

# 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 <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. 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
DAVIS, NOEL	00000996245634	FCC - Type B Home
Address		County
1132 Dueber Ave SW		STARK
Canton		
OH 44706		

Inspection Information				
Inspection Type	Inspection So	соре	Inspection Notice	
Compliance	Full		Announced	
Inspection Date	Begin Time		End Time	
01/09/2024	2:00 PM		3:37 PM	
Reviewer:				
Raquel Borsellino				
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
68	8	0	1	7

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
Noel Davis	Mixed Age Group	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: 04 Indoor/Outdoor Space

Rule: 5101:2-13-12 Safe Equipment

Code: The program is required to have appropriate fall surface for indoor equipment.

Findings: The rule requires that indoor swings, slides, climbers, and climbing apparatus shall not be placed over concrete, tile, carpet, or any similarly hard surface and that indoor climbing equipment more than three feet high have landing mats at least one and one-half inches thick. During the inspection, it was determined that this requirement was not met, in that the mat was not at least one and one-half inches thick. Submit the program's corrective action plan to verify compliance with this rule.

Corrective Action Plan Due: 02/08/2024

#### Low Risk Non-Compliances

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(s) 4 & 5 below, were in the downstairs restroom used for childcare:

- 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: 02/08/2024

# Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-13 Smoke Free

Code: The program is required to provide a smoke free environment during operating hours, ensure smoking is not seen by children, post a "No Smoking Sign" by the main entrance, provide notification to parents if smoking occurs on the premises outside of operating hours, and refrain from exposing children to smoking paraphernalia.

Findings: During the inspection, it was determined that the program was not maintaining a smoke free environment, as noted in the number 3 below:

1. The program did not provide a smoke free environment for children during the hours of child care in that [].

2. An individual left the home to smoke, however, this smoking occurred in an area within view of the children.

3. A "No Smoking" sign was not displayed in a conspicuous place at the main entrance.

4. Smoking had occurred in the program or vehicle during hours the program was not in operation; however, parents had not been given written notice of this.

5. Children had access and/or were exposed to smoking paraphernalia in that [cigarettes/cigars/pipe butts/ashes/chewing or smokeless tobacco/electronic cigarettes/vaporizers] was/were observed in view of children.

6. Other [ ].

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

Corrective Action Plan Due: 02/08/2024



# Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to store cleaning and sanitizing supplies in a place that is inaccessible to children. Cleaning agents, aerosol cans and chemical substances must be stored in their original container or clearly labeled. School-age children may use cleaning supplies and equipment with adult supervision.

Findings: During the inspection, cleaning and sanitzing equipment and supplies were not used or stored properly as noted in number 11 below:

- 1. Cosmetics were accessible to children in the [] area.
- 2. Disinfecting wipes were accessible to children in the [] area.
- 3. Fish food was accessible to children in the [] area.
- 4. Hand lotion was accessible to children in the [ ] area.
- 5. Hand sanitizer (for children under 24 months) was accessible to children in the [] area.
- 6. Laundry detergent was accessible to children in the [] area.
- 7. Powder dish washing soap was accessible to children in the [] area.
- 8. Paint cans were accessible to children in the [] area.
- 9. White out was accessible to children in the [] area.
- 10. Potting Soil was accessible to children in the [] area.

11. Other potentially hazardous substance Febreze & Johnsons body oil was accessible to children in the bathroom area.

- 12. Cleaning/sanitizing supplies had not been clearly labeled.
- 13. School-age children were using cleaning supplies, agents and/or equipment without adult supervision.
- 14. A spray aerosol was used in the [ ] group while children were in attendance.
- 15. Other: [ ].

Provide staff training. Submit the program's corrective action plan, which includes a statement that the potentially hazardous substance is no longer accessible to children and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/08/2024

#### Domain: 03 Postings & Equipment

Rule: 5101:2-13-17 Programming

Code: The program is required to have a daily schedule posted in a visible place.

Findings: During the inspection, it was determined the daily schedule was not posted in the program. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 02/08/2024



#### Domain: 05 Health & Safety

Rule: 5101:2-13-22 Meals and Snacks

Code: The program is required to post the current menu in a noticeable location that is accessible to parents and note any substitutions at the time of the change.

Findings: During the inspection, it was determined that the program's weekly menu did not meet the requirement as noted in number 1 below.

- 1. The menu was not posted.
- 2. The posted menu was not in a visible place readily accessible to parents.
- 3. The menu was not currently dated.
- 4. The entire menu was substituted.
- 5. At least one item on menu did not match what was served.
- 6. The meal or snack served did not match the posted menu.

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

Corrective Action Plan Due: 02/08/2024

#### 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 number(s) 2, 6, & 17 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

17. Child Abuse - did not have verification of the completion of Child Abuse training

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: 02/08/2024

# 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 number 1 below:

1. The provider had not created or updated their individual profile in the OPR. (list yourself as the Administrator & add your schedule)

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: 02/08/2024



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

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 License Visible	Compliant	
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 Information in OCLQS	Compliant	
5101.2 15 02 momution in 0 0205	compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Provider Medical	Compliant	
	compliant	
Rule	Status	Decumenting Statement/s) If applicable
		Documenting Statement(s), If applicable
5101:2-13-03 Inspection	Compliant	
Requirements		
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 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		
	1	
Rule	Status	Documenting Statement(s), If applicable
Nule	Status	Documenting statement(s), if applicable



5101:2-13-04 Heaters in a Type B	Compliant	
Home		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 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	
Dulo	Status	Decumenting Statement(a) If any limit is
Rule 5101:2-13-09 Background Checks	Status Compliant	Documenting Statement(s), If applicable
5101.2-15-09 Background Checks	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-10 Professional	Compliant	
Development		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Outdoor Space	Compliant	
Dula	Chatura	Decumenting (testament/s) If emplicable
Rule 5101:2-13-11 Outdoor Equipment	Status Compliant	Documenting Statement(s), If applicable
	compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Fall Zone	Compliant	
	1	1
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Handwashing	Compliant	
Dula	Chature	
Rule	Status Compliant	Documenting Statement(s), If applicable
5101:2-13-13 Toothbrushing	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Requirements for Field	Compliant	
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	
	•	·
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Vehicle Inspections	Compliant	
	compilant	
Rule	Status	Documenting Statement(s), If applicable
		Documenting statement(s), if applicable
5101:2-13-14 Vehicle Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Child Medical and	Compliant	
Enrollment Records		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Health Conditions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Child Records Retention	Compliant	
and Confidentiality		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Medical, Dental, and	Compliant	
General Emergency Plan		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Emergency Drills	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 First Aid Kit/Standard	Compliant	
Precautions		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Communicable Diseases	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Incident/Injury	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Disaster Plan	Compliant	Documenting statement(s), it applicable
	Compliant	
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	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 School Age Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 Child Guidance	Compliant	
	compilant	
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	Compliant	
Requirements		



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



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-18 Group Size and Ratios	Compliant	
	compliant	
	•	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13 Written Policies and	Compliant	
Procedures		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Carbon Monoxide	Compliant	
Detectors - Type B Only		
Dula	Chatura	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Indoor Space	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-24 On-site Pools	Compliant	bocumenting statement(s), it applicable
5101.2 15 24 011 310 1 0013	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	
Equipment		
	1	