



## 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 Details			
Program Name Right At School at Noble Elementary School	Program Number 2170015377	Program Type Child Care Center	
Address 1293 Ardoon Street Cleveland Heights OH 44121		County CUYAHOGA	
Building Approval Date 01/01/2018	Use Group/Code E	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date 06/08/2018	Food Service Risk Level Exempt		

Inspection Information		
Inspection Type Follow-up	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 05/08/2023	Begin Time 3:20 PM	End Time 6:00 PM
Reviewer: Kathryn Noftz		

Summary of Findings				
No. Rules Verified 57	No. Rules with Non-compliances 13	No. Serious Risk 0	No. Moderate Risk 1	No. Low Risk 15

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 ½ Years</b>	0	0	0	0
Older Toddler		0	0	0
Preschool		0	0	0
School Age		0	63	63
<b>Total Capacity/Enrollment</b>	36	0	63	63

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



Right at School PM	School-Age to < 11 years	2 to 8	
Right at School PM	School-Age to < 11 years	2 to 10	
Right at School PM	School-Age to < 11 years	2 to 6	

### 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: 09 Children's Files**

Rule: 5101:2-12-15 Medical/Physical Care Plans

Code: The program is required to have a completed JFS 01236 "Child Medical/Physical Care Plan for Child Care" on file at the program for any child having a health condition. The program is required to implement and/or follow instructions on the JFS 01236 for a child with a health condition.

Finding: A written, signed and dated JFS 01236 "Child Medical/Physical Care Plan for Child Care" must be on file for any child having health conditions which require monitoring for symptoms, or a medical procedure be performed, or ongoing administration of medication or medical foods at the program. In review of the children's records, it was determined that the required written information was either not on file, implemented or followed, for at least one child indicated on the Children Records Review, as noted in number(s) 1 below:

1. No plan was on file.
2. Child's name was missing.
3. Child's date of birth was missing.
4. Name of the condition was missing.
5. Indication if medication is required was missing.
6. Symptoms to watch for were missing.



7. Directions for when should the medication or medical food be administered were missing.
8. Instructions for administration were missing.
9. Conditions that trigger the need for medication or medical foods were missing.
10. Expected results of the medication or medical food were missing.
11. Actions to be taken if the symptoms do not subside were missing.
12. Activities, foods, environmental conditions to avoid were missing.
13. Training instructions were missing.
14. Directions for action to be taken if expected result of medication or medical food does not occur were missing.
15. Instructions regarding emergency evacuation, if applicable, were missing.
16. Dated signature of parent was missing.
17. Dated signature of certified professional who trained the program staff was missing, if parent was not the trainer.
18. Printed name(s)/Dated signature(s) of child care staff member(s) trained to perform the procedure were missing.
19. Dated signature(s) of administrator was missing.
20. Name of any applicable medication was missing.
21. Date medication was administered was missing.
22. Time medication was administered was missing.
23. Dosage administered was missing.
24. Signature of staff member who administered the medication was missing.
25. Medication listed in the procedures to follow was not onsite available to administer as instructed and alternate instructions for this situation were not included on the plan.
26. The plan was not implemented.
27. The plan was not able to be implemented due to conflicting information.
28. The plan was not followed.

Submit the program's corrective action plan, which includes a copy of the completed JFS 01236, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/08/2023

### Low Risk Non-Compliances

#### Domain: 00 License & Approvals

Rule: 5101:2-12-02 Current Information

Code: The rule requires the program to request an administrator amendment, and submit qualifications for a new administrator, within thirty days of the change.



Finding: During the inspection, it was determined that a change of administrator had been made and the owner or administrator had failed to provide notification of this change to the Department and/or submit qualifications for the new administrator within 30 days. A license is only valid for the licensee, administrator, address and license capacity designated on the license. Technical assistance was provided, and as discussed, submit the request to amend the license and any required documentation, if applicable, through the licensing system, OCLQS.

Corrective Action Plan Due: 06/08/2023

**Domain: 00 License & Approvals**

Rule: 5101:2-12-03 Inspection Requirements

Code: The program is required to respond to noncompliances by the date noted in the inspection report.

Finding: During the inspection, it was determined the program had not responded to the non-compliances addressed in the inspection report dated 11/21/22. The rule requires the program to 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: 06/08/2023

**Domain: 00 License & Approvals**

Rule: 5101:2-12-04 Food Service Requirements

Code: The program is required to maintain their food license and not allow it to expire.

Finding: During the inspection, it was determined that the posted food service license had expired. A current food service license must be obtained. Submit the program's corrective action plan, which includes a copy of the updated food service license, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/08/2023



**Domain: 00 License & Approvals**

Rule: 5101:2-12-04 Food Service Requirements

Code: The program is required to obtain written permission from the food service license holder if operating under the food service license of another entity at the same location.

Finding: During the inspection, it was determined the program was operating under a food service license held by another entity at the same location and did not have written documentation granting permission from that entity. Submit the program's corrective action plan, which includes a copy of the written documentation granting permission, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/08/2023

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-13 Handwashing Requirements

Code: The program is required to have all children wash their hands as outlined in rule.

Finding: During the inspection, it was determined that at least one child in the Right at School PM group did not wash his or her hands at the time listed in number(s) 2 below, as required in rule.

1. Upon arrival.
2. Prior to departure.
3. After toileting/diaper change.
4. After contact with bodily fluids.
5. After returning from outdoor play.
6. After handling pets, pet cages, or other pet objects that have come in contact with the pet, before moving on to another activity.
7. Before eating or assisting with food preparation.
8. After water activities.
9. When visibly soiled (must use soap and water)
10. Other [ ].

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

Corrective Action Plan Due: 06/08/2023

**Domain: 03 Postings & Equipment**



**Rule:** 5101:2-12-16 Medical, Dental, and General Emergency Plan  
**Code:** The program is required to post the fire and weather plans.

**Finding:** During the inspection, it was determined that the following information was not posted for item number(s) 1,3 below:

1. Fire alert plan, including a diagram indicating evacuation routes.
2. Weather alert plan was missing details for [ ].
3. Weather alert plan was missing a diagram indicating evacuation routes.

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

Corrective Action Plan Due: 06/08/2023

**Domain: 04 Indoor/Outdoor Space**

**Rule:** 5101:2-12-11 Outdoor Space Requirements

**Code:** The program is required to conduct and document quarterly inspections of their outdoor play space.

**Finding:** During the inspection, it was determined that quarterly inspections of one or more outdoor play area(s) and equipment had not been completed and documented as required, using the JFS 01281 "Child Care Playground Inspection Report" form. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/08/2023

**Domain: 05 Health & Safety**

**Rule:** 5101:2-12-16 Emergency Drills

**Code:** The program is required to complete fire drills, weather drills, and emergency/lockdown drills appropriately.

**Finding:** 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 the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/08/2023

**Domain: 08 Staff Files**

**Rule:** 5101:2-12-10 Health Training Requirements

**Code:** The program is required to maintain a staff schedule with coverage of the required health trainings.

**Finding:** In review of the staff records, it was determined the program did not have at least one child care staff member present/scheduled to be present during all hours of operation with currently valid documentation for the training(s) listed in number(s) 2,5,9 below:

1. First Aid – child care staff members scheduled during the hours of [ ] and [ ] had expired training
2. First Aid – child care staff members scheduled during the hours of 7 and 845am did not have verification of completion of First Aid
3. First Aid – trained child care staff member was not present in each building used by the program.
4. CPR – child care staff members scheduled during the hours of [ ] and [ ] had expired training
5. CPR – child care staff scheduled during the hours of 7 and 845am had did not have verification of completion of CPR
6. CPR – trained child care staff member was not present in each building used by children
7. CPR – training taken by staff was not appropriate for all ages and developmental levels of the children in care
8. CPR - audiovisual or electronic media training taken by staff did not include an in-person component of the training
9. Communicable Disease – child care staff members scheduled during the hours of 315 and 6 had expired training
10. Communicable Disease – child care staff scheduled during the hours of [ ] and [ ] had not taken Communicable Disease training
11. Communicable Disease – trained child care staff member was not present in each building used by the program
12. Child Abuse – child care staff members scheduled during the hours of [ ] and [ ] had expired training
13. Child Abuse – child care staff scheduled during the hours of [ ] and [ ] had not taken Child Abuse training
14. Child Abuse – trained child care staff was not in each building used by the program

Refer to the Employee Record Chart for specific details. Submit the program's corrective action plan, which includes verification of complete coverage for any training listed, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/08/2023



**Domain: 08 Staff Files**

Rule: 5101:2-12-07 Administrator Responsibilities/Requirements

Code: The program administrator is required to maintain current employee records in the Ohio Professional Registry.

Finding: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 4,5,6,7 below:

1. At least one administrator, employee or child care staff member (including substitutes) had not created a profile.
2. At least one administrator, employee or child care staff member had not created an employment record for the program on or before their first day of employment.
3. At least one administrator, employee or child care staff member had not updated changes to positions or roles within five calendar days of the change.
4. The administrator had not assigned at least one employee or child care staff member to the program's organization dashboard.
5. At least one individual's schedule was not current.
6. At least one individual's position or role did not include an applicable group assignment.
7. At least one individual's employment had not been end dated.
8. Other: [ ]

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

Corrective Action Plan Due: 06/08/2023

**Domain: 08 Staff Files**

Rule: 5101:2-12-10 Health Training Requirements

Code: The program is required to have all child care staff members complete training in child abuse and neglect recognition and prevention within sixty days of hire. Staff must complete training in first aid and CPR within the first ninety days of hire.

Finding: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in number(s) 2,3 below:

1. Child abuse and neglect recognition and prevention training was not completed within sixty days of hire.
2. First aid training was not completed within ninety days of hire.
3. Cardiopulmonary resuscitation (CPR) training was not completed within ninety days of hire.
4. The child abuse and neglect recognition and prevention training was expired.
5. The first aid training was expired.





6. The CPR training was expired.

Refer to the Employee Record Chart for the name(s) of the child care staff member(s) who must complete the required health and safety training(s). Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/08/2023

**Domain: 09 Children's Files**

Rule: 5101:2-12-15 Child Medical and Enrollment Records

Code: The program is required to use the updated JFS 01234 "Child Enrollment and Health Information For Child Care" .

Finding: In review of 25% 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(s) 1,4,8,10,11,13,15 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 [ ]

Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is required at this time.

Corrective Action Plan Due: 06/08/2023



**Domain: 10 Written Policies & Procedures**

Rule: 5101:2-12-07 Written Program Policies and Procedures

Code: The program administrator is required to maintain and implement the parent handbook.

Finding: During the inspection, it was determined the administrator/designee did not implement the policies and procedures detailed in Appendix B of this rule when a child was scheduled to arrive from another program or activity did not arrive. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is required at this time.

Corrective Action Plan Due: 06/08/2023

**Domain: 10 Written Policies & Procedures**

Rule: 5101:2-12-07 Written Program Policies and Procedures

Code: The program's handbook is required to be available at the program and must be given to all parents and employees.

Finding: During the inspection, it was determined that written policies and procedures listed in appendix B of this rule, or revisions, were not provided as noted in number(s) 4 below:

1. A copy of the written policies and procedures was not given to at least one parent.
2. A copy of the written policies and procedures was not given to at least one employee.
3. The written policies and procedures were not available at the program.
4. Other- The current written policies and procedures were not available at the program.

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

Corrective Action Plan Due: 06/08/2023

**Domain: 10 Written Policies & Procedures**

Rule: 5101:2-12-16 Written Disaster Plan

Code: The program is required to train child care staff members and employees on the written disaster plan annually and keep written documentation of the training on-site.



**Finding:** During the inspection, it was determined the program’s written disaster plan did not meet the requirement for training child care staff members and employees on the plan annually as noted in number(s) 2 below:

1. Child care staff members and employees were not trained annually.
2. Written documentation of the training was not kept on file.

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

Corrective Action Plan Due: 06/08/2023

**Rules In-Compliance/Not Verified**

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	
Rule: 5101:2-12-04 Building Department Inspection	Compliant	Documenting Statement: This program serves only school age children in a public or chartered non-public school building.
Rule: 5101:2-12-04 Fire Inspection	Compliant	Documenting Statement: This program serves only school age children in a public or chartered non-public school building.
5101:2-12-07 Administrator Qualifications	Not Verified	
5101:2-12-08 Medical Statement	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Child Care Staff Member Educational Requirements	Compliant	
5101:2-12-08 Orientation Training & Whistle Blower Protection	Compliant	
5101:2-12-09 Background Check Requirements	Compliant	
5101:2-12-11 Indoor Space Requirements	Compliant	
5101:2-12-12 Safe Equipment	Compliant	
5101:2-12-12 Safe Environment	Compliant	
5101:2-12-13 Sanitary Equipment and Environment	Compliant	
5101:2-12-13 Smoke Free Environment	Compliant	
5101:2-12-16 First Aid/Standard Precautions	Compliant	
5101:2-12-16 Management of Communicable Disease	Compliant	
5101:2-12-16 Incident/Injury Reporting	Compliant	
5101:2-12-17 Daily Schedule	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Materials and Equipment	Compliant	
5101:2-12-18 License Capacity	Compliant	
5101:2-12-18 Ratio	Compliant	
5101:2-12-18 Group Size	Compliant	
5101:2-12-18 Attendance Records	Compliant	
5101:2-12-19 Supervision	Compliant	
5101:2-12-19 Child Guidance	Compliant	
5101:2-12-22 Meal and Snack Requirements	Compliant	
5101:2-12-22 Safe Food Handling/Storage	Compliant	
Rule: 5101:2-12-25 Medication Administration	Compliant	Documenting Statement: There were no children on medication at the time of the inspection; however, the method of storage and practices for the administration were reviewed.