

Center 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 Deta	ils	
Program Name	Program Number		Program Type
ST.MARTIN DE PORRES FAMILY CENTER	2170014308		Child Care Center
Address			County
1264 EAST 123RD STREET Cleveland			CUYAHOGA
ОН			
44108			
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
06/09/2017	E	75	0
Fire Inspection Approval Date	Food Service Risk Level		
04/18/2024	Level IV		

	Inspection Information				
Inspection Type	Inspection S	cope	Inspection Notice		
Annual	Full		Unannounced		
Inspection Date	nspection Date Begin Time End Time				
03/04/2025	2:00 PM	2:00 PM		4:02 PM	
Reviewer:					
REBECCA KOTEWICZ					
Commence of Findings					
Summary of Findings					
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk	
58	3	0	0	3	

License Capacity and Enrollment at the Time of Inspection				
Age Group	License Capacity	city Enrollment		
	Totals	Full Time	Part Time	Total
Infant (Birth to < 18 m)		0	0	0
Young Toddler		0	0	0
Total Under 2 ½ Years	0	0	0	0
Older Toddler		0	0	0
Preschool		0	0	0
School Age		0	27	27
Total Capacity/Enrollment	75	0	27	27

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



SA	School-Age to < 11 years	2 to 6	arrival
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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
No serious kisk Non-compliances were observed during this hispection
Manufacture Distriction Committee
Moderate Risk Non-Compliances
No Moderate Risk Non-Compliances were observed during this inspection
Low Risk Non-Compliances
Domain: 02 Safe & Sanitary Environment



Rule: 5180:2-12-12 Safe Environment

<u>Code</u>: 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.

<u>Finding</u>: During the inspection, it was determined that children were not protected from item(s) or condition(s) which may threaten their health, safety, or well-being as noted in number(s) 6 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. Employee(s) purse(s).
- 7. Diaper bags.
- 8. Television not securely anchored.
- 9. Small or lightweight pieces of shelving units are not securely anchored to the wall.
- 10. Smoke detector needing batteries replaced.
- 11. An area rug did not have a nonskid backing.
- 12. An area rug presented a tripping hazard.
- 13. A floor surface that was unsafe in that [].
- 14. No platform was provided for the sink or toilet in the [] classroom.
- 15. The platform provided for the sink or toilet in the [] classroom was not sturdy.
- 16. The platform provided for the sink or toilet in the [] classroom posed a safety hazard in that [].
- 17. Telephone cords.
- 18. Staff member stepped over a barrier/gate while holding a child.
- 19. Emergency exits were blocked by the following classroom furniture: [].
- 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 [].

Provide staff training. Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/03/2025

Domain: 08 Staff Files

Rule: 5180:2-12-08 Medical Statement

<u>Code</u>: The program staff's medical statements are required to be completed and on file at the program.

<u>Finding</u>: In review of the staff records, it was determined that the medical statements for the employees listed on the Employee Record Chart did not meet the requirements as listed in number(s) 1 below.



- 1. A medical statement was not on file for at least one employee;
- 2. The medical statement(s) on file did not have a date of examination within 12 months of the employee's first day of employment;
- 3. Date of examination was missing;
- 4. Signature, business address, or telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination was missing;
- 5. A statement was missing that verifies the employee is:
- a. Physically fit for employment in a program caring for children;
- b. Immunized against Tetanus, Diphtheria, Pertussis (Tdap);
- c. Immunized against Measles, Mumps, and Rubella (MMR);
- 6. Tuberculosis (TB) screening/test information was missing:
- a. Documentation of the screening process to determine if the employee resided in a country identified by the world health organization as having a high burden of TB and arrived in the United States within the five years preceding the date of application for employment.
- b. Results of a TB test for employees meeting both criteria in 6a.
- c. Results of additional testing for employees with a positive TB test.
- d. Written statement, signed by a representative of the TB control unit, that the employee's TB is no longer infectious or the individual is receiving a TB treatment regimen for employees with a positive TB test.

Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, or TB results/documentation, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/15/2025

Domain: 08 Staff Files

Rule: 5180:2-12-09 Background Check Requirements

<u>Code</u>: The program is required to maintain a current JFS 01176 "Program Notification of Background Check Review for Child Care" on file for each staff.

<u>Finding</u>: In review of the staff records, it was determined that background check requirements had not been followed, for the individual(s) listed on the Employee Record Chart, as noted in number(s) 1 below:

- 1. The JFS 01177 "Individual Notification of Background Check Review for Child Care" was on file instead of the JFS 01176.
- 2. The JFS 01176 on file was for a different program.

Submit the program's corrective action plan, which includes a statement that the correct form is now on file, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/03/2025



Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-16 Written Disaster	Compliant	Documenting Statement: Annual training
Plan		of the written disaster plan was
		completed by staff.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-02 License Posted	Compliant	Documenting Statement(s), if applicable
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-04 Building	Compliant	Documenting Statement: A copy of the
Department Inspection		certificate of occupancy was available on-
		site for review.
Dula	Status	Decumenting Statements of applicable
Rule 5180:2-12-02 Current Information	Compliant	Documenting Statement(s), If applicable
5100.2 12 02 current information	Соттриате	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-03 Inspection	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-04 Fire Inspection	Compliant	Documenting Statement: Please Note:
		Documentation of a fire inspection
		without any uncorrected violations must
		be secured for the program. Secure a
		new fire inspection by 4/18/25.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-04 Food Service	Compliant	Documenting Statement: The off-site
Requirements	Compliant	food processing establishment's current
Requirements		Ohio Department of Agriculture



		registration information was observed during the inspection.
Rule 5180:2-12-07 Administrator	Status Compliant	Documenting Statement(s), If applicable
Qualifications	3	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-07 Administrator Responsibilities/Requirements	Compliant	bocumenting statement(s), ii applicable
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-07 Written Program Policies and Procedures	Compliant	Joseph Market Ma
	S	() () () () ()
Rule 5180:2-12-08 Child Care Staff Member Educational Requirements	Status Compliant	Documenting Statement(s), If applicable
Rule 5180:2-12-08 Orientation Training & Whistle Blower Protection	Status Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-10 Health Training Requirements	Compliant	Documenting Statement: The program had at least one Child Care Staff Member with currently valid training in First Aid, Management of Communicable Disease, CPR, and Child Abuse Prevention present and readily accessible during all hours of operation.
Rule: 5180:2-12-10 Professional Development Requirements	Compliant	Documenting Statement(s), If applicable Documenting Statement: At the time of the inspection, all child care staff members had completed the required amount of professional development training.
Dula	Chahua	Description Chapter of the Line 1:
Rule 5180:2-12-11 Indoor Space Requirements	Status Compliant	Documenting Statement(s), If applicable
Rule 5180:2-12-11 Outdoor Space Requirements	Status Compliant	Documenting Statement(s), If applicable



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Rule	Status	Documenting Statement(s), If applicable
5180:2-12-12 Safe Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-13 Sanitary Equipment and	Compliant	
Environment		
-		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-13 Handwashing		Bocamenting Statement(s), it applicable
Fig. and Cold Section (Cold Cold Cold Cold Cold Cold Cold Cold	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-13 Smoke Free	Compliant	
Environment		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-14 Transportation and	Compliant	Documenting Statement: The form(s)
Field Trip Procedures		used by the program for routine and/or
rieid Trip Procedures		
		field trips were verified to meet the
		requirements of the rule.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-15 Child Medical and	Compliant	Documenting Statement: At the time of
Enrollment Records		the inspection, 25% of the children's
		records were reviewed, and the records
		were complete, as required by the rule.
		were complete, as required by the rule.
Rule: 5180:2-12-15 Child Medical and	Compliant	Decumenting Statement, At the time of
	Compliant	Documenting Statement: At the time of
Enrollment Records		the inspection, medical statements for
		the children were not needed as all
		children enrolled attended a grade of
		kindergarten or above in an elementary
		school.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-15 Medical/Physical	Compliant	Documenting Statement: The program
Care Plans	Compilation	had current information on the medical
Care Figure		TO CASSES AND THE PLANTS OF THE WOOD PROPERTY OF THE CONTROL OF THE PROPERTY OF THE CONTROL OF T
		status and the required treatment plan
		for the children with health conditions.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Medical, Dental, and	Compliant	
General Emergency Plan		



Pula	Ctatus	Desumenting Statement(s) If applicable
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Emergency Drills	Compliant	
L		
	1 =	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 First Aid/Standard	Compliant	
Precautions		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Management of	Compliant	
Communicable Disease	3	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Incident/Injury	Compliant	
Reporting	Compilation	
перогинд		<u> </u>
Dule	Chabina	Decimanting Statement(s) If applicable
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-17 Materials and	Compliant	
Equipment		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-17 Daily Schedule	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 Attendance Records	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 Group Size	Compliant	
	*	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 License Capacity	Compliant	
	,	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child
	•	ratios observed during the inspection
		surpassed those required by the rule.
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<u> </u>	1	J
Rule	Status	Documenting Statement(s), If applicable
		bocumenting statement(s), it applicable
5180:2-12-19 Supervision	Compliant	
	I	
P. Ja	Chabina	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-19 Child Guidance	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Meal and Snack	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Safe Food	Compliant	
Handling/Storage		
	*	**
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Fluid Milk Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-25 Medication	Compliant	
Administration		
		,