



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 HENSLEY, THERESA	Program Number 000000944690205	Program Type FCC - Type B Home
Address 781 FORSYTHE MASON OH 45040		County WARREN

Inspection Information		
Inspection Type Compliance	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 03/29/2023	Begin Time 9:50 AM	End Time 11:59 PM
Inspection Date 03/29/2023	Begin Time 9:50 AM	End Time 12:25 PM
Reviewer: Ruth Stilgenbauer		
Reviewer: Ruth Stilgenbauer		

Summary of Findings				
No. Rules Verified 68	No. Rules with Non-compliances 12	No. Serious Risk 0	No. Moderate Risk 0	No. Low Risk 15

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

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
GROUP A	Mixed Age Group	1 to 3	



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: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to remove toys or other items that may be a choking hazard from infants and toddlers.



Findings: During the inspection, it was determined there were toys or other items, small enough to be swallowed, present in the space where infants or toddlers were in care. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 05/05/2023

Domain: 03 Postings & Equipment

Rule: 5101:2-13-17 Materials and Equipment

Code: The program is required to have play materials accessible.

Findings: During the inspection, it was determined that play materials were not accessible/orderly for the following reason(s) as noted in number(s) 2 below:

1. Play materials were not readily accessible to the children;
2. Play materials were not arranged in an orderly manner so that children have opportunities to select, remove and replace play materials with minimal assistance during the day.

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

Corrective Action Plan Due: 05/05/2023

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(s) 2 below:

1. Fire alert plan, including a diagram indicating evacuation routes.
2. Weather alert plan was missing details for plan was not detailed enough for specific situations. May want to use the prescribed form or follow it.
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: 05/05/2023



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 01201 "Dental First Aid" and implement as required by rule.

Findings: During the inspection, it was determined the JFS 01201 "Dental First Aid" was not [completed/posted]. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 05/05/2023

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) 7below:

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: 05/05/2023

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) rolled gauze 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: 05/05/2023

Domain: 05 Health & Safety

Rule: 5101:2-13-16 Disaster Plan

Code: The program is required to have a completed written disaster plan.

Findings: During the inspection, it was determined the program's written disaster plan did not meet the requirement or was missing the information in number(s) 3, 4, 5, 6 & 7 below:

Procedures:

1. The written disaster 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
 5. Emergency or disaster evacuations due to hazardous materials and spills, gas leaks or bomb threats.
 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 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

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

Corrective Action Plan Due: 05/05/2023

Domain: 05 Health & Safety

Rule: 5101:2-13-22 Meals and Snacks

Code: The program is required to post the current menu in a noticeable location that is accessible to parents and note any substitutions at the time of the change.

Findings: During the inspection, it was determined that the program's weekly menu did not meet the requirement as noted in number(s) 1 below.

1. The menu was not posted.
2. The posted menu was not in a visible place readily accessible to parents.
3. The menu was not currently dated.
4. The entire menu was substituted.
5. At least one item on menu did not match what was served.
6. The meal or snack served did not match the posted menu.

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

Corrective Action Plan Due: 05/05/2023



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: 05/05/2023

Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-23 Diapering

Code: The program staff is required to appropriately store cloth diapers and clothing that were wet or soiled.

Findings: During the inspection, it was determined that the program was not storing or laundering soiled diapers or clothing according to the rule, in that the program did not meet the condition indicated in numbers(s) 9 below:

1. Store for no longer than one day
2. Store in an individual covered container or plastic bag away from children's belongings
3. Kept out of reach of children
4. Store soiled diapers and diapering washcloths laundered by the program in a covered container with sanitizing solution
5. Hold soiled diapers to be commercially laundered for no more than seven days
6. Store soiled disposable diapers in a plastic-lined covered container not easily accessible to children
7. Discard disposable diapers daily or more frequently as needed to eliminate odor
8. Launder diapers according to manufacturer's guidelines
9. Other put a child's clothes in own laundry chute for provider to wash. Was not in placed in a plastic bag and put with child's things to be washed at home.

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

Corrective Action Plan Due: 05/05/2023

Domain: 08 Staff Files



Rule: 5101:2-13-07 Provider Responsibilities

Code: The program is required to have the current licensing rules available in a noticeable area on the premises.

Findings: During the inspection, it was determined the current licensing rules were not [available/available in a noticeable area] on the premises. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 05/05/2023

Domain: 08 Staff Files

Rule: 5101:2-13-07 Provider Responsibilities

Code: The provider is required to have hours of availability to meet with parents posted in a noticeable place.

Findings: During the inspection, it was determined that 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: 05/05/2023

Domain: 08 Staff Files

Rule: 5101:2-13-10 Professional Development

Code: The program staff is required to complete at least six clock hours of training annually.

Findings: In review of records, it was determined the Child Care Staff Member(s) indicated on the Employee Record Chart did not meet the annual professional development requirement as noted in number(s)1.

1. The child care staff member(s) had not completed at least six hours of professional development.
2. Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.
3. Training topic did not meet the requirements listed in appendix A of this rule.
4. Documentation of training did not meet the requirements of this rule.
5. The substitute(s) had been used more than ninety days annually between July first and June thirtieth and had not completed at least six hours of professional development.
6. Other [].

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

Corrective Action Plan Due: 05/05/2023



Domain: 08 Staff Files

Rule: 5101:2-13-07 Staff Records

Code: The provider is required to maintain current employee, child care staff members and resident records in the Ohio Professional Registry.

Findings: During the inspection, it was determined that employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 7,8 9 below:

1. The provider had not created or updated their individual profile in the OPR.
2. The provider had not created or updated the program's organizational dashboard in the OPR.
3. At least one employee, child care staff member, or substitute child care staff member had not created or updated their individual profile in the OPR.
4. At least one employee, child care staff member, or substitute child care staff member had not created an employment record in the OPR for the program on or before the first day of employment, including date of hire.
5. At least one employee, child care staff member, or substitute child care staff member had not updated changes to positions or roles in the OPR within five calendar days of the change.
6. The program's organizational dashboard in the OPR was not updated within five business days when at least one employee, child care staff member, or substitute child care staff member's scheduled days and hours changed.
7. The program's organizational dashboard in the OPR was not updated within five business days when at least one employee, child care staff member, or substitute child care staff member's group assignments changed, if applicable.
8. The program's organizational dashboard in the OPR was not updated with the employment end date within five business days when at least one employee, child care staff member, or substitute child care staff member ended employment.
9. At least one resident over the age of eighteen had not created a profile and employment record for the family child care provider within five days of becoming a resident or turning eighteen.
10. The program's organizational dashboard in the OPR was not updated within five calendar days of a change in residency for at least one resident over the age of eighteen.

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: 05/05/2023

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 provider did not have current valid documentation for training(s) listed in number(s) 1, 4, 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: 05/05/2023

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 License Visible	Compliant	
5101:2-13-02 Voluntary Temporary Closure	Compliant	
5101:2-13-02 Change of Location	Compliant	
5101:2-13-02 Information in OCLQS	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Provider Medical	Compliant	
5101:2-13-03 Inspection Requirements	Compliant	
5101:2-13-04 Fire Safety for Type B Homes	Compliant	
5101:2-13-04 Flammable and Combustible Materials in a Type B Home	Compliant	
5101:2-13-04 Heaters in a Type B Home	Compliant	
5101:2-13-05 Denial, Revocation, and Suspension	Compliant	
5101:2-13-07 Type B Provider - Foster Parent	Compliant	
5101:2-13-08 Employee Requirements	Compliant	
5101:2-13-08 Child Care Staff Requirements	Compliant	
5101:2-13-08 Whistle Blower	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-09 Background Checks	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Outdoor Space	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Outdoor Equipment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Fall Zone	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Safe Equipment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Clean environment and equipment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Handwashing	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Smoke Free	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Toothbrushing	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Child Medical and Enrollment Records	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 Communicable Diseases	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Incident/Injury	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-18 Attendance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 School Age Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 Child Guidance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-20 Sleep and Nap Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable



5101:2-13-20 Crib and Playpen Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-22 Food Handling	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Infant Daily Care	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Infant Bottle and Food Preparation	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-25 Medication Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-18 Group Size and Ratios	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13 Written Policies and Procedures	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Carbon Monoxide Detectors - Type B Only	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Indoor Space	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-17 Programming	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Pets	Compliant	



Department of Education
Department of Job and Family Services
