

# **Family Child Care Complaint Inspection Summary 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
HARRIS, KIMBERLY A	000000954432488	FCC - Type B Home
Address	·	County
2202 ANTHONY AVE ASHTABULA OH 44004		ASHTABULA

Inspection Information								
Inspection Type Complaint		Inspection Scope Partial		Inspection Notice				
				Unannounced				
Reviewer(s) Christina Conley Inspection Day Begin Time 3: 04/15/2025		Гіте 3:10 PM	End Time 3:55 PM					
Reviewer(s) Chan	tel Carusone	Inspection Da 04/15/2025	у	Begin Time 3:10 PM		En	End Time 3:55 PM	
Summary of Findings								
No. Rules Verified	No. Rules with Nor	n-compliances	No. Serious R	isk	No. Moderate Risk		No. Low Risk	
10	8		0		4		7	

Staff-Child Ratios at the Time of Inspection					
Group	Age Group/Range	Ratio Observed	Comment		
Kimberly Harris	Mixed Age Group	1 to 8			



# **Complaint Allegations**

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.

No Allegations were substantiated during this inspection.
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Summary of Additional Non-Compliances
Serious Risk Non-Compliances
No Additional Serious Risk Non-Compliances were observed during this inspection

# **Moderate Risk Non-Compliances**

Domain: 01 Ratio & Supervision

Rule: 5180:2-13-18 Group Size and Ratios

Code: The program is required to monitor the number of children in care to remain within the licensed capacity.



<u>Findings:</u> During the inspection, it was determined there were 8 children in care during the hours of operation, which is over the capacity listed on the license. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/16/2025

Domain: 01 Ratio & Supervision

Rule: 5180:2-13-18 Group Size and Ratios

Code: The program is required to follow group size requirements.

<u>Findings:</u> During the inspection, it was determined 8 children with 1 under two years of age were in the care of one child care staff member which resulted in more than six children/three children under two years of age. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/16/2025

#### Domain: 08 Staff Files

Rule: 5180:2-13-09 Background Checks

Code: The program is required to have a JFS 01176 "Program Notification of Background Check Review for Child Care" on file for the individual to have sole responsibility.

<u>Findings:</u> During the inspection, it was determined that child care staff member had sole responsibility of children in the group and neither a preliminary approval nor the JFS 01176 "Program Notification of Background Check Review for Child Care" were on file as required.

Submit the program's corrective action plan, which includes a copy of the JFS 01176 or a statement that the child care staff member no longer have sole responsibility of children, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/16/2025

## Domain: 08 Staff Files

Rule: 5180:2-13-09 Background Checks

Code: Individuals associated to the program are required to request background checks.

<u>Findings:</u> In review of the staff records, it was determined that a resident of the home turned 18 years of age moved into the home and background checks were not requested within 10 business days. Submit the program's corrective action plan, which includes a copy of the resident's JFS 01176, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/16/2025



## **Low Risk Non-Compliances**

#### Domain: 01 Ratio & Supervision

Rule: 5180:2-13-18 Attendance

Code: The program is required to maintain a record of the arrival and departure of each child. The program is also required to retain the original attendance record at the program for a period of one year.

<u>Findings:</u> During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number 2 below:

- 1. No attendance record was being maintained.
- 2. The attendance record was not being consistently completed.
- 3. The record did not include the name of at least one child.
- 4. The record did not include the birth date of at least one child.
- 5. The record did not include the assigned group.
- 6. The record did not include the child's weekly schedule.
- 7. The record did not include the time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.
- 8. The original attendance record was not kept at the program for a period of one year.

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

Corrective Action Plan Due: 05/16/2025

## Domain: 01 Ratio & Supervision

Rule: 5180:2-13-18 Attendance

Code: The program is required to have a tracking method for children.

<u>Findings:</u> During the inspection, it was determined that the method for tracking the children in the group did not meet the requirements in rule as noted in the number 4 below:

- 1. There was no method in place.
- 2. The method did not include each child's name.
- 3. The method did not include each child's birthdate.
- 4. The tracking method did not remain with the group at all times.
- 5. The tracking method was not updated throughout the day as children entered or left the group.

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

Corrective Action Plan Due: 05/16/2025

Domain: 08 Staff Files

Rule: 5180:2-13-08 Employee Requirements



Code: The program is required to obtain completed medical statements for all program staff.

<u>Findings:</u> In review of the staff records, it was determined that the medical statements for those individuals listed on the Employee Record Chart did not include the required information listed below in number 1.

- 1. A medical statement was not on file:
- 2. The medical statement(s) on file were not dated within 12 months of the individual's first day of employment;
- 3. Date of examination was missing;
- 4. Signature, business address, or telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination was missing;
- 5. A statement was missing that verifies the individual is:
- a. Physically fit for employment in a program caring for children;
- b. Immunized against Tetanus, Diphtheria, Pertussis (Tdap);
- c. Immunized against Measles, Mumps, and Rubella (MMR);

Submit the program's corrective action plan, which includes a copy of the completed medical statement, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/16/2025

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

Rule: 5180:2-13-07 Staff Records

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

<u>Findings:</u> During the inspection, it was determined that employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in numbers 4 and 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.

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

Corrective Action Plan Due: 05/16/2025



Domain: 08 Staff Files

Rule: 5180:2-13-10 Health Training

Code: Child care staff members and substitute child care staff members are required to complete health trainings within the first ninety days of hire and prior to being left alone with children.

<u>Findings:</u> In review of records, it was determined the CCSM or Substitute CCSM did not meet health training requirements listed in number 1 below:

- 1. All health trainings were not completed prior to being left alone with children.
- 2. First Aid training was not completed within the first ninety days of hire.
- 3. CPR training was not completed within the first ninety days of hire.
- 4. Communicable Disease training was not completed within the first ninety days of hire.
- 5. Child Abuse training was not completed within the first ninety days of hire.

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: 05/16/2025

#### Domain: 08 Staff Files

Rule: 5180:2-13-08 Child Care Staff Requirements

Code: The program is required to have staff complete the online staff orientation training. Additionally, the training must be completed before they are permitted to have sole responsibility of children.

<u>Findings:</u> In review of the staff records, it was determined that child care staff member or substitute child care staff member did not meet the requirements for completing the online orientation training as noted in number 4 below:

- 1. The training was not completed within 30 days of starting employment at the program as a child care staff member.
- 2. No documentation of completing the training after December 31, 2016.
- 3. Completion of the training was not verified in the OPR.
- 4. A child care staff member had sole responsibility of children and had not completed the online orientation.

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

Corrective Action Plan Due: 05/16/2025

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

Rule: 5180:2-13-07 Provider Responsibilities

Code: The program is required to notify the county agency of any change in the household composition.

<u>Findings:</u> During the inspection, it was determined the provider did not update OCLQS as noted in the following number 1 below:

- 1. A change in household composition including someone joining the household or leaving the household within five calendar days.
- 2. An individual staying in the home for more than ten consecutive calendar days.



Submit the program's corrective action plan to verify compliance with this rule.
Corrective Action Plan Due: 05/16/2025