

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	
BARNHILL, DESHAWNA M	00000992997398	FCC - Type B Home	
Address		County	
19 BIRCKHEAD PLACE		LUCAS	
TOLEDO			
OH 43608			

	Inspection Information				
Inspection Type	Inspection So	соре	Inspection Notice		
Compliance	Full		Unannounced		
Inspection Date	Begin Time		End Time		
11/16/2021	9:16 AM		12:49 PM		
Reviewer:					
Laura Fitzenrider					
Summary of Findings					
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk	
68	11	0	0	12	

License Capacity and Enrollment at the Time of Inspection				
Age Group	License Capacity	Enrollment		
	Totals	Full Time	Part Time	Total
Infant (Birth to < 18 m)		1	0	1
Young Toddler		3	0	3
Total Under 2 Years	3	4	0	4
Older Toddler		0	0	0
Preschool		2	2	4
School Age		12	2	14
Total Capacity/Enrollment	6	14	4	22

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Deshawna Barnhill	Mixed Age Group	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.

Serious Risk Non-Compliances

No Serious Risk Non-Compliances were observed during this inspection

Moderate Risk Non-Compliances

No Moderate Risk Non-Compliances were observed during this inspection

Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5101:2-13-02 Information in OCLQS

Code: The provider is required to keep their information current in OCLQS.

Findings: During the inspection, it was determined the information in number 2 below was not up to date in the Ohio Child Care Licensing and Quality System:



Department of Education Department of Job and Family Services

- 1. Mailing Address;
- 2. Telephone Number;
- 3. Email Address;
- 4. Days and Hours of Operation;
- 5. Services Offered;
- 6. Name of Program, If applicable.
- 7. Private pay rates.

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

Corrective Action Plan Due: 12/16/2021

Domain: 00 License & Approvals

Rule: 5101:2-13-03 Inspection Requirements Code: The program is required to respond to all non-compliances by the date noted in the inspection report.

Findings: During the inspection, it was determined the program had not responded to the non-compliances addressed in the inspection report dated 06/08/2021. The rule requires the program complete and submit a corrective action plan in OCLQS to address non-compliances detailed in written inspection reports within the timeframe outlined in the report. Submit the program's corrective action plan, which includes a statement that current and future corrective action plans will be submitted timely, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/16/2021

Domain: 01 Ratio & Supervision

Rule: 5101:2-13-18 Attendance

Code: The program is required to have attendance records with the required information.

Findings: During the inspection, it was determined that the attendance records did not include the required information listed in number 4 below:

- 1. The name of the child;
- 2. The birth date of the child;
- 3. The assigned group for the child;
- 4. The child's weekly schedule;

5. The time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.

The missing information must be added to the form used to maintain attendance records. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/16/2021



Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to have running water below the temperature of 120 degrees Fahrenheit.

Findings: During the inspection, it was determined the water temperature was 136 degrees in the kitchen. This temperature exceeds the requirement of remaining below 120 degrees Fahrenheit. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 12/16/2021

Domain: 05 Health & Safety

Rule: 5101:2-13-16 Emergency Drills

Code: The program is required to complete and document the required drills.

Findings: During the inspection, it was determined that the required drills were not completed for item numbers 1, 2, and 3 below:

- 1. Monthly fire drills were missing length of drill
- 2. Monthly weather emergency drills (March through September)
- 3. Emergency/lockdown drills in each quarter of the calendar year no 3rd quarter

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

Corrective Action Plan Due: 12/16/2021

Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-23 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: 12/16/2021

Domain: 08 Staff Files



Rule: 5101:2-13-10 Professional Development

Code: The program staff is required to complete at least six clock hours of training annually.

Findings: In review of records, it was determined the Child Care Staff Member indicated on the Employee Record Chart did not meet the annual professional development requirement as noted in number 1.

1. The child care staff member had not completed at least six hours of professional development.

2. Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.

3. Training topic did not meet the requirements listed in appendix A of this rule.

4. Documentation of training did not meet the requirements of this rule.

5. The substitute(s) had been used more than ninety days annually between July first and June thirtieth and had not completed at least six hours of professional development.

6. Other [].

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

Corrective Action Plan Due: 12/16/2021

Domain: 08 Staff Files

Rule: 5101:2-13-07 Provider Responsibilities

Code: The provider is required to maintain the required liability insurance or have a completed JFS 01933 "Liability Insurance Statement for Family Child Care Providers" on file for each child in care.

Findings: During the inspection, it was determined the provider did not have a completed JFS 01933 "Liability Insurance Statement for Family Child Care Providers" completed for each child in care. Correct the violation and submit proof of insurance with the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 12/16/2021

Domain: 08 Staff Files

Rule: 5101:2-13-07 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 numbers 2 and 11 below:

1. The provider had not created or updated their individual profile in the OPR.

2. The provider had not updated the program's organizational dashboard in the OPR with the current phone number within 5 business days.

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. The provider did not create a schedule and group name in the program dashboard.

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

Corrective Action Plan Due: 12/16/2021

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 trainings listed in numbers 10 and 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



Department of Education Department of Job and Family Services

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: 12/16/2021

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 numbers 1, 3, 6, 8, 9, 10, 11, 12, 14, and 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: 12/16/2021

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 numbers 1, 2, 4, 5, 7, 8, 9, and 10 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: 12/16/2021

Rules In-Compliance/Not Verified

Status	Documenting Statement(s), If applicable
Compliant	
Status	Documenting Statement(s), If applicable
Compliant	
	Compliant



Rule	Status	Documenting Statement(c) If applicable
5101:2-13-02 Change of Location	Compliant	Documenting Statement(s), If applicable
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Provider Medical	Compliant	
	compliant	
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Rule	Status	Documenting Statement(s), If applicable
Building Requirements for Type B	Compliant	
Homes		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Fire Safety for Type B	Compliant	
Homes		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Flammable and	Compliant	
Combustible Materials in a Type B		
Home		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Heaters in a Type B	Compliant	
Home	compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-05 Denial, Revocation, and	Compliant	
Suspension		
•		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-07 Type B Provider - Foster	Compliant	
Parent		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Employee Requirements	Compliant	
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	Chabua	
5101:2-13-11 Outdoor Space	Status Compliant	Documenting Statement(s), If applicable
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	
Rule 5101:2-13-12 Safe Equipment	Status Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Clean environment and equipment	Compliant	
- Dula	Chabus	
Rule 5101:2-13-13 Handwashing	Status Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Smoke Free	Compliant	Documenting Statement(s), it applicable
Rule 5101:2-13-13 Toothbrushing	Status Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Requirements for Field	Compliant	boothering statement(s), it applicable
and Routine Trips		



Rule	Status	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	
STOTIE IS IT BIVE Requirements	compliant	
Dul-	Chabura	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Vehicle Inspections	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Vehicle Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Health Conditions	Compliant	
Dula	Chatria	
Rule 5101:2-13-15 Child Records Retention	Status	Documenting Statement(s), If applicable
and Confidentiality	Compliant	
Dula	Chatura	Desumenting Statement(s) If employed
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Medical, Dental, and	Compliant	
General Emergency Plan		
Dul	Chatura	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 First Aid Kit/Standard	Compliant	
Precautions		
		Documenting Statement(s), If applicable
Rule	Status	
Rule 5101:2-13-16 Communicable Diseases	Status Compliant	
5101:2-13-16 Communicable Diseases	Compliant	
5101:2-13-16 Communicable Diseases Rule	Compliant Status	Documenting Statement(s), If applicable
5101:2-13-16 Communicable Diseases	Compliant	



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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Infant Daily Care	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Diapering	Compliant	
Rule	Status	Desumenting (tatement(c) If employed
	Status	Documenting Statement(s), If applicable
5101:2-13-24 Parent Permission for Swimming	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-25 Medication	Compliant	Documenting statement(s), if applicable
Requirements	Compliant	
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5101:2-13-18 Group Size and Ratios	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13 Written Policies and Procedures	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Carbon Monoxide		Documenting statement(s), if applicable
Detectors - Type B Only	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Indoor Space	Compliant	bootanenting statement(s), it applicable
	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-17 Programming	Compliant	bocamenting statement(s), if applicable
5101.2-15-17 Programming	Compliant	
Rule	Status	Documenting Statement(a) If any list is
5101:2-13-24 On-site Pools	Status Compliant	Documenting Statement(s), If applicable
5101.2-15-24 OII-SILE POOIS	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Pets	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	
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