

# **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	
Auntie Jacque Childcare	2170015756		FCC - Type A Home	
Address			County	
1609 Moreland Drive			JEFFERSON	
Steubenville OH 43952  Building and Fire Approvals apply to Type A Family Chile	d Care Homes only			
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½	
08/18/2016	NA	12	12	
Fire Inspection Approval Date 07/30/2019				

Inspection Information				
Inspection Type	Inspection So	cope	Inspection Notice	
Compliance	Full		Unannounced	
Inspection Date	Begin Time		End Time	
12/20/2023	9:45 AM		12:15 PM	
Reviewer:				
Shawn Hannan				
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
66	7	0	0	8

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)		2	0	2
Young Toddler		3	0	3
Total Under 2 Years	6	5	0	5
Older Toddler		3	0	3
Preschool		5	0	5
School Age		0	10	10
Total Capacity/Enrollment	12	8	10	23

Staff-Child Ratios at the Time of Inspection			
Group Age Group/Range Ratio Observed Comment			Comment
Jacque Jones Group	Mixed Age Group	2 to 5	





# **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
Serious Risk Non-Compliances
No Serious Risk Non-Compliances were observed during this inspection
Moderate Risk Non-Compliances
No Madausta Biala Nam Campiliana and a superad during this improving
No Moderate Risk Non-Compliances were observed during this inspection

## **Low Risk Non-Compliances**

Domain: 01 Ratio & Supervision

Rule: 5101:2-13-18 Attendance

Code: The program is required to maintain a record of the arrival and departure of each child. The program is

also required to retain the original attendance record at the program for a period of one year.



Findings: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number 2 below:

- 1. No attendance record was being maintained.
- 2. The attendance record was not being consistently completed.
- 3. The record did not include the name of at least one child.
- 4. The record did not include the birth date of at least one child.
- 5. The record did not include the assigned group.
- 6. The record did not include the child's weekly schedule.
- 7. The record did not include the time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.
- 8. The original attendance record was not kept at the program for a period of one year.

Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule within 30 days.

Corrective Action Plan Due: 01/20/2024

### **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 posted. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule within 30 days.

Corrective Action Plan Due: 01/20/2024

#### **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 CCSM or Substitute CCSM was left alone with children and did not have current valid documentation for training(s) listed in numbers 10 & 14 below:

- 1. First Aid expired training
- 2. First Aid did not have verification of 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 the program serves 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 by staff did not include an in-person component of the training
- 10. Communicable Disease expired training Shareese
- 11. Communicable Disease had not taken CD training
- 12. Communicable Disease did not have verification of the completion of the 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 Shareese
- 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 within 30 days.

Corrective Action Plan Due: 01/29/2024

**Domain: 08 Staff Files** 

Rule: 5101:2-13-08 Employee Requirements

Code: The program is required to obtain completed medical statements for all program staff.

Findings: In review of the staff records, it was determined that the medical statements for those individuals listed on the Employee Record Chart did not include the required information listed below in number 1.

- 1. A medical statement was not on file; Latoya & Mary
- 2. The medical statement(s) on file were not dated within 12 months of the individual'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 individual 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);

Submit the program's corrective action plan, which includes a copy of the completed medical statement, to the Department to verify compliance with the requirements of this rule within 30 days.

Corrective Action Plan Due: 01/29/2024



**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 Jacque.
- 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 within 30 days.

Corrective Action Plan Due: 01/20/2024

Domain: 08 Staff Files

Rule: 5101:2-13-10 Professional Development

Code: The program staff is required to complete at least six clock hours of training annually.

Findings: In review of records, it was determined the Child Care Staff Member indicated on the Employee Record Chart did not meet the annual professional development requirement as noted in number 1.

- 1. The child care staff member(s) had not completed at least six hours of professional development. Jacque
- 2. Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.
- 3. Training topic did not meet the requirements listed in appendix A of this rule.
- 4. Documentation of training did not meet the requirements of this rule.
- 5. The substitute(s) had been used more than ninety days annually between July first and June thirtieth and had not completed at least six hours of professional development.
- 6. Other [ ].

Submit the program's corrective action plan to verify compliance with the requirements of this rule within 30 days.

Corrective Action Plan Due: 01/20/2024

#### **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 10 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 missing date L. Nutter-Henderson
- 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 within 30 days.

Corrective Action Plan Due: 01/20/2024

**Domain: 09 Children's Files** 

Rule: 5101:2-13-15 Child Medical and Enrollment Records

Code: The program is required to have a completed medical on file for each child.

Findings: In review of of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in number 1 below:

- 1. No medical was on file for at least one child M. Williams (2021) & M. Williams (2020)
- 2. Medical(s) on file was not updated every 13 months
- 3. Medical(s) were missing child's name and date of birth
- 4. Medical(s) were missing the date of the medical examination
- 5. The date of the exam was more than 13 months prior to the date the form was signed
- 6. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care
- 7. Medical(s) were missing the signature, business address and telephone number of the physician, physician's assistant(PA), advance practice nurse (APN) or certified nurse practitioner (CNP) who examined the child
- 8. Medical(s) were missing a record of immunizations the child has had specifying month, day and year
- 9. Medical(s) were missing a statement from the physician, PA, APN, or CNP that the child has been immunized or is in the process of being immunized against the diseases
- required by division 5104.014 of the Revised Code and found in appendix A to this rule
- 10. Medical(s) were missing a statement from the child's parent or guardian that he or she has declined to have the child immunized against the disease for reasons of conscience, including religious convictions

11. Other [ ]

Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule within 30 days.

Corrective Action Plan Due: 01/20/2024

### **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	Decumenting Statement(s) If applicable
5101:2-13-02 Provider Medical	Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Type A Ownership	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-03 Inspection Requirements	Compliant	Documenting Statement(s), if applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Building Inspections for Type A Homes	Compliant	bocumenting statement(s), if applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Fire Inspections for Type A Homes	Compliant	bocamenting statement(s), if apprecione
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-05 Denial, Revocation, and Suspension	Compliant	
Rule	Status	Documenting Statement(s), If applicable

5101:2-13-08 Child Care Staff	Compliant	
Requirements	'	
Rule	Chahua	Decumenting Statement(s) If applicable
5101:2-13-08 Whistle Blower	Status Compliant	Documenting Statement(s), If applicable
3101.2-13-08 WHISTIE BIOWEI	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-09 Background Checks	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Outdoor Space	Compliant	- comment of the second of the
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Outdoor Equipment	Compliant	
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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	bocamenting statement(5), it applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Safe Environment	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Clean environment and	Compliant	
equipment		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Handwashing	Compliant	bocumenting statement(s), it applicable
Jacob La Tarianawasining	Compilant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Smoke Free	Compliant	

Dula	Chahua	Decumenting Statement (a) If an alicely
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	'	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Driver Requirements	Compliant	Berner (4)
310112 13 11 Bill of Requirements		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Vehicle Inspections	Compliant	bocamenting statement(3), it applicable
3101.2-13-14 Vehicle Hispections	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
		Documenting Statement(s), if applicable
5101:2-13-14 Vehicle Requirements	Compliant	
Pule	Ctatus	Decumenting Statement(s) If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Health Conditions	Compliant	
Dulo	Ctatus	Decumenting Statement (a) If a well-all-
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 Emergency Drills	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 First Aid Kit/Standard	Compliant	
Precautions		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Communicable Diseases	Compliant	
3101.2-13-10 Collillullicable 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	
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Distr	Ct-t	Decomposition City and All City
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
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5101:2-13-19 School Age Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 Child Guidance	Compliant	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
5101.2-13-19 Cillia Galdance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-20 Sleep and Nap	Compliant	
The state of the s		
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-20 Crib and Playpen	Compliant	
Requirements		
112 43.11		
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Pula	Status	Documenting Statement/s) If a reliable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-21 Evening and Overnight	Compliant	
Care		
Rule	Status	Documenting Statement(s), If applicable
		bocumenting statement(3), it applicable
5101:2-13-21 Sanitary Environment	Compliant	
and Hygiene		

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-22 Meals and Snacks	Compliant	
	1	
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	bocumenting statement(s), if applicable
3101.2-13-22 FOOd Halldling	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Infant Daily Care	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Infant Bottle and Food	Compliant	
Preparation		
Rule	Status	Decumenting Statement/s) If applicable
		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	Compliant	<u> </u>
Swimming		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-25 Medication	Compliant	
Requirements		
Dulo	Ctatus	Decumenting Statement (a) If any limble
Rule  E101:2 12 07 Provider Pespensibilities	Status	Documenting Statement(s), If applicable
5101:2-13-07 Provider Responsibilities	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-18 Group Size and Ratios	Compliant	
2_1_1_ 10 10 0.00p 0.120 d.i.d iid iid		

Rule	Status	Documenting Statement(s), If applicable
5101:2-13 Written Policies and	Compliant	bocamenting statement(s), it applicable
Procedures	Compilant	
Procedures		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Indoor Space	Compliant	
3101.2 13 11 maoor space	Compilation	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-17 Programming	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-24 On-site Pools	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Review Policies and	Compliant	
Procedures		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Pets	Compliant	
Rule	Status	Documenting Statement(s) If applicable
1 1		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	G Tarana (o), ii appiioanic
Equipment	- Compilation	
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