



## 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 Everyday Is Special Childcare	Program Number 2170016340	Program Type Child Care Center	
Address 3274 Westbourne Dr Cincinnati OH 45238		County HAMILTON	
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date 04/29/2021	Food Service Risk Level		

Inspection Information		
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 02/10/2022	Begin Time 2:55 PM	End Time 6:45 PM
Reviewer: SULYN ROMER		

Summary of Findings				
No. Rules Verified 56	No. Rules with Non-compliances 16	No. Serious Risk 0	No. Moderate Risk 6	No. Low Risk 12

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	81	81
<b>Total Capacity/Enrollment</b>	142	0	81	81

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Lower Area - Young School Age	School-Age to < 11 years	1 to 11	



Lower Area - Young School Age	School-Age to < 11 years	2 to 24	
Upper Area - Older School Age	School-Age to < 11 years	1 to 15	
Upper Area - Older School Age	School-Age to < 11 years	1 to 21	
Upper Area - Older School Age	School-Age to < 11 years	2 to 22	

**Summary of Non-Compliances**

*If the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited. Ohio Administrative Code 5101: 2-12-03 details the process for submitting a request for a review if a program disagrees with a licensing finding. The request for review must be submitted within seven days from the receipt of the licensing report.*

**Serious Risk Non-Compliances**

**No Serious Risk Non-Compliances were observed during this inspection**

**Moderate Risk Non-Compliances**

**Domain: 01 Ratio & Supervision**

Rule: 5101:2-12-18 Ratio  
Code: The program is required to maintain the appropriate staff to child ratio for each group served.

Finding: During the inspection, a ratio of one (1) child care staff member(s) for twenty-one (21) children was determined to have occurred for the older school age (upper) group when the situation in number 1 below occurred:

1. A child care staff member stepped out of the room.
2. A child care staff member had not arrived at work on time.
3. Children were present who were not scheduled to be there.
4. A child care staff member was unable to work.
5. A child was injured in that group.
6. A child arrived in the group before a second staff member was scheduled to arrive with the group.
7. Two groups were combined, and the program did not follow the ratio for the youngest child in the group.
8. A child was transitioning to the next older age group, and the program did not follow the ratio for the youngest child in the group.
9. Ratio was doubled for more than two hours while children were napping.
10. Ratio was doubled while children were napping for a group that included at least one infant.



11. Ratio was doubled while children were napping and there were not enough staff members in the building to meet staff/child ratio.
12. Ratio was doubled in the school age group to allow access to the program, however, the program does not serve only school age children.
13. Both child care staff members did not have a working communication device when one staff member left the group to allow access to the school age only program.
14. The child care staff member did not return to the group after allowing access to the school age only program.
15. Other [ ].

Additional child care staff members must be hired or current child care staff members must be rescheduled to maintain compliance. 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: 03/26/2022

**Domain: 04 Indoor/Outdoor Space**

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

Code: The program is required to have an outdoor play space free from immediate risk.

Finding: During the inspection, it was determined that an area was used which was not protected from traffic and other hazards by a continuous fence in good condition, or natural barrier, that ensured children were not able to leave the playground area. The fence or natural barrier was determined to present an immediate risk for a child to be able to leave the playground as noted in number 3 and 6 below:

1. The fence, natural barrier, or combination of fence and natural barrier was not continuous.
2. The fencing had missing slat boards through which children could leave the playground.
3. The gate was broken and did not close - (gate that led out to a parking lot)
4. The latch on the gate was broken.
5. The gate had no latch.
6. The fencing was broken - upper entry area fence was missing or broken.
7. The latch was easily opened by children on the playground.
8. The portable fencing approved for use by the Department was not being used.
9. Other [ ].

Discontinue use of the playground and provide a space for outdoor play which is well defined by a continuous fence or natural barrier and protected from other hazards. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/26/2022



**Domain: 04 Indoor/Outdoor Space**

Rule: 5101:2-12-11 Outdoor Play Equipment

Code: The program is required to anchor equipment to the ground as required, to close "S" hooks to prevent the chain from slipping off and prevent strangulation and provide equipment with openings that will not pose a safety risk.

Finding: During the inspection, it was determined that equipment on the outdoor play space posed an imminent risk of harm to a child as noted in number 4 below:

1. The climber was not anchored.
2. The swings were not securely anchored.
3. The slide was not securely anchored.
4. The climbing rope was not securely anchored at both ends. (rope on the ramp)
5. The "S" hooks on the climber were not closed in order to prevent the chain from slipping off the hook and prevent strangulation.
6. The "S" hooks on the swing(s) were not closed in order to prevent the chain from slipping off the hook and prevent strangulation.
7. The [ ] had an opening that was greater than three and one-half inches, but less than nine inches. Equipment openings must be less than 3 1/2 inches or more than 9 inches to avoid the risk of entrapment.

Discontinue the use of this equipment until it has been removed, repaired or replaced. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/26/2022

**Domain: 04 Indoor/Outdoor Space**

Rule: 5101:2-12-11 Outdoor Play Fall Zones

Code: The program is required to provide adequate fall surface for the outdoor play space.

Finding: During the inspection, it was determined that the playground did not have adequate fall surface under and around equipment as noted in number 1 (slide and rope/ramp) below:

1. No fall surface
2. Adequate fall surface to soften the impact of a fall
3. Adequate fall surface to soften the impact of a fall that extended the length of the required fall zone
4. Other [ ]

With any equipment designed for climbing, swinging, bouncing, or sliding, resilient material, as specified in Appendix A, needs to be added in order to protect children in the event of a fall. Submit the program's corrective action plan, which includes written verification of the discontinued use of this equipment until corrections are made along with a description of the resilient material added, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/26/2022



**Domain: 08 Staff Files**

Rule: 5101:2-12-09 Background Check Requirements

Code: The program is required to have documentation from ODJFS, indicating the individual is eligible to be employed in child care, on file before allowing the staff to have sole responsibility of children.

Finding: During the inspection, it was determined that child care staff member(s) had sole responsibility of children in the school age group (also drives a bus) and neither a preliminary approval nor the JFS 01176 "Program Notification of Background Check Review for Child Care" were on file as required. Submit the program's corrective action plan, which includes a copy of the JFS 01176 or a statement that the child care staff member(s) no longer have sole responsibility of children, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/26/2022

**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 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: 03/26/2022

### Low Risk Non-Compliances

#### Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

Code: The program is required to have the information listed in rule on all attendance records.

Finding: During the inspection, it was determined that the attendance records did not include the required information listed in number(s) 1, 2, 4 and 5 below:

1. The name of the child.
2. The birth date of the child.
3. The assigned group.
4. The child's weekly schedule.
5. The time (hours and minutes) of each child's arrival and departure to the program, including transportation by 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: 03/26/2022

**Domain: 01 Ratio & Supervision**

**Rule:** 5101:2-12-20 Cots and Napping

**Code:** The program is required to have child sleep only on cots/mats.

**Finding:** During the inspection, it was determined that a child was sleeping as noted in number 2 below:

1. On the floor.
2. At the table.
3. On a bean bag chair.
4. On a couch or chair.
5. Other [ ].

Children shall be provided a cot or mat to rest, nap, or sleep. 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 not required at this time.

**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 school age group did not wash his or her hands at the time listed in number(s) 3 and 4 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: 03/26/2022

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-13 Handwashing Requirements

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

Finding: During the inspection, it was determined that at least one staff member with both school age groups did not wash his or her hands at the time listed in number 3 below, as required in rule.

1. Upon arrival for the day.
2. Prior to departure.
3. Upon entry into a classroom.
4. After toileting or assisting a child with toileting.
5. After each diaper change or pull-up change.
6. After contact with bodily fluids or cleaning up spills or objects contaminated with bodily fluids.
7. After cleaning or sanitizing or using any chemical products.
8. After handling pets, pet cages or other pet objects that have come in contact with the pet.
9. Before eating, serving or preparing food or bottles or feeding a child.
10. Before and after completing a medical procedure or administering medication.
11. When visibly soiled (must use soap and water).
12. Other [ ].

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

Corrective Action Plan Due: 03/26/2022

**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 and 3 below:

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

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

Corrective Action Plan Due: 03/26/2022

**Domain: 05 Health & Safety**

Rule: 5101:2-12-22 Meal and Snack Requirements

Code: The program is required to refrain from using televisions, computers, and other screens during meals and snacks.

Finding: During the inspection it was determined that television/computer/other were on during meals and snacks. 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 not required at this time.

**Domain: 05 Health & Safety**

Rule: 5101:2-12-16 First Aid/Standard Precautions

Code: The program is required to have a first aid kit onsite.

Finding: During the inspection, it was determined first aid kit(s) at the program had missing, or expired, items that are required by appendix A of this rule to be contained in a first aid kit, as noted in numbers below:

Upper Kit: 10, 12, 14, 15

Lower Level Kit: 5, 7, 9, 12, 13, 14, 15

Bus Kit: 5, 7, 9, 12, 13, 14, 15, 16, 17

1. The program did not have a first aid kit [onsite, on the vehicle, on a field trip].
2. One roll of hypoallergenic first-aid tape.
3. Individually wrapped sterile gauze squares in assorted sizes.
4. Sterile adhesive bandages in assorted sizes.
5. Tweezers.



6. Gauze rolled bandage.
7. Triangular bandage.
8. Rounded end scissors.
9. 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).
10. A working digital thermometer.
11. Disposable non-latex gloves.
12. A working flashlight.
13. 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.
14. 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.
15. Pocket mask or face shield, appropriate for all ages of children in care, for cardiopulmonary resuscitation (CPR) administration.
16. Soap or waterless sanitizer (field trip or transporting away from the program only).
17. Bottled water (field trip or transporting away from the program only).

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: 03/26/2022

**Domain: 06 Program Information**

Rule: 5101:2-12-14 Transportation - Driver Requirements

Code: The program is required to retain a copy of all licenses for drivers of the program.

Finding: In review of employee records, it was determined that the driver(s) noted on the Employee Record Chart used for trips did not have a copy of a current driver's license on file. Submit the program's corrective action plan, which includes a copy of the current driver's license, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/26/2022

**Domain: 06 Program Information**

Rule: 5101:2-12-14 Transportation - Driver Requirements

Code: The program is required to have children and staff practice and document safely exiting vehicles during an emergency.



Finding: During the inspection, it was determined that the program had not conducted and/or documented monthly emergency exiting drills on vehicles with children, including the date of the drill and all staff who transport children. 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: 03/26/2022

**Domain: 08 Staff Files**

Rule: 5101:2-12-10 Professional Development Requirements

Code: The program is required to ensure child care staff members, including substitutes used more than ninety days annually, obtain at least 6 hours of professional development each state fiscal year.

Finding: In review of the staff records, it was determined that at least one child care staff member did not meet the annual professional development requirement as noted in number 1 below:

1. The child care staff member(s) had not completed at least six hours of professional development.
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 the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/26/2022

**Domain: 08 Staff Files**

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to include all information.

Finding: In review of the staff records, it was determined that the medical statements for those employees listed on the Employee Record Chart did not include the required information listed below in number(s) 2, 3 b and c, 4 a-d



1. Date of examination;
2. Signature, business address, and telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination;
3. A statement that verifies that 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);
4. Tuberculosis (TB) screening/test
  - 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 4a;
  - 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: 03/26/2022

**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) 4, 5, 6, 13 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 not required at this time.

**Rules In-Compliance/Not Verified**

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	
5101:2-12-02 Current Information	Compliant	
5101:2-12-03 Inspection Requirements	Compliant	
5101:2-12-04 Building Department Inspection	Compliant	
5101:2-12-04 Fire Inspection	Compliant	
Rule: 5101:2-12-04 Food Service Requirements	Compliant	Documenting Statement: The food service license was observed posted. Following is the audit number and date of expiration: DCoubZ7H67 Level III Hamilton Co.



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator Qualifications	Compliant	
5101:2-12-07 Administrator Responsibilities/Requirements	Compliant	
5101:2-12-07 Written Program Policies and Procedures	Compliant	
5101:2-12-08 Child Care Staff Member Educational Requirements	Compliant	
5101:2-12-08 Orientation Training & Whistle Blower Protection	Compliant	
5101:2-12-10 Health Training 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	
5101:2-12-14 Transportation and Field Trip Procedures	Compliant	
Rule	Status	Documenting Statement(s), If applicable



5101:2-12-14 Transportation - Vehicle Requirements	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-16 Emergency Drills	Compliant	Documenting Statement: During the inspection, documentation required by rule and strategies to maintain compliance were discussed with program staff. The following resources were provided: sample drill form
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-16 Management of Communicable Disease	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-16 Incident/Injury Reporting	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-16 Written Disaster Plan	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-17 Daily Schedule	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-17 Materials and Equipment	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-17 Daily Outdoor Play	Not Verified	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-18 License Capacity	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-18 Group Size	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-19 Supervision	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-19 Child Guidance	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Fluid Milk Requirements	Not Verified	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food Handling/Storage	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-25 Medication Administration	Compliant	