

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
DeShayla Mosby	000000959101582	FCC - Type B Home
Address	·	County
2432 Lawton Ave		LUCAS
Toledo		
OH 43620		

Inspection Information					
Inspection Type	Inspection So	cope	Inspection Notice		
Compliance	Full	Full			
Inspection Date	Begin Time		End Time		
03/07/2025	11:15 AM	11:15 AM		1:55 PM	
Reviewer:	,		*		
Kimberly Dada					
Summary of Findings					
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk	
69	5	0	0	5	

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		3	0	3
School Age		8	0	8
Total Capacity/Enrollment	6	11	0	11

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
one	4 years to < 5 years	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
No Moderate Risk Non-Compliances were observed during this inspection
No Woodcrate Nisk Non-compliances were observed during this hispection

Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5180:2-13-03 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 8/8/2024. 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: 04/06/2025

Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-13-12 Safe Environment

Code: The program is required to provide an environment that protects the children in care from any items and conditions that may threaten their health, safety, and well-being.

Findings: Children in care shall be protected from any items and conditions which threaten their health, safety, and well being. During the inspection, it was determined that children were not protected from the following item(s) or condition(s) which may threaten their health, safety, or well being as noted in the following number(s) 22 below:

- 1. Surge protectors/outlets did not have childproof receptacle covers.
- 2. Open pull cords that are not closed loop.
- 3. Toys or other items small enough to be swallowed were present in the space where infants and/or toddlers were in care.
- 4. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
- 5. Stacked chairs.
- 6. Telephone cords.
- 7. Employee(s) purse(s).
- 8. Diaper bags.
- 9. Television not securely anchored.
- 10. Small or lightweight pieces of shelving units are not securely anchored to the wall.
- 11. Staff member stepped over a barrier/gate while holding a child.
- 12. Chipping or peeling paint.
- 13. An area rug did not have a nonskid backing.
- 14. An area rug presented a tripping hazard.
- 15. A floor surface was unsafe in that [].
- 16. No platform was provided for the sink or toilet.
- 17. The platform provided for the sink or toilet was not sturdy.
- 18. The platform provided for the sink or toilet posed a safety hazard in that [].
- 19. Emergency exits were blocked by the following furniture in that [].
- 20. A mercury thermometer was being used to take a child's temperature.
- 21. Methods of ventilation used did not provide protection from rodents, insects, or other hazards.
- 22. Other plug in air freshener accessible in the living room.

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

Corrective Action Plan Due: 04/06/2025



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.

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) 6 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: 04/06/2025

Domain: 08 Staff Files

Rule: 5180:2-13-10 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: 04/06/2025

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, 4,7 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.

Corrective Action Plan Due: 04/06/2025



Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Voluntary Temporary	Compliant	became many states mentally in approache
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	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Information in OCLQS	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Provider Medical	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Building Requirements	Compliant	
for Type B Homes		
Internal to A 1 Constraint in Substitutional		
Rule	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	Documenting Statement(3), it applicable
Combustible Materials in a Type B	Compilant	
Home		
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Rule	Status	Documenting Statement(s), If applicable
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5180:2-13-04 Heaters in a Type B	Compliant	
Home		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-07 Provider Responsibilities	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13 Written Policies and	Compliant	
Procedures		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-07 Type B Provider - Foster	Compliant	
Parent		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Employee Requirements	Compliant	
Rule	Ctatus	Desumenting Statement(s) If applicable
	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		Documenting Statement(s), If applicable
5180:2-13-08 Whistie Blower	Compliant	
	I.	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-09 Background Checks	Compliant	Documenting Statement(s), it applicable
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-10 Health Training	Compliant	bocumenting statement(s), if applicable
2100.5-12-10 Legitti Hallillik	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
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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	



Rule	Status	Desumenting Statement(s) If applicable
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5180:2-13-11 Outdoor Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Fall Zone		Documenting statement(3), it applicable
5180:2-13-11 raii Zone	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Safe Equipment	Compliant	
3160.2-13-12 Sale Equipment	Compliant	
2		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Carbon Monoxide	Compliant	
	Compilant	
Detectors - Type B Only		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Pets	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
Rule 5180:2-13-13 Clean environment and	Status Compliant	Documenting Statement(s), If applicable
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5180:2-13-13 Clean environment and		Documenting Statement(s), If applicable
5180:2-13-13 Clean environment and equipment	Compliant	
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5180:2-13-13 Clean environment and equipment	Compliant	
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S180:2-13-13 Clean environment and equipment Rule 5180:2-13-13 Smoke Free Rule 5180:2-13-13 Handwashing	Status Compliant Status Compliant Status Compliant	Documenting Statement(s), If applicable Documenting Statement(s), If applicable
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S180:2-13-13 Clean environment and equipment Rule 5180:2-13-13 Smoke Free Rule 5180:2-13-13 Handwashing	Status Compliant Status Compliant Status Compliant	Documenting Statement(s), If applicable Documenting Statement(s), If applicable
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Ratio and Supervision	Compliant	
for Field and Routine Trips		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Driver Requirements	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Vehicle Inspections	Compliant	
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Rule	Status	Documenting Statement/s) If applicable
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5180:2-13-14 Vehicle Requirements	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-15 Health Conditions	Compliant	bocumenting statement(3), if applicable
5160.2-13-13 Health Conditions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-15 Child Records Retention	Compliant	Bootimenting statement(s), in approasie
and Confidentiality	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Medical, Dental, and	Compliant	
General Emergency Plan		
Certer at Emergency Tian		
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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	
Precautions	<i>i</i> .	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Communicable Diseases	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Incident/Injury	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Emergency	Compliant	g
Preparedness and Response Plan	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-17 Programming	Compliant	
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	
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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	
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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		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 Child Guidance	Compliant	S - Later (approach
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Rule	Status	Documenting Statement(s), If applicable
545 S4 S5		Documenting Statement(s), if applicable
5180:2-13-20 Crib and Playpen	Compliant	
Requirements		
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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	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-22 Food Handling	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-22 Fluid Milk	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Infant Daily Care	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Infant Bottle and Food	Compliant	Documentally of a content (e), it approaches
Preparation	Compilant	
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5180:2-13-23 Diapering	Compliant	
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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	
Rule	Status	Documenting Statement(s), If applicable



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5180:2-13-24 Parent Permission for	Compliant	
Swimming		
- William B		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-25 Medication	Compliant	
Requirements		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-14-06 Health Conditions	Compliant	
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