



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 HUGHES, CHRISTINE | Program Number 000000938856235 | Program Type FCC - Type B Home |
| Address 1519 Chester Ave Wellsville OH 43968 | | County COLUMBIANA |

| Inspection Information | | |
|-------------------------------|--------------------------|----------------------------------|
| Inspection Type Compliance | Inspection Scope Full | Inspection Notice Unannounced |
| Inspection Date 08/20/2025 | Begin Time 9:33 AM | End Time 10:55 AM |
| Reviewer: DeAnna Greier | | |

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

| License Capacity and Enrollment at the Time of Inspection | | | | |
|---|------------------|------------|-----------|-------|
| Age Group | License Capacity | Enrollment | | Total |
| | Totals | Full Time | Part Time | |
| Infant (Birth to < 18 m) | | 0 | 0 | 0 |
| Young Toddler | | 2 | 0 | 2 |
| Total Under 2 Years | 3 | 2 | 0 | 2 |
| Older Toddler | | 2 | 1 | 3 |
| Preschool | | 0 | 1 | 1 |
| School Age | | 2 | 1 | 3 |
| Total Capacity/Enrollment | 7 | 4 | 3 | 9 |

| Staff-Child Ratios at the Time of Inspection | | | |
|--|-----------------|----------------|---------|
| Group | Age Group/Range | Ratio Observed | Comment |
| | | | |

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

No Low Risk Non-Compliances were observed during this inspection

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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 | |
| 5180:2-13-02 Change of Location | Compliant | |
| 5180:2-13-02 Information in OCLQS | Compliant | |
| 5180:2-13-02 Provider Medical | Compliant | |
| 5180:2-13-03 Inspection Requirements | Compliant | |
| 5180:2-13-04 Building Requirements for Type B Homes | Compliant | |
| 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 | |
| 5180:2-13-04 Heaters in a Type B Home | Compliant | |
| 5180:2-13-05 Denial, Revocation, and Suspension | Compliant | |
| 5180:2-13-07 Staff Records | Compliant | |
| 5180:2-13-07 Provider Responsibilities | Compliant | |
| 5180:2-13 Written Policies and Procedures | Compliant | |
| 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 | |

| 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 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-13-10 Professional Development | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-13-11 Indoor Space | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-13-11 Outdoor Space | Compliant | |
| Rule | 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 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-13-12 Safe Equipment | Compliant | |
| 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 Detectors - Type B Only | 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 | |
| 5180:2-13-13 Smoke Free | Compliant | |
| 5180:2-13-15 Child Medical and Enrollment Records | Compliant | |
| 5180:2-13-13 Handwashing | Compliant | |
| 5180:2-13-13 Toothbrushing | Compliant | |
| 5180:2-13-15 Health Conditions | Compliant | |
| 5180:2-13-15 Child Records Retention and Confidentiality | Compliant | |
| 5180:2-13-16 Medical, Dental, and General Emergency Plan | Compliant | |
| 5180:2-13-16 Emergency Drills | Compliant | |
| 5180:2-13-16 First Aid Kit/Standard Precautions | Compliant | |

| Rule | Status | Documenting Statement(s), If applicable |
|---|-----------|---|
| 5180:2-13-16 Communicable Diseases | Compliant | |
| 5180:2-13-16 Incident/Injury | Compliant | |
| 5180:2-13-16 Emergency Preparedness and Response Plan | Compliant | |
| 5180:2-13-17 Programming | Compliant | |
| 5180:2-13-17 Materials and Equipment | Compliant | |
| 5180:2-13-18 Group Size and Ratios | Compliant | |
| 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 | |
| Rule | Status | Documenting Statement(s), If applicable |

| | | |
|---|---------------|--|
| 5180:2-13-20 Sleep and Nap Requirements | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-13-19 Child Guidance | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-13-21 Sanitary Environment and Hygiene | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-13-22 Meals and Snacks | Compliant | |
| 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 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-13-23 Diapering | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-13-25 Medication Requirements | Compliant | |