

# **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 <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. 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
FRANKLIN, CAROLYN	000000931570761	FCC - Type B Home
Address	·	County
7871 BANKWOOD LN		HAMILTON
CINCINNATI		
OH 45224		

Inspection Information					
Inspection Type	Inspection So	Inspection Scope			
Compliance	Full	0.0449	Unannounced		
Inspection Date	Begin Time		End Time		
02/20/2025	12:15 PM	12:15 PM		1:05 PM	
Reviewer:					
Eryn Hunt					
Summary of Findings					
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk	
69	3	0	1	2	

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
Young Toddler		0	0	0
Total Under 2 Years	3	0	0	0
Older Toddler		0	0	0
Preschool		1	0	1
School Age		5	0	5
Total Capacity/Enrollment	6	6	0	6

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range Ratio Observed Comment		
2/20/25		1 to 1	



# **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: 09 Children's Files

Rule: 5180:2-13-15 Health Conditions

Code: The program is required to have a completed JFS 01236 "Child Medical/Physical Care Plan for Child Care" on file at the program for any child having a health condition and must implement and/or follow instructions on the plan. The program is required to have staff trained to perform the procedures on the JFS 01236 "Child Medical/Physical Care Plan for Child Care" present at the program when the child requiring the procedure is onsite. Only staff who have been trained shall be permitted to perform the procedures listed on the JFS 01236.

Findings: In review of the children's records, it was determined the program did not meet the requirements for caring for at least one child, indicated on the Children Records Review, with a condition that requires a JFS 01236 "Child Medical/Physical Care Plan" as noted in number(s) 1 below:

1. No plan was on file.

(Page 1)

- Child's name was missing.
- 3. Name of the condition was missing.
- 4. Indication if medication or medical food is required was missing.
- 5. Signs, symptoms or situations that require staff to take action were missing.
- 6. Activities, foods, environmental conditions to avoid were missing.
- $7.\ Training\ instructions\ for\ procedures\ for\ staff\ to\ follow\ were\ missing\ or\ incomplete.$
- (Page 2)
- 8. Child's name was missing or not attached.
- 9. Child's date of birth was missing or not attached.
- 10. Child's weight was missing or not attached.
- 11. Name of the medication/medical food was missing or not attached.



- 12. Dosage of medication/medical food to be administered was missing or not attached.
- 13. Time for medication/medical food to be administered was missing or not attached.
- 14. Expiration date for medication/medical food was missing or not attached.
- 15. Symptoms that require staff to administer medication/medical food were missing or not attached.
- 16. Specific instructions to administer the medication/medical food were missing or not attached.
- 17. Actions to be taken if the symptoms do not subside were missing or not attached.
- 18. Physician's signature was missing or not attached.
- 19. The date of the physician's signature was missing or not attached.

### (Page 3)

- 20. Child's name was missing.
- 21. Instructions regarding emergency evacuation, if applicable, were missing.
- 22. Signature of parent granting permission to implement the plan and verifying training was missing.
- 23. Date of parent signature was missing.
- 24. Certified Professional Trainer information was missing.
- 25. Signature of certified professional who trained the program staff was missing, if parent was not the trainer.
- 26. Date of trainer signature was missing.
- 27. Printed name(s)of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
- 28. Signature(s) of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
- 29. Date of staff signature was missing.
- 30. Administrator/Provider signature was missing
- 31. Date of administrator/Provider was missing.

#### (Page 4)

- 32. Child's name was missing.
- 33. Name of medication or medical food was missing.
- 34. Date the medication/medical food was administered was missing.
- 35. Time medication/medical food was administered was missing.
- 36. Dosage of medication/medical food that was administered was missing.
- 37. Signature of person administering medication/medical food was missing.
- 38. The plan was not followed or implemented.
- 39. The plan was not able to be implemented due to conflicting information.
- 40. None of the child care staff members trained in the procedures on the JFS 01236 were onsite when a child requiring the plan was present.
- 41. Child care staff members trained in the procedures on the JFS 01236 were not scheduled to be present the entire the time the child requiring the plan was onsite.
- 42. None of the child care staff members trained in the procedures on the JFS 01236 accompanied the child requiring the plan during a trip.
- 43. A child care staff member who had not been trained in the procedures on the JFS 01236 performed the procedure.
- 44. Medication listed in the procedures to follow was not onsite available to administer as instructed and alternate instructions for this situation were not included on the plan.

Provide staff training. Submit the program's corrective action plan, which includes a copy of the completed JFS 01236, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/22/2025



# **Low Risk Non-Compliances**

# **Domain: 06 Program Information**

Rule: 5180:2-13-14 Driver Requirements

Code: The program is required to have all drivers be an employee or child care staff member of the program, a public transportation driver, or employed by a contracted transportation service company and retain a copy of all licenses for drivers employed by the program. Only a child care staff member or employee may transport children without the provider present, except parents may transport children for field trips.

Findings: During the inspection, it was determined that the requirements for drivers was not met as listed in number(s) 2 below:

- 1. The driver(s) noted on the Employee Record Chart used for trips did not have a copy of a current driver's license on file.
- 2. At least one employee or child care staff member who is responsible for transporting children did not have documentation of completion of the prescribed driver training on file.
- 3. The driver used to transport children was not an employee or child care staff member of the program, a public transportation driver, or employed by a company contracted to provide transportation service.
- 4. The driver who was not a child care staff member or employee who is used in accordance with the requirements in rule 5101:2-13-08 transported children without the provider present.

Remove this individual from transporting children until the requirements are met. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/22/2025

#### Domain: 09 Children's Files

Rule: 5180:2-13-15 Child Medical and Enrollment Records

Code: The program is required to have a completed medical on file for each child.

Findings: In review of of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in number(s) 1 below:

- 1. No medical was on file for at least one child
- 2. Medical(s) on file was not updated every 13 months
- 3. Medical(s) were missing child's name and date of birth
- 4. Medical(s) were missing the date of the medical examination



- 5. The date of the exam was more than 13 months prior to the date the form was signed
- 6. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care
- 7. Medical(s) were missing the signature, business address and telephone number of the physician, physician's assistant(PA), advance practice nurse (APN) or certified
- nurse practitioner (CNP) who examined the child
- 8. Medical(s) were missing a record of immunizations the child has had specifying month, day and year
- 9. Medical(s) were missing a statement from the physician, PA, APN, or CNP that the child has been immunized or is in the process of being immunized against the diseases
- required by division 5104.014 of the Revised Code and found in appendix A to this rule
- 10. Medical(s) were missing a statement from the child's parent or guardian that he or she has declined to have the child immunized against the disease for reasons of conscience, including religious convictions

11. Other [ ]

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

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Corrective Action Plan Due: 03/22/2025

# Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Voluntary Temporary	Compliant	
Closure		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 License Visible	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Change of Location	Compliant	
D. J.	Chahara	D
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Information in OCLQS	Compliant	



D. J.	Chahua	Decomposition Chat
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Provider Medical	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
		Bocamenting statement(3), it applicable
5180:2-13-03 Inspection	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Building Requirements	Compliant	
for Type B Homes	School Control of the State Control of the Control	
Tot Type B Homes		
Rule	Chatus	Desumenting Statement/s) If applicable
	Status	Documenting Statement(s), If applicable
5180:2-13-04 Fire Safety for Type B	Compliant	
Homes		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Flammable and	Compliant	Decamenting statement (o), it approaches
Foundation of the Control of the Con	Compilant	
Combustible Materials in a Type B		
Home		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Heaters in a Type B	Compliant	Becamentally statement(e), it approants
	Compilant	
Home		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-07 Staff Records	Compliant	
	1	
Dula	Status	Decumenting Statement/s) If and itself
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-07 Provider Responsibilities	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13 Written Policies and	Compliant	(-), app
September 1997 - Heartest Control Extra September 1997 - Heart Septe	Compliant	
Procedures		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-07 Type B Provider - Foster	Compliant	
Parent	The second second	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Employee Requirements	Compliant	
D. L.	Contraction	D :: C:
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Child Care Staff	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Whistle Blower	Compliant	
3100.2 13 00 Whistie Blower	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-09 Background Checks	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-10 Health Training	Compliant	
3180.2-13-10 Health Halling	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-10 Professional	Compliant	
Development		
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Rule	Status	Documenting Statement(s), If applicable
3446-346-4466	110000000000000000000000000000000000000	Bocumenting Statement(s), if applicable
5180:2-13-11 Indoor Space	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Outdoor Space	Compliant	
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Rule	Status	Decumenting Statement/s) If and leads
	Status	Documenting Statement(s), If applicable
5180:2-13-11 Outdoor Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Fall Zone	Compliant	
	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Safe Equipment	Compliant	



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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Safe Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Carbon Monoxide	Compliant	
Detectors - Type B Only	1	
Detectors Type B omy		
		-
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Pets	Compliant	bocamenting statement(s), it applicable
5180.2-15-12 Fets	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Clean environment and	Compliant	
equipment		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Smoke Free	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Handwashing	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Toothbrushing	Compliant	3 (7, 1)
510012 13 13 100th 8105hm	Compilation	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Requirements for Field	Compliant	boddinenting statement(s), it applicable
	Compliant	
and Routine Trips		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Ratio and Supervision	Compliant	
for Field and Routine Trips		
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	Bocumenting Statement(3), it applicable
5180.2-13-14 Vehicle Requirements	Compilant	
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Rule	Status	Decumenting Statement(s) If applicable
		Documenting Statement(s), If applicable
5180:2-13-15 Child Records Retention	Compliant	
and Confidentiality		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Medical, Dental, and	Compliant	
General Emergency Plan		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Emergency Drills	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 First Aid Kit/Standard	Compliant	Decamentally orderentally in approach
Precautions	Compliant	
Precautions		
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Doda	Chahua	Decumentias Statemental If annicable
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Communicable Diseases	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Incident/Injury	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Emergency	Compliant	
Preparedness and Response Plan		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-17 Programming	Compliant	Booking statement(o), it applicable
3100.2-13-17 Hogianning	Compilant	
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Dula	Chahira	Decimandia Control (1)
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-17 Materials and	Compliant	
Equipment		
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	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 Supervision	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 School Age Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-21 Evening and Overnight	Compliant	
Care		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-20 Sleep and Nap	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 Child Guidance	Compliant	
Rule	Status	Decumenting Statement(s) If applicable
5180:2-13-20 Crib and Playpen	Compliant	Documenting Statement(s), If applicable
Requirements	Compilant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-21 Sanitary Environment	Compliant	( ),
and Hygiene		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-22 Meals and Snacks	Compliant	
1	1	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-22 Food Handling	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5180:2-13-22 Fluid Milk	Compliant	bocumenting statement(s), it applicable
518U:2-13-22 Fluid Willk	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Infant Daily Care	Compliant	Bocumenting Statement(3), if applicable
5100.2-13-23 IIIIalit Dally Care	Compilant	
Rule	Status	Documenting Statement(s), If applicable
180:2-13-23 Infant Bottle and Food	Compliant	
reparation		
Dollar	Chatana	Decree asking Chapter and a life and limble
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Diapering	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 On-site Pools	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 Swimming Sites	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
180:2-13-24 Parent Permission for wimming	Compliant	
Rule	Status	Documenting Statement(s), If applicable
180:2-13-25 Medication	Compliant	Book
equirements	Compilant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-14-06 Health Conditions	Compliant	
	1	