

# **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 <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	
ABBINGTON, LAVONNA M	00000969058194	FCC - Type B Home	
Address		County	
7492 SWINDON ST		FRANKLIN	
BLACKLICK			
OH 43004			

Inspection Information					
Inspection Type		Inspection Scope		Inspection Notice	
Compliance		Full	1000	Unannounced	
Inspection Date		Begin Time		End Time	
02/13/2025		9:35 AM		10:30 AM	
Inspection Date		Begin Time		End Time	
02/14/2025		12:40 PM		2:00 PM	
Reviewer:					
Jamie Nunamaker-Dukuray					
Reviewer:					
Jamie Nunamaker-Dukuray					
Summary of Findings					
No. Rules Verified	No. Rules with Non-compliances No. Seriou		No. Serious Risk	No. Moderate Risk	No. Low Risk
69	4		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)		1	0	1
Young Toddler	,	1	0	1
Total Under 2 Years	3	2	0	2
Older Toddler		0	0	0
Preschool		1	0	1
School Age		5	0	5
Total Capacity/Enrollment	6	6	0	8

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Abbington, Lavonna M	Mixed Age Group	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

# **Low Risk Non-Compliances**

# 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 items or conditions which may threaten their health, safety, or well being as noted in the following numbers 1 and 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: Tool items kept inside the open bathroom cabinet accessible to children

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

Corrective Action Plan Due: 03/16/2025

#### Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-13-13 Clean environment and equipment

Code: The program is required to have all required items in the restroom(s) and keep them sanitary.

Findings: During the inspection, it was determined that unsanitary conditions, as noted in the following numbers 4 and 5 below, were in the Family Child Care restroom:

- 1. There was no liquid soap.
- 2. There was no toilet tissue.
- 3. There were no individually assigned towels or disposable towels.
- 4. The toilet cleaning brush was accessible to the children.
- 5. The plunger was accessible to the children.



- 6. The toilet was not flushed.
- 7. The trash was not emptied from the day before.
- 8. There was a strong urine odor.
- 9. Other [].

The restroom(s) must be kept sanitary at all times. Submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 03/16/2025

### **Domain: 06 Program Information**

Rule: 5180:2-13-14 Requirements for Field and Routine Trips

Code: The program is required to obtain written parental permission before leaving the premises and retain the forms for at least one year from the date of the trip. Routine trip permission forms must be updated annually.

Findings: In review of the program's records, it was determined that requirements for written permission from the parent/guardian for the walking routine trips were not met as listed in number 1 below:

- 1. Written parental permission was not secured for field trips and/or routine trips off the premises.
- 2. The written permission was missing the child's name.
- 3. The written permission was missing the date(s) of the trip(s) (field trips only).
- 4. The written permission was missing the destination(s) of the trip(s).
- 5. The written permission was missing the departure and return time(s) of the trip(s) (field trips only).
- 6. The written permission was missing the signature of the parent.
- 7. The written permission was missing the date on which the permission was signed.
- 8. The written permission was missing a statement notifying parents how their child will be transported.
- 9. Permission forms for routine trips were not being updated annually.
- 10. Written parental permission forms for field trips and/or routine trips were not being maintained on file for at least one year from the date of the trip.
- 11. Other: [ ].

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

Corrective Action Plan Due: 03/16/2025

#### Domain: 09 Children's Files

Rule: 5180:2-13-15 Child Medical and Enrollment Records

Code: The program is required to have a completed JFS 01234 "Child Enrollment and Health Information for Child Care" on file on the premises for each child.

Findings: In review of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in number 2 below:



- 1. No enrollment form was completed for at least one child
- 2. The current JFS 01234 was not completed for at least one child
- 3. Complete child information
- 4. Complete parent information
- 5. Complete emergency contact information
- 6. Complete physician information
- 7. Information regarding the parent list
- 8. Health information
- 9. Additional information for all boxes checked "yes"
- 10. Emergency transportation information
- 11. Parent/guardian's signature
- 12. Diapering Statement
- 13. Acknowledgement of Policies and Procedures
- 14. Enrollment form for at least one child was not updated by either the parent or the administrator
- 15. Enrollment form for at least one child was not signed by the administrator
- 16. Other [ ]

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

Corrective Action Plan Due: 03/16/2025

#### 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 1, 2 and 9 below:

- 1. No medical was on file for at least one child
- 2. Medical 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 was 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.

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Corrective Action Plan Due: 03/16/2025

# Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Voluntary Temporary Closure	Compliant	
	20	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 License Visible	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Change of Location	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Information in OCLQS	Compliant	bocamenting statement(s), if applicable
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Provider Medical	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-03 Inspection Requirements	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Building Requirements	Compliant	
for Type B Homes		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Fire Safety for Type B	Compliant	
Homes	,	
100 miles (100 miles (		
		-
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Flammable and	Compliant	
Combustible Materials in a Type B		
Home		
Tiotile		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Heaters in a Type B	Compliant	
Home		
<u> </u>		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-07 Staff Records	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-07 Provider Responsibilities	Compliant	
Signature   Sign	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13 Written Policies and		Bocumenting Statement(s), if applicable
ARTHUR DESCRIPTION OF THE STATE	Compliant	
Procedures		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-07 Type B Provider - Foster	Compliant	
Parent		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Employee Requirements	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Child Care Staff	Compliant	0
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Requirements		
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Rule	Chatus	Decumenting Statement/s) If applicable
nuie	Status	Documenting Statement(s), If applicable



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5180:2-13-08 Whistle Blower	Compliant	
Rule	Status	Documenting Statement(s), If applicable
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5180:2-13-09 Background Checks	Compliant	
D. I-	Chabasa	D
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-10 Health Training	Compliant	
Dula	Chabus	Decumentias Statement (a) If a mulicable
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-10 Professional	Compliant	
Development		
Dule	Ctatus	Decumenting Statement / If a well-able
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Indoor Space	Compliant	
Rule	Ctatus	Desumenting Statement(s) If applicable
	Status	Documenting Statement(s), If applicable
5180:2-13-11 Outdoor Space	Compliant	
Rule	Status	Desumenting Statement(s) If applicable
		Documenting Statement(s), If applicable
5180:2-13-11 Outdoor Equipment	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Fall Zone	Compliant	bottomenting statement(s), it applicable
3100.2-13-11 I all 20116	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Safe Equipment	Compliant	bounding statement(3), if applicable
3100.2 13 12 Sale Equipment	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Carbon Monoxide	Compliant	bocumenting statement(s), it applicable
E-2016_02-02-05-05-05-05-05-05-05-05-05-05-05-05-05-	Compliant	
Detectors - Type B Only		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Pets	Compliant	Documenting Statement(s), it applicable
2100.2-13-12 FEIS	Compliant	



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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Smoke Free	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Handwashing	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Toothbrushing	Compliant	
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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	Chahara	Decumenting Statement of If amplicable
100000000000000000000000000000000000000	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		Documenting Statement(s), if applicable
3180:2-13-14 Vehicle Inspections	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Vehicle Requirements	Compliant	Bocamenting statement(s), it applicable
3130.2 13 14 Vehicle Requirements	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-15 Health Conditions	Compliant	(-), ··
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-15 Child Records Retention	Compliant	
and Confidentiality		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Medical, Dental, and	Compliant	
General Emergency Plan	,	
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Rule	Status	Documenting Statement(s), If applicable
		Documenting Statement(s), it 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		
- AND 10		
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	
Preparedness and Response Plan		
Trepareamess and nespense Ham		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-17 Programming	Compliant	
3100.2 13 17 170gramming	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-17 Materials and	Compliant	Documenting Statement(3), it applicable
	Compliant	
Equipment		
		1
Rule	Status	Documenting Statement/s) If applicable
		Documenting Statement(s), If applicable
5180:2-13-18 Group Size and Ratios	Compliant	
- I		
Rule	Status	Documenting Statement(s), If applicable
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	
J 100.2 10 10 001 Age Supervision	Compilant	



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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-21 Evening and Overnight	Compliant	
Care		
	I.	-
Rule	Status	Documenting Statement(s), If applicable
	- Contraction -	Documenting Statement(s), if applicable
5180:2-13-20 Sleep and Nap	Compliant	
Requirements		
-		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 Child Guidance	Compliant	
-	<u>1</u>	
Rule	Status	Documenting Statement(s), If applicable
The state of the s		Documenting Statement(s), if applicable
5180:2-13-20 Crib and Playpen	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-21 Sanitary Environment	Compliant	
and Hygiene		
and Hygiene		
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Rule	Status	Desumenting Statement(s) If applicable
	0	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	
	The state of the s	
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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 Infant Daily Care	Compliant	, , , , , , , , , , , , , , , , , , ,
3103.2 13 23 mant bany care	Compilation	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Infant Bottle and Food	Compliant	
Preparation	eventure is extraction ■ sentencial destination in the	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Diapering	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 On-site Pools	Compliant	Documenting Statement(s), if applicable
3100.2-13-24 OII-SILE FOOIS	Compilant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 Swimming Sites	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 Parent Permission for Swimming	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-25 Medication	Compliant	bocumenting statement(s), it applicable
Requirements	Compliant	
Dula	Chabina	Decimenting State we suit a) If a multiple
Rule	Status	Documenting Statement(s), If applicable
5180:2-14-06 Health Conditions	Compliant	