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
Sophia's Daycare	2170015175	FCC - Type B Home
Address		County
5555 Cranbrook Lane Westerville		FRANKLIN
5555 Cranbrook Lane Westervillle		
Columbus		
OH 43081		

Inspection Information				
Inspection Type	Inspection Sc	cope	Inspection Notice	
Compliance	Full		Unannounced	
Inspection Date	Begin Time		End Time	
05/25/2023	1:49 PM		3:59 PM	
Reviewer:				
Angela Staso				
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
68	10	0	0	11

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		3	0	3
Total Capacity/Enrollment	6	3	0	3

Staff-Child Ratios at the Time of Inspection			
Group Age Group/Range Ratio Observed Comment			
Sophia's Daycare	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
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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 License Visible

Code: The program is required to have their license in a visible area.

Findings: During the inspection, it was determined the provider's license was not in a location visible to parents, as required. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/25/2023

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 1/4/23. 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: 06/25/2023

Domain: 00 License & Approvals

Rule: 5101:2-13-04 Fire Safety for Type B Homes

Code: The program is required to meet all requirements for fire extinguishers.

Findings: During the inspection, it was determined the fire extinguisher was not meeting the requirements in the following number 4 listed below:

- 1. There was no fire extinguisher.
- 2. The fire extinguisher was not working.
- 3. The fire extinguisher was not rated at the minimum rating.
- 4. The fire extinguisher had expired.
- 5. The fire extinguisher was not located in the kitchen where food is provided for child care or cooking area.

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

Corrective Action Plan Due: 06/25/2023

Domain: 01 Ratio & Supervision

Rule: 5101:2-13-18 Attendance

Code: The program is required to maintain attendance records.

Findings: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number 1 below:

- 1. No attendance record was being maintained.
- 2. The attendance record was not being consistently completed.
- 3. The original attendance documentation was not kept at the program for a period of one year.

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: 06/25/2023

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to have all outlets and surge protectors covered.

Findings: During the inspection, it was determined that the outlets did not have childproof receptacle covers in the bathroom and main program space. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 06/25/2023

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 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 i 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: 06/25/2023

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 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: 06/25/2023

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, & 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: 06/25/2023

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 as required, that included all items listed in the appendix A of the rule. The kit was missing the item listed in number 4 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: 06/25/2023

Domain: 08 Staff Files

Rule: 5101:2-13-09 Background Checks

Code: Individuals are required to completed the background check process and obtain complete results.

Findings: In review of the staff records, it was determined that background check requirements were incomplete for the individuals listed on the Employee Record Chart, as noted in number 1 below:

- 1. The JFS 01176 "Program Notification of Background check Review for Child Care" was not on file at the program, but was on file at the county agency and the individual is eligible.
- 2. The JFS 01176 was not on file at the program, but the BCI and FBI results were on file at the program and the individual had no prohibitive offenses which did not meet the rehabilitation criteria.
- 3. The JFS 01176 was not on file at the program, but the BCI and FBI results were on file at the county agency and the individual had no prohibitive offenses which did not meet the rehabilitation criteria.

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

Corrective Action Plan Due: 06/25/2023

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 number 2 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: 06/25/2023

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Voluntary Temporary	Compliant	
Closure		

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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	Compliant	
for Type B 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		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-07 Staff Records	Compliant	Dodamenta Botatement (a), in approach
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-07 Type B Provider - Foster	Compliant	
Parent	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Employee Requirements	Compliant	bocamenting statement(s), it applicable
5101.2-13-08 Employee Requirements	Compilant	
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Pulo	Status	Documenting Statement(s) If applicable
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
5101:2-13-10 Health Training	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-10 Professional	Compliant	Bocamenting statement(s), if applicable
Development	Compilant	
Development		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Outdoor Space	Compliant	
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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	bocumenting statement(s), if applicable
3101.2-13-11 Tall 2011e	Compilant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Safe Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Clean environment and	Compliant	
equipment		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Handwashing	Compliant	Documenting statement(3), if applicable
5101.2 13 13 Handwashing	Compilant	
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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	Compliant	
and Routine Trips		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Ratio and Supervision	Compliant	
for Field and Routine Trips		
D. J.	Chabin	Danish a Chahaman () (C
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Driver Requirements	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Vehicle Inspections	Compliant	Bocamenting Statement(3), if applicable
3101.2-13-14 Vehicle hispections	Compliant	
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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	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Child Records Retention	Compliant	
and Confidentiality		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Communicable Diseases	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Incident/Injury	Compliant	bocamenting statement(s), if applicable
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Rule	Status	Documenting Statement(s), If applicable
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5101:2-13-16 Disaster Plan	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 Supervision	Compliant	Documenting Statement(s), if applicable
Rule	Status	Documenting Statement/s) If applicable
5101:2-13-19 School Age Supervision	Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 Child Guidance	Compliant	Bocamenting Statement(3), it applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-20 Sleep and Nap Requirements	Compliant	Boodineming ottatement(a), in applicable
Rule 5101:2-13-20 Crib and Playpen Requirements	Status Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-21 Evening and Overnight Care	Compliant	bocumenting statement(s), if applicable
Rule 5101:2-13-21 Sanitary Environment and Hygiene	Status Compliant	Documenting Statement(s), If applicable
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Rule 5101:2-13-22 Meals and Snacks	Status Compliant	Documenting Statement(s), If applicable
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Rule 5101:2-13-22 Fluid Milk	Status Compliant	Documenting Statement(s), If applicable
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Rule 5101:2-13-22 Food Handling	Status Compliant	Documenting Statement(s), If applicable

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Infant Daily Care	Compliant	
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Rule	Chahira	Decumenting Statement(s) If applicable
	Status	Documenting Statement(s), If applicable
5101:2-13-23 Infant Bottle and Food	Compliant	
Preparation		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Diapering	Compliant	
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Pule	Chatus	Decumenting Statement/a) If a collected
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-24 Parent Permission for	Compliant	
Swimming		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-25 Medication	Compliant	(-),
	Compilant	
Requirements		
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	
3101.2-13-18 Group Size and Natios	Compliant	
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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		236differiting statement(3), it appliedsie
	Compliant	
Detectors - Type B Only		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Indoor Space	Compliant	
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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	