, it was determined that the child care staff member and provider had not completed the online orientation training as noted in number 2 below:

1. The training was not completed within thirty days of the starting employment.
2. There was no documentation of completing the training after December 31, 2016.
3. Completion of training is not documented with verification from the OPR for the Child Care Staff Member(s) and/or Substitute Child Care Staff Member(s) listed on the Employee Record Chart, as required.

Submit the program's corrective action plan, which includes copies of verification of training, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/22/2023

**Domain: 08 Staff Files**

Rule: 5101:2-13-07 Provider Responsibilities

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: 06/22/2023

**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 numbers 1, 13, 15, 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. Enrollment form did not have first date.

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

Corrective Action Plan Due: 06/22/2023

**Domain: 09 Children's Files**

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

Code: The program is required to have a completed 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 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: 06/22/2023

**Domain: 10 Written Policies & Procedures**

Rule: 5101:2-13 Written Policies and Procedures

Code: The program's written policies and procedures are to be given to all parents and employees and be available at the program.

Findings: During the inspection, it was determined the written policies and procedures were not given to parents/all employees/available at the program as required. A copy must be made available onsite for review. Submit the program's corrective action plan to verify compliance with this rule.

Corrective Action Plan Due: 06/22/2023

**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 Fire Safety for Type B Homes	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Flammable and Combustible Materials in a Type B Home	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Heaters in a Type B Home	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-07 Staff Records	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-07 Type B Provider - Foster Parent	Compliant	
Rule	Status	Documenting Statement(s), If applicable



5101:2-13-08 Whistle Blower	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-10 Professional Development	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-11 Outdoor Space	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-11 Outdoor Equipment	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-11 Fall Zone	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-12 Safe Equipment	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-13 Smoke Free	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-13 Toothbrushing	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-14 Requirements for Field and Routine Trips	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-14 Ratio and Supervision for Field and Routine Trips	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-13-14 Driver Requirements	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Vehicle Inspections	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Vehicle Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Health Conditions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Child Records Retention and Confidentiality	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Emergency Drills	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 First Aid Kit/Standard Precautions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Communicable Diseases	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Incident/Injury	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Disaster Plan	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-18 Attendance	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 Supervision	Compliant	
5101:2-13-19 School Age Supervision	Compliant	
5101:2-13-19 Child Guidance	Compliant	
5101:2-13-21 Evening and Overnight Care	Compliant	
5101:2-13-21 Sanitary Environment and Hygiene	Compliant	
5101:2-13-22 Meals and Snacks	Compliant	
5101:2-13-22 Food Handling	Compliant	
5101:2-13-24 Parent Permission for Swimming	Compliant	
5101:2-13-25 Medication Requirements	Compliant	
5101:2-13-18 Group Size and Ratios	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Carbon Monoxide Detectors - Type B Only	Compliant	
5101:2-13-11 Indoor Space	Compliant	
5101:2-13-17 Programming	Compliant	
5101:2-13-24 On-site Pools	Compliant	
5101:2-13-24 Swimming Sites	Compliant	
5101:2-13-17 Materials and Equipment	Compliant	