

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	
OMAN, CHAREE	00000937537014	FCC - Type B Home	
Address		County	
85 WHITNEY DR		SANDUSKY	
FREMONT			
OH 43420			

	Inspection Information				
Inspection Type	Inspection	Scope	Inspection Notice		
Compliance	Full		Announced		
Inspection Date	Begin Time		End Time		
04/27/2023	1:00 PM		1:01 PM		
Inspection Date	Begin Time		End Time		
05/04/2023	10:00 AM		10:40 AM		
Reviewer:					
Morgan Lockhart					
Reviewer:					
Morgan Lockhart					
Summary of Findings					
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk	
68	6	0	0	6	

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)		3	0	3
Young Toddler		2	0	2
Total Under 2 Years	3	5	0	5
Older Toddler		1	0	1
Preschool		1	0	1
School Age		3	0	3
Total Capacity/Enrollment	6	5	0	10

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Charee	Mixed Age Group	1 to 6	



Department of Education Department of Job and Family Services



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: 00 License & Approvals

Rule: 5101:2-13-03 Inspection Requirements

Code: The program is required to respond to all non-compliances by the date noted in the inspection report.



Findings: During the inspection, it was determined the program had not responded to the non-compliances addressed in the inspection report dated 9/27/2022. The rule requires the program complete and submit a corrective action plan in OCLQS to address non-compliances detailed in written inspection reports within the timeframe outlined in the report. Submit the program's corrective action plan, which includes a statement that current and future corrective action plans will be submitted timely, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/03/2023

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to have all outlets and surge protectors covered.

Findings: During the inspection, it was determined that surge protectors or outlets did not have childproof receptacle covers. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 06/03/2023

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 number(s) 7 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 i 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: 06/03/2023

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: 06/03/2023

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) 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: 06/03/2023

Domain: 08 Staff Files

Rule: 5101:2-13-09 Background Checks

Code: Individuals are required to completed the background check process and obtain complete results.

Findings: In review of the staff records, it was determined that background check requirements were incomplete for the individuals listed on the Employee Record Chart, as noted in number(s) 1 below:

1. The JFS 01176 "Program Notification of Background check Review for Child Care" was not on file at the program, but was on file at the county agency and the individual is eligible.

2. The JFS 01176 was not on file at the program, but the BCI and FBI results were on file at the program and the individual had no prohibitive offenses which did not meet the rehabilitation criteria.

3. The JFS 01176 was not on file at the program, but the BCI and FBI results were on file at the county agency and the individual had no prohibitive offenses which did not meet the rehabilitation criteria.

Submit the program's corrective action plan, which includes a statement that the correct form is now on file, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/03/2023

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	Compliant	
Closure		



5101:2-13-02 Change of Location Compliant Rule Status Documenting Statement(s), if applicable 5101:2-13-02 Information in OCLQS Compliant Documenting Statement(s), if applicable Rule Status Documenting Statement(s), if applicable 5101:2-13-02 Provider Medical Compliant Documenting Statement(s), if applicable S101:2-13-04 Provider Medical Compliant Documenting Statement(s), if applicable 5101:2-13-04 Building Requirements for Type B Homes Compliant Documenting Statement(s), if applicable S101:2-13-04 Fire Safety for Type B Compliant Documenting Statement(s), if applicable S101:2-13-04 Fire Safety for Type B Compliant Documenting Statement(s), if applicable S101:2-13-04 Fire Safety for Type B Compliant Documenting Statement(s), if applicable S101:2-13-04 Fire Safety for Type B Compliant Documenting Statement(s), if applicable S101:2-13-04 Fire Safety for Type B Compliant Documenting Statement(s), if applicable S101:2-13-05 Denial, Revocation, and Suspension Compliant Documenting Statement(s), if applicable S101:2-13-07 Staff Records Compliant Documenting Statement(s), if applicable S101:2-13-07 Type B Provider - Foster	Rule	Status	Documenting Statement(s), If applicable
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5101:2-13-08 Whistle Blower	Compliant	
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5101.2-13-10 Health Training	Compliant	
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5101:2-13-10 Professional Development	Compliant	
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5101:2-13-11 Outdoor Space	Compliant	
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5101:2-13-11 Outdoor Equipment	Compliant	
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5101:2-13-11 Fall Zone	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 Ratio and Supervision	Compliant	
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5101:2-13-14 Driver Requirements	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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5101:2-13-15 Child Medical and	Compliant	Documenting statement(s), it applicable
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5101:2-13-15 Health Conditions	Compliant	
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5101:2-13-15 Child Records Retention	Compliant	boothenting statement(s), if applicable
and Confidentiality		



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5101:2-13-16 Emergency Drills	Compliant	
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5101:2-13-16 Communicable Diseases	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 Supervision	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
5101.2-15-19 Child Guidance	Compliant	
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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	Compliant	
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5101:2-13-22 Meals and Snacks	Compliant	
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5101:2-13-22 Food Handling	Compliant	
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5101:2-13-23 Infant Daily Care	Compliant	
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5101:2-13-23 Diapering	Compliant	Documenting Statement(s), If applicable
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5101:2-13-24 Parent Permission for	Compliant	
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5101:2-13-25 Medication	Compliant	
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5101:2-13-07 Provider Responsibilities	Compliant	
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5101:2-13-11 Indoor Space	Compliant	
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5101:2-13-24 On-site Pools	Compliant	
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5101:2-13-12 Pets	Compliant	
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5101:2-13-24 Swimming Sites	Compliant	
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