

## 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://ifs.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<br>RIVERS, ROSE M                         | Program Number<br>000000920710483 | Program Type<br>FCC - Type B Home |
| Address<br>3335 NORWOOD ST<br><br>COLUMBUS<br>OH 43224 |                                   | County<br>FRANKLIN                |

| Inspection Information        |                                     |                                |                        |                   |
|-------------------------------|-------------------------------------|--------------------------------|------------------------|-------------------|
| Inspection Type<br>Compliance | Inspection Scope<br>Full            | Inspection Notice<br>Announced |                        |                   |
| Inspection Date<br>11/05/2025 | Begin Time<br>11:00 AM              | End Time<br>1:00 PM            |                        |                   |
| Reviewer:<br>Cristina Boyer   |                                     |                                |                        |                   |
| Summary of Findings           |                                     |                                |                        |                   |
| No. Rules Verified<br>68      | No. Rules with Non-compliances<br>6 | No. Serious Risk<br>0          | No. Moderate Risk<br>1 | No. Low Risk<br>5 |

| License Capacity and Enrollment at the Time of Inspection |                  |            |           |           |       |
|---|------------------|------------|-----------|-----------|-------|
| Age Group   | License Capacity | Enrollment |           |           |       |
|   |                  | Totals     | Full Time | Part Time | Total |
| Infant ( Birth to < 18 m)                                 |                  | 0          | 0         | 0         | 0     |
| Young Toddler   |                  | 0          | 0         | 0         | 0     |
| <b>Total Under 2 Years</b>                                | <b>3</b>         | 0          | 0         | 0         | 0     |
| Older Toddler   |                  | 0          | 0         | 0         | 0     |
| Preschool   |                  | 0          | 0         | 0         | 0     |
| School Age  |                  | 3          | 0         | 0         | 3     |
| <b>Total Capacity/Enrollment</b>                          | <b>6</b>         | 3          | 0         | 0         | 3     |

| Staff-Child Ratios at the Time of Inspection |                 |                |         |
|--|-----------------|----------------|---------|
| Group  | Age Group/Range | Ratio Observed | Comment |
| Rose Rivers                                  | Mixed Age Group | 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: 02 Safe & Sanitary Environment**

Rule: 5180:2-13-12 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 were not installed 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: 12/05/2025

#### Low Risk Non-Compliances

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

Rule: 5180:2-13-12 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 140 degrees in the kitchen and 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:** 12/05/2025

#### **Domain: 05 Health & Safety**

**Rule:** 5180:2-13-16 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 3 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:** 12/05/2025

#### **Domain: 05 Health & Safety**

**Rule:** 5180:2-13-16 Emergency Preparedness and Response Plan

**Code:** The program is required to have a completed emergency preparedness and response plan.

**Findings:** During the inspection, it was determined the program's written emergency preparedness and response plan did not meet the requirement or was missing the information in number 18 below:

Procedures:

1. The written emergency and preparedness and response plan had not been completed
2. The plan was not provided to all child care staff and employees
3. Weather emergencies and natural disasters which include severe thunderstorms, tornadoes, flash flooding, major snowfall, blizzards, ice storms or earthquakes
4. Emergency outdoor and indoor lockdown or evacuation due to threats of violence which includes active shooter, bioterrorism or terrorism including a designated safe site where staff and children can safely remain when evacuated
5. Emergency or disaster evacuations due to hazardous materials and spills, gas leaks or bomb threats including a designated safe site where staff and children can safely remain when evacuated
6. Outbreaks, epidemics or other infectious disease emergencies
7. Loss of power, water, or heat

8. Other threatening situations that may pose a health or safety hazard to the children in the program

Details:

9. Shelter in place or evacuation, how the program will care for and account for the children until they can be reunited with the parent

10. Assisting infants, toddlers and children with special needs and/or health conditions

11. Emergency contact information for parents and the program

12. Procedures for notifying and communicating with parents regarding the location of the children if evacuated

13. Procedures for communicating with parents during loss of communications, no phone or internet service available

14. The location of supplies and procedures for gathering necessary supplies for staff and children if required to shelter in place

15. What to do if a disaster occurs during the transport of children or when on a field trip or routine trip

16. Making the plan available to all child care staff members and employees

17. Training of staff or reassignment of staff duties as appropriate

18. Updating the plan on a yearly basis

19. Contact with local emergency management officials

20. The plan was unable to be implemented in that, [ ].

Submit the program's corrective action plan, which includes the missing information, if applicable, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/05/2025

#### **Domain: 08 Staff Files**

Rule: 5180:2-13-07 Provider Responsibilities

Code: The provider is required to reside at the licensed location, not have additional activities or employment during the program's operating hours, be on-site at the program for at least 75 percent of the program's operating hours, and have hours of availability posted in a noticeable place.

Findings: During the inspection, it was determined that the provider was not meeting the following requirements as noted in number 4 below :

1. The provider no longer resides at the licensed location.

2. The licensed provider has additional activities/employment during operating hours, in that [ ].

3. The provider was not on-site for 75 percent of the program's operating hours as required by this rule.

4. The provider did not have hours of availability to meet with parents a noticeable location.

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

Corrective Action Plan Due: 12/05/2025

#### **Domain: 08 Staff Files**

Rule: 5180:2-13-10 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 trainings listed in numbers 10 and 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: 12/05/2025

#### **Rules In-Compliance/Not Verified**

| Rule                                     | Status    | Documenting Statement(s), If applicable |
|--|-----------|---|
| 5180:2-13-02 Voluntary Temporary Closure | Compliant |   |
| 5180:2-13-02 License Visible             | Compliant |   |

|   |           |   |
|---|-----------|---|
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-02 Change of Location                                   | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-02 Information in OCLQS                                 | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-02 Provider Medical                                     | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-03 Inspection Requirements                              | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-04 Building Requirements for Type B Homes               | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-04 Fire Safety for Type B Homes                         | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-04 Flammable and Combustible Materials in a Type B Home | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-04 Heaters in a Type B Home                             | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-07 Staff Records  | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5180:2-13 Written Policies and Procedures                         | Compliant |   |

| Rule   | Status    | Documenting Statement(s), If applicable |
|--|-----------|---|
| 5180:2-13-07 Type B Provider - Foster Parent | Compliant |   |
| 5180:2-13-08 Employee Requirements           | Compliant |   |
| 5180:2-13-08 Child Care Staff Requirements   | Compliant |   |
| 5180:2-13-08 Whistle Blower                  | Compliant |   |
| 5180:2-13-09 Background Checks               | Compliant |   |
| 5180:2-13-10 Professional Development        | Compliant |   |
| 5180:2-13-11 Indoor Space                    | Compliant |   |
| 5180:2-13-11 Outdoor Space                   | Compliant |   |
| 5180:2-13-11 Outdoor Equipment               | Compliant |   |
| 5180:2-13-11 Fall Zone                       | Compliant |   |
|  |           |   |



|  |           |   |
|--|-----------|---|
| 5180:2-13-12 Safe Equipment                                    | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-12 Pets  | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-13 Clean environment and equipment                   | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-13 Smoke Free  | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-15 Child Medical and Enrollment Records              | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-13 Handwashing                                       | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-13 Toothbrushing                                     | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-14 Requirements for Field and Routine Trips          | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-14 Ratio and Supervision for Field and Routine Trips | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-14 Driver Requirements                               | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-14 Vehicle Inspections                               | Compliant |   |

|  |           |   |
|--|-----------|---|
|  |           |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-14 Vehicle Requirements                        | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-15 Health Conditions                           | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-15 Child Records Retention and Confidentiality | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-16 Medical, Dental, and General Emergency Plan | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-16 Emergency Drills                            | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-16 First Aid Kit/Standard Precautions          | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-16 Incident/Injury                             | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-17 Programming                                 | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-17 Materials and Equipment                     | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-18 Group Size and Ratios                       | Compliant |   |



| Rule  | Status    | Documenting Statement(s), If applicable |
|---|-----------|---|
| 5180:2-13-18 Attendance                       | Compliant |   |
| 5180:2-13-19 Supervision                      | Compliant |   |
| 5180:2-13-19 School Age Supervision           | Compliant |   |
| 5180:2-13-21 Evening and Overnight Care       | Compliant |   |
| 5180:2-13-20 Sleep and Nap Requirements       | Compliant |   |
| 5180:2-13-19 Child Guidance                   | Compliant |   |
| 5180:2-13-20 Crib and Playpen Requirements    | Compliant |   |
| 5180:2-13-21 Sanitary Environment and Hygiene | Compliant |   |
| 5180:2-13-22 Meals and Snacks                 | Compliant |   |
| 5180:2-13-22 Food Handling                    | Compliant |   |
| 5180:2-13-22 Fluid Milk                       | Compliant |   |

|   |                     |   |
|---|---------------------|---|
|   |                     |   |
| Rule<br>5180:2-13-23 Infant Daily Care                  | Status<br>Compliant | Documenting Statement(s), If applicable |
| Rule<br>5180:2-13-23 Infant Bottle and Food Preparation | Status<br>Compliant | Documenting Statement(s), If applicable |
| Rule<br>5180:2-13-23 Diapering                          | Status<br>Compliant | Documenting Statement(s), If applicable |
| Rule<br>5180:2-13-24 On-site Pools                      | Status<br>Compliant | Documenting Statement(s), If applicable |
| Rule<br>5180:2-13-24 Swimming Sites                     | Status<br>Compliant | Documenting Statement(s), If applicable |
| Rule<br>5180:2-13-24 Parent Permission for Swimming     | Status<br>Compliant | Documenting Statement(s), If applicable |
| Rule<br>5180:2-13-25 Medication Requirements            | Status<br>Compliant | Documenting Statement(s), If applicable |