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
DONALDSON, TOMARA	000000974848090	FCC - Type B Home
Address		County
781 FAIRMONT		MAHONING
YOUNGSTOWN		
OH 44510		

Inspection Information				
Inspection Type	Inspection So	cope	Inspection Notice	
Compliance	Full		Announced	
Inspection Date	Begin Time		End Time	
05/19/2022	9:20 AM		10:53 AM	
Reviewer:				
Carla Coristin				
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
68	10	0	1	11

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		2	0	2
School Age		2	0	2
Total Capacity/Enrollment	6	4	0	4

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Tamera Donaldson	3 years to < 4 years	1 to 2	



Summary of Non-Compliances

If the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited. Ohio Administrative Code 5101: 2-13-03 details the process for submitting a request for a review if a program disagrees with a licensing finding. The request for review must be submitted within seven days from the receipt of the licensing report.

Submitted within seven days from the receipt of the licensing report.
Serious Risk Non-Compliances
No Serious Risk Non-Compliances were observed during this inspection
Moderate Risk Non-Compliances
Domain: 02 Safe & Sanitary Environment
Rule: 5101:2-13-12 Carbon Monoxide Detectors - Type B Only Code: The program is required to meet all requirements for carbon monoxide detectors.
esac. The program is required to meet an requirements for curson monoxide detectors.
Findings: During the inspection, it was determined that the Type B Home did not have a working carbon

Findings: During the inspection, it was determined that the Type B Home did not have a working carbon monoxide detector [in the building/on each floor where care is provided] or carbon monoxide detector(s) were not [placed/installed/tested/maintained] in accordance with manufacturer's recommendations. A working carbon monoxide detector must be placed, installed, tested, and maintained in accordance with manufacturer's recommendations. Submit the program's corrective action plan to verify compliance with this rule.

Corrective Action Plan Due: 06/18/2022

Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5101:2-13-02 License Visible

Code: The program is required to have their license in a visible area.

Findings: During the inspection, it was determined the provider's license was not in a location visible to parents, as required. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/18/2022

Domain: 00 License & Approvals

Rule: 5101:2-13-04 Fire Safety for Type B Homes

Code: The program is required to maintain smoke alarms in the appropriate areas of the program building.

Findings: During the inspection, it was determined that the Type B Home did not have a working smoke alarm [in the basement/on each level of the home] or smoke alarm(s) were not [placed/installed/tested/maintained] in accordance with manufacturer's recommendations. A working smoke alarm must be placed, installed, tested, and maintained in accordance with manufacturer's recommendations. Submit the program's corrective action plan to verify compliance with this rule.

Corrective Action Plan Due: 06/18/2022

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-13 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 number nine there was cleaning product under the unlocked vanity in the restroomrestroom:

- 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: 06/18/2022



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

Corrective Action Plan Due: 06/18/2022

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 three below:

- 1. Fire alert plan, including a diagram indicating evacuation routes.
- 2. Weather alert plan was missing details for [].
- 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: 06/18/2022

Domain: 05 Health & Safety

Rule: 5101:2-13-16 Communicable Diseases

Code: The program is required to post the Ohio Communicable Disease Chart in a noticeable area.

Findings: During the inspection, it was determined that the Ohio Communicable Disease Chart was not posted as required , as indicated in the number three below:

- 1. In a location readily available to provider, child care staff members, employees, and residents;
- 2. The chart was not posted.
- 3. The posted chart was not the current version.
- 4. The posted chart was not displayed in the size available in the ODJFS forms central to be easily read.

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

Corrective Action Plan Due: 06/18/2022

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 seven 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: 06/18/2022

Domain: 08 Staff Files

Rule: 5101:2-13-10 Professional Development

Code: The program staff is required to have documentation on file at the program of all trainings.

Findings: During the inspection, it was determined the provider did not have training documentation 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: 06/18/2022

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 numbers twelve and sixteen 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: 06/18/2022

Domain: 09 Children's Files

Rule: 5101:2-13-15 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 two 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: 06/18/2022

Domain: 09 Children's Files

Rule: 5101:2-13-15 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 four 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: 06/18/2022

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Voluntary Temporary	Compliant	
Closure		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Change of Location	Compliant	
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Information in OCLQS	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Provider Medical	Compliant	Documenting Statement(s), it applicable
3101.2-13-02 Flovider Wedicar	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-03 Inspection	Compliant	0 (7 11
Requirements		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Building Requirements	Compliant	
for Type B Homes		
Rule	Status	Documenting Statement(s), If applicable

5101:2-13-04 Flammable and Combustible Materials in a Type B Home	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Heaters in a Type B	Compliant	
Home		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-07 Staff Records	Compliant	V // 11
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-07 Type B Provider - Foster	Compliant	V // 11
Parent	·	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Employee Requirements	Compliant	(//
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Child Care Staff	Compliant	· · · · · · · · · · · · · · · · · · ·
Requirements	·	
Rule	Status	Documenting Statement(s), If applicable
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	
	I	
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	

beginning:		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Safe Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Safe Environment	Compliant	0 ("
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Handwashing		bocumenting statement(3), if applicable
3101.2-13-13 Halluwasiiiig	Compliant	
D. I		
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	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Requirements for Field	Compliant	
and Routine Trips	Compilant	
and Routine Trips		
Rule	Status	Decumenting Statement(s) If applicable
		Documenting Statement(s), If applicable
5101:2-13-14 Ratio and Supervision	Compliant	
for Field and Routine Trips		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Driver Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Vehicle Inspections	Compliant	, , , , , , , , , , , , , , , , , , ,
2 2 2 1 Vernole hispections	Joniphane	
Rule	Status	Documenting Statement(s) If applicable
5101:2-13-14 Vehicle Requirements		Documenting Statement(s), If applicable
- 5 IIII: /- I K- I/I VANICIA KACIIIRAMANTS	Compliant	
5101.2 15 14 Vehicle Requirements	•	
5101.2 15 14 Vehicle Requirements	·	
3101.2 13 14 Vennete Requirements	·	



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Health Conditions	Compliant	
	1.	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Child Records Retention	Compliant	
and Confidentiality		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Emergency Drills	Compliant	(4) A P P
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Incident/Injury	Compliant	
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Disaster Plan	Compliant	bocamenting statement(s), it applicable
310112 10 10 01000000 1 1011		
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	bocumenting statement(s), if applicable
3101.2-13-19 Supervision	Compilant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 School Age Supervision	Compliant	
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Pulo	Chatus	Documenting Statement/s\ If annihilable
Rule 5101:2-13-19 Child Guidance	Status	Documenting Statement(s), If applicable
	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-20 Sleep and Nap	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable

5101:2-13-20 Crib and Playpen Requirements	Compliant	
Rule 5101:2-13-21 Evening and Overnight Care	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-13-21 Sanitary Environment and Hygiene	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-13-22 Meals and Snacks	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-13-22 Fluid Milk	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-13-22 Food Handling	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-13-23 Infant Daily Care	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-13-23 Infant Bottle and Food Preparation	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-13-23 Diapering	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-13-24 Parent Permission for Swimming	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-13-25 Medication Requirements	Status Compliant	Documenting Statement(s), If applicable

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-07 Provider Responsibilities		Documenting Statement(s), if applicable
5101:2-13-07 Provider Responsibilities	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-18 Group Size and Ratios	Compliant	
Dula	Chahua	Decrine outing Chaters out/a) If a reliable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13 Written Policies and	Compliant	
Procedures		
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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	
		<u>'</u>
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-24 On-site Pools	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Pets	Compliant	bocumenting statement(s), it applicable
3101.2-13-12 (613	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-24 Swimming Sites	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-17 Materials and	Compliant	Bookinetiang statement(s), it applicable
Equipment	20	
-40.6		