



## 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<br>EAST, WANZA                                  | Program Number<br>000000999533610 | Program Type<br>FCC - Type B Home |
| Address<br>4217 EASTWAY ROAD<br><br>SOUTH EUCLID<br>OH 44121 | County<br>CUYAHOGA                |                                   |

| Inspection Information        |                                     |                          |                        |                                  |
|-------------------------------|-------------------------------------|--------------------------|------------------------|----------------------------------|
| Inspection Type<br>Compliance |                                     | Inspection Scope<br>Full |                        | Inspection Notice<br>Unannounced |
| Inspection Date<br>05/31/2024 |                                     | Begin Time<br>1:30 PM    |                        | End Time<br>3:45 PM              |
| Reviewer:<br>Peggy Henderson  |                                     |                          |                        |                                  |
| Summary of Findings           |                                     |                          |                        |                                  |
| No. Rules Verified<br>68      | No. Rules with Non-compliances<br>9 | No. Serious Risk<br>0    | No. Moderate Risk<br>1 | No. Low Risk<br>9                |

| 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     |
| <b>Total Under 2 Years</b>                                |                  | 0          | 0         | 0     |
| Older Toddler                                             |                  | 0          | 0         | 0     |
| Preschool                                                 |                  | 0          | 0         | 0     |
| School Age                                                |                  | 0          | 3         | 3     |
| <b>Total Capacity/Enrollment</b>                          | 5                | 0          | 3         | 3     |

| Staff-Child Ratios at the Time of Inspection |                 |                |         |
|----------------------------------------------|-----------------|----------------|---------|
| Group                                        | Age Group/Range | Ratio Observed | Comment |
| wanza east                                   | Mixed Age Group | 1 to 2         |         |



### 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: 5101:2-13-09 Background Checks

Code: Individuals associated to the program are required to request background checks.

Findings: In review of the staff records, it was determined that a resident of the home turned 18 years of age moved into the home and background checks were not requested within 10 business days. Submit the program's corrective action plan, which includes a copy of the resident's JFS 01176, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/03/2024

#### Low Risk Non-Compliances

##### 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 12/22/23. 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: 11/03/2024

#### **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 [completed/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: 07/03/2024

#### **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 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 number(s) 7 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: 07/03/2024

**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 number(s) 1,2,3 below:

1. Monthly fire drills
2. Monthly weather emergency drills (March through September)
3. Emergency/lockdown drills in each quarter of the calendar year

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

Corrective Action Plan Due: 07/03/2024

**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(s) 1,4,7,8,11,13 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: 07/03/2024

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

Rule: 5101:2-13-16 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) 18 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: 07/03/2024

#### 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(s) 2 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. Other: []

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

Corrective Action Plan Due: 11/03/2024





**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) 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: 07/03/2024

**Domain: 10 Written Policies & Procedures**

Rule: 5101:2-13 Written Policies and Procedures

Code: The provider is required to create, maintain, and implement the policies and procedures outlined in appendix C and D of this rule.

Findings: It was determined, the provider was not responsible for creating, maintaining or implementing the policies and procedures detailed in appendix C and D of 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: 07/03/2024

### 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 Closure            | Compliant |                                         |
| Rule                                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-02 Change of Location                     | Compliant |                                         |
| 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 |                                         |
| Rule                                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-04 Building Requirements for Type B Homes | Compliant |                                         |
| Rule                                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-04 Fire Safety for Type B Homes           | Compliant |                                         |
| 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 Home                             | Compliant |                                         |
| Rule                                                              | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-07 Type B Provider - Foster Parent                      | Compliant |                                         |
| 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 Whistle Blower                                       | Compliant |                                         |
| Rule                                                              | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-10 Professional Development                             | Compliant |                                         |
| Rule                                                              | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-11 Outdoor Space                                        | Compliant |                                         |
| 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                                                              | 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 |                                         |
| Rule                                                           | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-13 Clean environment and equipment                   | Compliant |                                         |
| Rule                                                           | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-13 Handwashing                                       | Compliant |                                         |
| 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 |                                         |
| Rule                                                           | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-14 Requirements for Field and Routine Trips          | Compliant |                                         |
| Rule                                                           | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-14 Ratio and Supervision for Field and Routine Trips | Compliant |                                         |
| 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 |                                         |
| 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 Child Medical and Enrollment Records        | Compliant |                                         |
| 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 and Confidentiality | Compliant |                                         |
| 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 |
| 5101:2-13-18 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 |                                         |
| Rule                                                     | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-20 Sleep and Nap Requirements                  | Compliant |                                         |
| Rule                                                     | Status    | Documenting Statement(s), If applicable |





|                                                 |           |                                         |
|-------------------------------------------------|-----------|-----------------------------------------|
| 5101:2-13-20 Crib and Playpen Requirements      | Compliant |                                         |
| Rule                                            | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-21 Evening and Overnight Care         | Compliant |                                         |
| Rule                                            | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-21 Sanitary Environment and Hygiene   | Compliant |                                         |
| Rule                                            | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-22 Meals and Snacks                   | Compliant |                                         |
| Rule                                            | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-22 Fluid Milk                         | Compliant |                                         |
| Rule                                            | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-22 Food Handling                      | Compliant |                                         |
| 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 Infant Bottle and Food Preparation | Compliant |                                         |
| Rule                                            | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-23 Diapering                          | Compliant |                                         |
| Rule                                            | 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 Requirements                 | Compliant |                                         |
| Rule                                                 | Status    | 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 |                                         |
| Rule                                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-12 Carbon Monoxide Detectors - Type B Only | Compliant |                                         |
| Rule                                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-08 Child Care Staff Requirements           | Compliant |                                         |
| 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 |                                         |
| 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 |                                         |
| 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 Equipment | Compliant |  |
|--------------------------------------|-----------|--|