

## 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://ifs.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<br>MCGRAW, MARLA                     | Program Number<br>000000971599033 | Program Type<br>FCC - Type B Home |
| Address<br>1902 FAYE RD.<br><br>AKRON<br>OH 44306 |                                   | County<br>SUMMIT                  |

| Inspection Information        |                          |                                  |
|-------------------------------|--------------------------|----------------------------------|
| Inspection Type<br>Compliance | Inspection Scope<br>Full | Inspection Notice<br>Unannounced |
| Inspection Date<br>05/13/2025 | Begin Time<br>9:50 AM    | End Time<br>12:08 PM             |
| Inspection Date<br>05/21/2025 | Begin Time<br>6:20 PM    | End Time<br>7:05 PM              |
| Reviewer:<br>Kaitlin Duncan   |                          |                                  |
| Reviewer:<br>Kaitlin Duncan   |                          |                                  |

| Summary of Findings      |                                     |                       |                        |                   |
|--------------------------|-------------------------------------|-----------------------|------------------------|-------------------|
| No. Rules Verified<br>68 | No. Rules with Non-compliances<br>6 | No. Serious Risk<br>0 | No. Moderate Risk<br>2 | No. Low Risk<br>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          | 1         | 1     |
| Young Toddler                                             |                  | 0          | 0         | 0     |
| <b>Total Under 2 Years</b>                                | 3                | 0          | 1         | 1     |
| Older Toddler                                             |                  | 0          | 0         | 0     |
| Preschool                                                 |                  | 0          | 1         | 1     |
| School Age                                                |                  | 0          | 0         | 0     |
| <b>Total Capacity/Enrollment</b>                          | 6                | 0          | 1         | 2     |

| Staff-Child Ratios at the Time of Inspection |                 |                |         |
|----------------------------------------------|-----------------|----------------|---------|
| Group                                        | Age Group/Range | Ratio Observed | Comment |
| Marla                                        |                 | 1 to 0         |         |
| Marla                                        | Mixed Age Group | 1 to 2         |         |



### 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

##### Domain: 07 Diapering & Infant Care

Rule: 5180:2-13-20 Crib and Playpen Requirements

Code: The program staff is required to place infants in a crib or playpen to sleep unless a JFS 01235 "Sleep Position Waiver Statement for Child Care" is on file.

Findings: During the inspection, it was determined an infant slept in equipment other than their crib or playpen and did not have written permission from a physician on file. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 06/12/2025

##### Domain: 07 Diapering & Infant Care

Rule: 5180:2-13-20 Crib and Playpen Requirements

Code: The program staff is required to place infants in a crib or playpen with no strangulation hazards.

Findings: During the inspection, it was determined that an infant was placed in a crib with the following suffocation or strangulation hazard a blanket for an infant less than twelve months old. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 06/12/2025

### Low Risk Non-Compliances

#### Domain: 01 Ratio & Supervision

Rule: 5180:2-13-18 Attendance

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

Findings: 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 5 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: 06/20/2025

#### 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 a field trip or routine trip were not met as listed in number 11 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: Date of permission was missing from routine trip, for which the form is valid one year from.

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

Corrective Action Plan Due: 06/26/2025

**Domain: 07 Diapering & Infant Care**

Rule: 5180:2-13-23 Infant Bottle and Food Preparation

Code: The program is required to retain and update infant feeding instructions.

Findings: During the inspection, it was determined that written instructions for feeding the infants noted on the Children Record Review form were not on file, as required by this rule. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 06/12/2025

**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 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.

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: 06/12/2025

#### **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(s) 4, 10, & 16 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: First Day Missing

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

Corrective Action Plan Due: 06/12/2025

| Rule                                     | Status    | Documenting Statement(s), If applicable |
|------------------------------------------|-----------|-----------------------------------------|
| 5180:2-13-02 Voluntary Temporary Closure | Compliant |                                         |

| 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 |                                         |

| 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 |                                         |

| Rule                                                | Status    | Documenting Statement(s), If applicable |
|-----------------------------------------------------|-----------|-----------------------------------------|
| 5180:2-13-04 Building Requirements for Type B Homes | Compliant |                                         |

| Rule                                      | Status    | Documenting Statement(s), If applicable |
|-------------------------------------------|-----------|-----------------------------------------|
| 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 |                                         |

| Rule                                  | Status    | Documenting Statement(s), If applicable |
|---------------------------------------|-----------|-----------------------------------------|
| 5180:2-13-04 Heaters in a Type B Home | Compliant |                                         |

| Rule                                   | Status    | Documenting Statement(s), If applicable |
|----------------------------------------|-----------|-----------------------------------------|
| 5180:2-13-07 Provider Responsibilities | Compliant |                                         |

| Rule                                         | Status    | Documenting Statement(s), If applicable |
|----------------------------------------------|-----------|-----------------------------------------|
| 5180:2-13-07 Type B Provider - Foster Parent | Compliant |                                         |

| Rule                               | Status    | Documenting Statement(s), If applicable |
|------------------------------------|-----------|-----------------------------------------|
| 5180:2-13-08 Employee Requirements | Compliant |                                         |

| Rule                                       | Status    | Documenting Statement(s), If applicable |
|--------------------------------------------|-----------|-----------------------------------------|
| 5180:2-13-08 Child Care Staff Requirements | Compliant |                                         |

| Rule                        | Status    | Documenting Statement(s), If applicable |
|-----------------------------|-----------|-----------------------------------------|
| 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 |                                         |

  

| 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 |                                         |

  

| Rule                       | Status    | Documenting Statement(s), If applicable |
|----------------------------|-----------|-----------------------------------------|
| 5180:2-13-13 Toothbrushing | Compliant |                                         |

  

| Rule                                                           | Status    | Documenting Statement(s), If applicable |
|----------------------------------------------------------------|-----------|-----------------------------------------|
| 5180:2-13-14 Ratio and Supervision for Field and Routine Trips | Compliant |                                         |

|                                                          |               |                                                |
|----------------------------------------------------------|---------------|------------------------------------------------|
|                                                          |               |                                                |
| <b>Rule</b>                                              | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-14 Driver Requirements                         | Compliant     |                                                |
| <b>Rule</b>                                              | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-14 Vehicle Inspections                         | Compliant     |                                                |
| <b>Rule</b>                                              | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-14 Vehicle Requirements                        | Compliant     |                                                |
| <b>Rule</b>                                              | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-15 Health Conditions                           | Compliant     |                                                |
| <b>Rule</b>                                              | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-15 Child Records Retention and Confidentiality | Compliant     |                                                |
| <b>Rule</b>                                              | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-16 Medical, Dental, and General Emergency Plan | Compliant     |                                                |
| <b>Rule</b>                                              | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-16 Emergency Drills                            | Compliant     |                                                |
| <b>Rule</b>                                              | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-16 First Aid Kit/Standard Precautions          | Compliant     |                                                |
| <b>Rule</b>                                              | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-16 Communicable Diseases                       | Compliant     |                                                |
| <b>Rule</b>                                              | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-16 Incident/Injury                             | Compliant     |                                                |

| 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 Equipment          | Compliant |                                         |
| Rule                                          | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-18 Group Size and Ratios            | Compliant |                                         |
| Rule                                          | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-19 Supervision                      | Compliant |                                         |
| Rule                                          | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-19 School Age Supervision           | Compliant |                                         |
| Rule                                          | Status    | Documenting Statement(s), If applicable |
| 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 |                                         |

|                                             |               |                                                |
|---------------------------------------------|---------------|------------------------------------------------|
|                                             |               |                                                |
| <b>Rule</b>                                 | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-22 Fluid Milk                     | Compliant     |                                                |
| <b>Rule</b>                                 | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-23 Infant Daily Care              | Compliant     |                                                |
| <b>Rule</b>                                 | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-23 Diapering                      | Compliant     |                                                |
| <b>Rule</b>                                 | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-24 On-site Pools                  | Compliant     |                                                |
| <b>Rule</b>                                 | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-24 Swimming Sites                 | Compliant     |                                                |
| <b>Rule</b>                                 | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-24 Parent Permission for Swimming | Compliant     |                                                |
| <b>Rule</b>                                 | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-25 Medication Requirements        | Compliant     |                                                |