

## 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 PRAYER, JANNIFER	Program Number 000000977005627	Program Type FCC - Type B Home
Address 8394 COTTONWOOD DR. APT#1		County HAMILTON
CINCINNATI OH 45231		

Inspection Information				
Inspection Type Compliance	Inspection Scope Full	Inspection Notice Announced		
Inspection Date 11/13/2025	Begin Time 10:20 AM	End Time 11:12 AM		
Reviewer: Jacob Downard				
Summary of Findings				
No. Rules Verified 68	No. Rules with Non-compliances 13	No. Serious Risk 0	No. Moderate Risk 1	No. Low Risk 15

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	0
Young Toddler		0	0	0	0
<b>Total Under 2 Years</b>	<b>3</b>	0	0	0	0
Older Toddler		0	0	0	0
Preschool		1	0	0	1
School Age		3	0	0	3
<b>Total Capacity/Enrollment</b>	<b>6</b>	4	0	0	4

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
11/13/2025		1 to 0	

### 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: 09 Children's Files**

Rule: 5180:2-13-25 Medication Requirements

Code: The program is required to store medication out of the reach of children.

Findings: During the inspection, it was determined medication was in the reach of children. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 12/14/2025

#### 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.

**Findings:** During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number 2 below on Kinder Connect. Children need tapped in and out in live time. There were no taps for the week of 11/10- although children were documented in and out in written attendance.

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: 12/14/2025

#### **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 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: tools accessible in kitchen drawers.

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

Corrective Action Plan Due: 12/14/2025

#### **Domain: 03 Postings & Equipment**

Rule: 5180:2-13-16 Medical, Dental, and General Emergency Plan

Code: The program is required to post the completed JFS 01242 "Medical, Dental, and General Emergency Plan for Child Care" and implement as required by rule.

Findings: During the inspection, it was determined the requirements for the JFS 01242 "Medical, Dental and General Emergency Plan" were not followed as noted in numbers 3-6 below:

1. The plan was not posted on each level of the home used for child care.
2. The name, address and telephone number of the program were not complete.
3. The location of the first aid kit, fire extinguisher and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.
4. The telephone number for emergency squad, fire department hospital, poison control program, public children services agency, local health department, local emergency management agency and police department were not complete.
5. Location of children's records was not complete.
6. Emergency information including any medications or supplies needed in the event of an evacuation was not complete.
7. The current version of the prescribed form was not used.
8. The plan was not implemented when necessary in that [ ].

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

Corrective Action Plan Due: 12/14/2025

#### **Domain: 03 Postings & Equipment**

Rule: 5180:2-13-16 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 completed and posted. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

**Corrective Action Plan Due:** 12/14/2025

#### **Domain: 05 Health & Safety**

**Rule:** 5180:2-13-16 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 8 and 16 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:** 12/14/2025

**Domain: 05 Health & Safety**

Rule: 5180:2-13-16 Emergency Preparedness and Response Plan

Code: The program is required to have a completed emergency preparedness and response plan.

**Findings:** During the inspection, it was determined the program's written emergency preparedness and response plan did not meet the requirement or was NOT onsite at the program. Form number is JFS 1251.

1. The written emergency and preparedness and response plan had not been completed
2. The plan was not provided to all child care staff and employees
3. Weather emergencies and natural disasters which include severe thunderstorms, tornadoes, flash flooding, major snowfall, blizzards, ice storms or earthquakes
4. Emergency outdoor and indoor lockdown or evacuation due to threats of violence which includes active shooter, bioterrorism or terrorism including a designated safe site where staff and children can safely remain when evacuated
5. Emergency or disaster evacuations due to hazardous materials and spills, gas leaks or bomb threats including a designated safe site where staff and children can safely remain when evacuated
6. Outbreaks, epidemics or other infectious disease emergencies
7. Loss of power, water, or heat
8. Other threatening situations that may pose a health or safety hazard to the children in the program

**Details:**

9. Shelter in place or evacuation, how the program will care for and account for the children until they can be reunited with the parent
10. Assisting infants, toddlers and children with special needs and/or health conditions
11. Emergency contact information for parents and the program
12. Procedures for notifying and communicating with parents regarding the location of the children if evacuated
13. Procedures for communicating with parents during loss of communications, no phone or internet service available
14. The location of supplies and procedures for gathering necessary supplies for staff and children if required to shelter in place
15. What to do if a disaster occurs during the transport of children or when on a field trip or routine trip
16. Making the plan available to all child care staff members and employees
17. Training of staff or reassignment of staff duties as appropriate
18. Updating the plan on a yearly basis
19. Contact with local emergency management officials
20. The plan was unable to be implemented in that, [ ].

Submit the program's corrective action plan, which includes the missing information, if applicable, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/14/2025

**Domain: 05 Health & Safety**

Rule: 5180:2-13-22 Fluid Milk

Code: The program is to ensure that children are served age-appropriate fluid milk.

**Findings:** During the inspection, it was determined that the program did not have the type of milk on-site to ensure that all children were served age-appropriate fluid milk requirements. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule. Vitamin A, D, OR 1% milk must be onsite.

Corrective Action Plan Due: 12/14/2025

#### **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 numbers 1, 4, 6, 7 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: 12/14/2025

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

Rule: 5180:2-13-14 Vehicle Inspections

Code: The program is required to complete and document weekly vehicle inspections.

**Findings:** During the inspection, it was determined that the program had not performed/documentated weekly inspections of vehicles used for transporting children. The weekly inspection needs to include the following:

1. A visual inspection of the tires for wear and tire pressure;
2. A visual inspection of headlights, taillights, signals, mirrors, wiper blades, and dash gauges;
3. An inspection for properly functioning child and driver restraints;
4. An inspection for properly functioning doors and windows;

5. An inspection for, and cleaning of, debris from the inside of the vehicle;
6. Other [ ].

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

Corrective Action Plan Due: 12/14/2025

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

Rule: 5180:2-13-07 Provider Responsibilities

Code: The provider is required to reside at the licensed location, not have additional activities or employment during the program's operating hours, be on-site at the program for at least 75 percent of the program's operating hours, and have hours of availability posted in a noticeable place.

Findings: During the inspection, it was determined that the provider was not meeting the following requirements as noted in number 2 below :

1. The provider no longer resides at the licensed location.
2. The licensed provider has additional activities/employment during operating hours, in that provider worked another job during the summer months during her operating hours.
3. The provider was not on-site for 75 percent of the program's operating hours as required by this rule.
4. The provider did not have hours of availability to meet with parents a noticeable location.

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

Corrective Action Plan Due: 12/14/2025

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

Rule: 5180:2-13-10 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 number 10 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: 12/14/2025

#### **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 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 below. Child needs JFS Medical Statement cover page

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: 12/14/2025

**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 numbers 3, 4, 6, 15 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: 12/14/2025

**Domain: 09 Children's Files**

Rule: 5180:2-13-25 Medication Requirements

Code: The program is required to discard or return medication, medical foods, and/or topical products that are no longer being administered or have expired. The program is also required to maintain current documentation to administer medication, medical foods, and topical products.

**Findings:** During the inspection, it was determined medication, medical foods and/or topical products did not meet the requirement(s) for administering medication, medical foods, and/or medical products as noted in number(s)[ ]below:

1. The medication, medical food, or topical product was no longer needed and had not been removed from the program.
2. The medication, medical food, or topical product had expired and had not been removed from the program.
3. The prescription label had expired.

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

Corrective Action Plan Due: 12/14/2025

#### **Domain: 10 Written Policies & Procedures**

Rule: 5180:2-13 Written Policies and Procedures

Code: The program's written policies and procedures are to be given to all parents and employees and be available at the program.

**Findings:** During the inspection, it was determined the CURRENT written policies and procedures were not given to parents/available at the program as required. A copy must be made available onsite for review. Submit the program's corrective action plan to verify compliance with this rule.

Corrective Action Plan Due: 12/14/2025

#### **Rules In-Compliance/Not Verified**

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Voluntary Temporary Closure	Compliant	
5180:2-13-02 License Visible	Compliant	
5180:2-13-02 Change of Location	Compliant	

<b>Rule</b> 5180:2-13-02 Information in OCLOS	<b>Status</b> Compliant	<b>Documenting Statement(s), If applicable</b>
<b>Rule</b> 5180:2-13-02 Provider Medical	<b>Status</b> Compliant	<b>Documenting Statement(s), If applicable</b>
<b>Rule</b> 5180:2-13-03 Inspection Requirements	<b>Status</b> Compliant	<b>Documenting Statement(s), If applicable</b>
<b>Rule</b> 5180:2-13-04 Building Requirements for Type B Homes	<b>Status</b> Compliant	<b>Documenting Statement(s), If applicable</b>
<b>Rule</b> 5180:2-13-04 Fire Safety for Type B Homes	<b>Status</b> Compliant	<b>Documenting Statement(s), If applicable</b>
<b>Rule</b> 5180:2-13-04 Flammable and Combustible Materials in a Type B Home	<b>Status</b> Compliant	<b>Documenting Statement(s), If applicable</b>
<b>Rule</b> 5180:2-13-04 Heaters in a Type B Home	<b>Status</b> Compliant	<b>Documenting Statement(s), If applicable</b>
<b>Rule</b> 5180:2-13-07 Staff Records	<b>Status</b> Compliant	<b>Documenting Statement(s), If applicable</b>
<b>Rule</b> 5180:2-13-07 Type B Provider - Foster Parent	<b>Status</b> Compliant	<b>Documenting Statement(s), If applicable</b>
<b>Rule</b> 5180:2-13-08 Employee Requirements	<b>Status</b> Compliant	<b>Documenting Statement(s), If applicable</b>

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 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 Carbon Monoxide Detectors - Type B Only	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Pets	Compliant	
5180:2-13-13 Clean environment and equipment	Compliant	
5180:2-13-13 Smoke Free	Compliant	
5180:2-13-13 Handwashing	Compliant	
5180:2-13-13 Toothbrushing	Compliant	
5180:2-13-14 Ratio and Supervision for Field and Routine Trips	Compliant	
5180:2-13-14 Driver Requirements	Compliant	
5180:2-13-14 Vehicle Requirements	Compliant	
5180:2-13-15 Health Conditions	Compliant	
5180:2-13-15 Child Records Retention and Confidentiality	Compliant	
5180:2-13-16 Emergency Drills	Compliant	

Rule 5180:2-13-16 Communicable Diseases	Status Compliant	Documenting Statement(s), If applicable
Rule 5180:2-13-16 Incident/Injury	Status Compliant	Documenting Statement(s), If applicable
Rule 5180:2-13-17 Programming	Status Compliant	Documenting Statement(s), If applicable
Rule 5180:2-13-17 Materials and Equipment	Status Compliant	Documenting Statement(s), If applicable
Rule 5180:2-13-18 Group Size and Ratios	Status Compliant	Documenting Statement(s), If applicable
Rule 5180:2-13-19 Supervision	Status Compliant	Documenting Statement(s), If applicable
Rule 5180:2-13-19 School Age Supervision	Status Compliant	Documenting Statement(s), If applicable
Rule 5180:2-13-21 Evening and Overnight Care	Status Compliant	Documenting Statement(s), If applicable
Rule 5180:2-13-20 Sleep and Nap Requirements	Status Compliant	Documenting Statement(s), If applicable
Rule 5180:2-13-19 Child Guidance	Status Compliant	Documenting Statement(s), If applicable

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-20 Crib and Playpen Requirements	Compliant	
5180:2-13-21 Sanitary Environment and Hygiene	Compliant	
5180:2-13-22 Meals and Snacks	Compliant	
5180:2-13-22 Food Handling	Compliant	
5180:2-13-23 Infant Daily Care	Compliant	
5180:2-13-23 Infant Bottle and Food Preparation	Compliant	
5180:2-13-23 Diapering	Compliant	
5180:2-13-24 On-site Pools	Compliant	
5180:2-13-24 Swimming Sites	Compliant	
5180:2-13-24 Parent Permission for Swimming	Compliant	



Department of  
Children & Youth