

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
KIRKLAND, ANGELA	00000978126614	FCC - Type B Home
Address		County
1221 FRANKLIN		HAMILTON
CINCINNATI		
OH 45237		

	Insp	ection Information			
Inspection Type	Inspection So	Inspection Scope			
Compliance	nce Full Unannounced				
Inspection Date	Begin Time	Begin Time			
06/18/2025	11:29 AM	11:29 AM		1:02 PM	
Reviewer:					
Lisa Johnson-Garr	ett				
Summary of Findings					
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk	
68	6	0	1,	6	

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

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
6/18/25		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: 08 Staff Files

Rule: 5180:2-13-09 Background Checks

Code: The program is required to receive a preliminary approval from ODJFS prior to allowing an individual to

engage in assigned duties or be near children.

Findings: In review of the staff records, it was determined that background checks did not meet the requirements of the rule for the person(s) listed on the Employee Record Chart as noted in number(s) 1 below:

- 1. The request for a background check for child care was not submitted in the OPR.
- 2. The fingerprints were not submitted electronically according to the process established by BCI.
- 3. The individual(s) had engaged in assigned duties or were near children and preliminary approval from ODJFS was not on file.
- 4. Background checks were not updated every five years.

Submit the program's corrective action plan, which includes a copy of the JFS 01176, or a copy of the preliminary approval or a statement that the individual(s) are no longer engaged in assigned duties and are not near children until the preliminary approval has been received, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/23/2025



Low Risk Non-Compliances

Domain: 04 Indoor/Outdoor Space

Rule: 5180:2-13-11 Outdoor Space

Code: The program staff is required to protect the children from hazardous conditions in the outdoor play area.

Findings: During the inspection, it was determined that the following hazardous conditions existed in the outdoor play area, as noted in number(s) 2, 4, 15 below:

- 1. There was broken glass.
- 2. There were tall weeds.
- 3. There was poison ivy.
- 4. There were tree branches.
- 5. There was mold visible.
- 6. The sandbox was contaminated.
- 7. There were thistles with prickers.
- 8. There were bird droppings.
- 9. The outdoor area was littered with trash.
- 10. The trash can was missing a lid.
- 11. The trash was not emptied from the day(s) before.
- 12. The trash can was overflowing with trash.
- 13. The trash can was infested with insects.
- 14. The trash can was visibly dirty.
- 15. Other the path on the route was obstructed with items.

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

Corrective Action Plan Due: 07/23/2025

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 missing the information in number(s) 10 below:

Procedures:

- 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: 07/23/2025

Domain: 05 Health & Safety

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

Code: The program is required to train child care staff members and employees on the written emergency preparedness and response plan annually and keep written documentation of the training on-site.

Findings: During the inspection, it was determined the program's written emergency and preparedness and response plan did not meet the requirement for training child care staff members and employees on the plan annually as noted in number(s) [] below:

- 1. Child care staff members and employees were not trained annually.
- 2. Written documentation of the training was not kept on file.

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



Corrective Action Plan Due: 07/23/2025

Domain: 08 Staff Files

Rule: 5180:2-13-07 Staff Records

Code: The provider is required to maintain current employee, child care staff members and resident records in

the Ohio Professional Registry.

Findings: During the inspection, it was determined that employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 9 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.

11.0ther: []

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

Corrective Action Plan Due: 07/23/2025

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(s) 10,14 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: 07/23/2025

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 written policies and procedures were not 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: 07/23/2025



Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Voluntary Temporary	Compliant	bocumenting statement(s), if applicable
	Compliant	
Closure		
		<u>l</u>
Rule	Chatus	Decumenting Statement(s) If applicable
	Status	Documenting Statement(s), If applicable
5180:2-13-02 License Visible	Compliant	
D.I.		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Change of Location	Compliant	
	200/20 Hrs.	
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	Compliant	
Requirements		
And the state of t		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Building Requirements	Compliant	-
for Type B Homes		
i.e. Type 2 themes		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Fire Safety for Type B	Compliant	177
Homes		
	•	•
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Flammable and	Compliant	
Combustible Materials in a Type B	Compilant	
The state of the s		
Home		
	-01 (6)	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Heaters in a Type B	Compliant	
Home		
	1	



~		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-07 Provider Responsibilities	Compliant	
D. L.	5: :	D () If I
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	
310012 13 00 Employee Requirements	Compilant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Child Care Staff	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Whistle Blower		boddinenting statement(s), it applicable
5180:2-13-08 Whistie Blower	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-10 Professional	Compliant	
Development		
Bevelopment		
		!
Rule	Status	Documenting Statement(s), If applicable
3/4//-3/2004/		Documenting Statement(s), if applicable
5180:2-13-11 Indoor Space	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Outdoor Equipment	Compliant	
	emonitor of Protestation .	
	I	
	S	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Fall Zone	Compliant	
	**	
	•,	
Rule	Status	Documenting Statement(s), If applicable
		bocumenting 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	
3100.2-13-12 Sale Flivil Ollinelit	Compilant	



w.		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Carbon Monoxide	Compliant	
Detectors - Type B Only	54	
, Annual Control of the Control of t		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Clean environment and	Compliant	
equipment	1	
- Squipmont		
-		•
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Smoke Free	Compliant	Decamentally statement (e), in approach
3100.2 13 13 31110KC 11CC	Compliant	
L	1	1
Rule	Status	Documenting Statement(s), If applicable
310 G10 G0	poses 1991	Documenting statement(s), if applicable
5180:2-13-15 Child Medical and	Compliant	
Enrollment Records		
- 1		
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 Requirements for Field	Compliant	
and Routine Trips		
- CT-1		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Ratio and Supervision	Compliant	
for Field and Routine Trips		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Driver Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Vehicle Inspections	Compliant	O
223012 13 1 Vernole hispections	Somphant	



Rule	Status	Decumenting Statement/s) If applicable
	Status	Documenting Statement(s), If applicable
5180:2-13-14 Vehicle Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-15 Health Conditions	Compliant	(-),
J100.2 13 13 Health Collabora	Compilant	
	ļ	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-15 Child Records Retention	Compliant	
and Confidentiality	SSR/SSSSSSM (3.4 PVV WebsiteApports)	
and confidentiality		
	I.	
D. I.	Chahara	D
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Medical, Dental, and	Compliant	
General Emergency Plan		
Rule	Status	Documenting Statement(s), If applicable
	20	bocamenting statement(s), it applicable
5180:2-13-16 Emergency Drills	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 First Aid Kit/Standard	Compliant	
Precautions	Compilant	
Frecautions		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Communicable Diseases	Compliant	
-	P	
Dule	Chahua	Decumenting Statement (-) If li li-
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Incident/Injury	Compliant	
		
Rule	Status	Documenting Statement(s), If applicable
		booking statement(s), it applicable
5180:2-13-17 Programming	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-17 Materials and	Compliant	
Sportial and Control and Control and Care Annual Annual Annual Control	Compilant	
Equipment		
L	<u> </u>	
Rule	Status	Documenting Statement(s), If applicable



5180:2-13-18 Group Size and Ratios	Compliant	
·		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-18 Attendance	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	Compliant	
Care		
Rule	Status	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	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-20 Crib and Playpen	Compliant	
Requirements		
	I	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-21 Sanitary Environment	Compliant	
and Hygiene		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-22 Meals and Snacks	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-22 Food Handling	Compliant	(-),(-),



D. I.		
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	
	**	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Infant Bottle and Food	Compliant	
Preparation		
раз взя		
		<u> </u>
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Diapering	Compliant	C STORY OF THE PROPERTY OF THE
2 2 2 2 2 2 2 2 3 3 5 5 1 1 B	- Compilation	
	*	<u>,</u>
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 Swimming Sites	Compliant	
		<u> </u>
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 Parent Permission for	Compliant	
Swimming	Compilant	
Own milling		
	1	ļ.
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-25 Medication	Compliant	bocumenting statement(s), if applicable
Requirements	Compliant	
	1	I I