

Center Licensing Inspection Full Report

All licensed child care programs are inspected at least once each year. Non-compliances are documented and grouped as Serious, Moderate or Low risk violations. Documenting statements and supplemental information may be included in this report. Licensing inspection reports from the previous three years can be viewed on the child care website at http://jfs.ohio.gov/CDC/childcare.stm. This includes complaint investigation reports with substantiated allegations. For any other child care records, please contact the Child Care Help Desk at 1-877-302-2347, option 4.

| | Program Deta | ails | |
|---|-------------------------------|-----------------|-------------------|
| Program Name | Program Number | | Program Type |
| The Fox's Den ChildCare | 2180017264 | | Child Care Center |
| Address 157 Wadsworth Road Wadsworth OH 44281 | | | County MEDINA |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ |
| Fire Inspection Approval Date 10/09/2023 | Food Service Risk L Exempt | evel | |

| Inspection Information | | | | |
|----------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type Annual | Inspection So | cope | Inspection Notice | |
| | Full | | Unannounced | |
| Inspection Date 11/28/2023 | Begin Time 9 | 1:30 AIVI | End Time 3:15 PM | |
| Reviewer: | | | | |
| DIANE TRACZYK | | | | |
| Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58 | 3 | 0 | 1 | 2 |

| 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) | | 10 | 9 | 19 |
| Young Toddler | | 2 | 6 | 8 |
| Total Under 2 ½ Years | 58 | 12 | 15 | 27 |
| Older Toddler | | 5 | 2 | 7 |
| Preschool | | 18 | 9 | 27 |
| School Age | | 0 | 0 | 0 |
| Total Capacity/Enrollment | 80 | 23 | 11 | 61 |

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

| Infants (0-12mos) | 0 to < 12 months | 2 to 9 | 1st |
|------------------------|--------------------------|---------|------------------|
| Infants (0-12mos) | 0 to < 12 months | 2 to 8 | 2nd |
| Sr. Infants (12-18mos) | 12 months to < 18 months | 1 to 4 | 1st |
| Sr. Infants (12-18mos) | 12 months to < 18 months | 1 to 4 | 2nd |
| Toddlers (18-30 mos) | 18 months to < 30 months | 1 to 7 | 1st |
| Toddlers (18-30 mos) | 18 months to < 30 months | 1 to 7 | 2nd - lunch |
| Preschool (30-36 mos) | 30 months to < 36 months | 1 to 3 | 1st |
| Preschool (30-36 mos) | 30 months to < 36 months | 1 to 6 | 2nd - nap |
| Pre-K 2 | 4 years to < 5 years | 1 to 12 | 1st |
| Pre-K 1 | 3 years to < 4 years | 1 to 4 | 1st |
| Pre-K 1 | 3 years to < 4 years | 1 to 21 | 2nd - combined |
| | | | with Pre-K 2 for |
| | | | nap |

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

Domain: 09 Children's Files

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

<u>Code</u>: 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 and must implement and/or follow instructions on the plan. The program is required to have staff trained to perform the procedures on the JFS 01236 "Child Medical/Physical Care Plan for Child Care" present at the program when the child requiring the procedure is onsite. Only staff who have been trained shall be permitted to perform the procedures listed on the JFS 01236.

<u>Finding</u>: In review of the children's records, it was determined the program did not meet the requirements for caring for at least one child, indicated on the Children Records Review, with a condition that requires a JFS 01236 "Child Medical/Physical Care Plan" as noted in number 1 below:

1. No plan was on file.

(Page 1)

- 2. Child's name was missing.
- 3. Name of the condition was missing.
- 4. Indication if medication or medical food is required was missing.
- 5. Signs, symptoms or situations that require staff to take action were missing.
- 6. Activities, foods, environmental conditions to avoid were missing.
- 7. Training instructions for procedures for staff to follow were missing or incomplete.

(Page 2)

- 8. Child's name was missing or not attached.
- 9. Child's date of birth was missing or not attached.
- 10. Child's weight was missing or not attached.
- 11. Name of the medication/medical food was missing or not attached.
- 12. Dosage of medication/medical food to be administered was missing or not attached.
- 13. Time for medication/medical food to be administered was missing or not attached.
- 14. Expiration date for medication/medical food was missing or not attached.
- 15. Symptoms that require staff to administer medication/medical food were missing or not attached.
- 16. Specific instructions to administer the medication/medical food were missing or not attached.
- 17. Actions to be taken if the symptoms do not subside were missing or not attached.
- 18. Physician's signature was missing or not attached.
- 19. The date of the physician's signature was missing or not attached.

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- 20. Child's name was missing.
- 21. Instructions regarding emergency evacuation, if applicable, were missing.
- 22. Signature of parent granting permission to implement the plan and verifying training was missing.
- 23. Date of parent signature was missing.
- 24. Certified Professional Trainer information was missing.
- 25. Signature of certified professional who trained the program staff was missing, if parent was not the trainer.
- 26. Date of trainer signature was missing.
- 27. Printed name(s) of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
- 28. Signature(s) of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
- 29. Date of staff signature was missing.
- 30. Administrator/Provider signature was missing
- 31. Date of administrator/Provider was missing.

(Page 4)

- 32. Child's name was missing.
- 33. Name of medication or medical food was missing.
- 34. Date the medication/medical food was administered was missing.
- 35. Time medication/medical food was administered was missing.
- 36. Dosage of medication/medical food that was administered was missing.
- 37. Signature of person administering medication/medical food was missing.
- 38. The plan was not followed or implemented.

- 39. The plan was not able to be implemented due to conflicting information.
- 40. None of the child care staff members trained in the procedures on the JFS 01236 were onsite when a child requiring the plan was present.
- 41. Child care staff members trained in the procedures on the JFS 01236 were not scheduled to be present the entire the time the child requiring the plan was onsite.
- 42. None of the child care staff members trained in the procedures on the JFS 01236 accompanied the child requiring the plan during a trip.
- 43. A child care staff member who had not been trained in the procedures on the JFS 01236 performed the procedure.
- 44. 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.

Provide staff training. 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: 12/28/2023

Low Risk Non-Compliances

Domain: 07 Diapering & Infant Care

Rule: 5101:2-12-23 Infant Bottle and Food Preparation

Code: The program is required to safely store, prepare, and serve formula, breast milk, and food.

<u>Finding</u>: During the inspection, it was determined that open containers of ready to serve food and concentrated formula was not stored appropriately as noted in number 4 below:

- 1. The food/formula was not covered;
- 2. The food/formula was not dated;
- The food/formula was not refrigerated according to the manufacturer's instructions;
- 4. The food/formula was not discarded or sent home daily if not used;
- 5. The food/formula was not refrigerated upon arrival;
- 6. The food/formula was not refrigerated immediately after preparation;
- 7. The food/formula was served beyond the expiration date;
- 8. The food/formula was not prepared prior to the manufacturer's instructions;
- 9. The food/formula was not prepared according to the instructions from the infant's physician, physician's assistant or certified nurse practitioner;
- 10. 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.

Domain: 10 Written Policies & Procedures

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

<u>Code</u>: 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.

<u>Finding</u>: 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 1 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: 12/28/2023

Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(s), If applicable |
|-----------------------------------|-----------|--|
| Rule: 5101:2-12-02 License Posted | Compliant | Documenting Statement: The license was in a location visible to parents as required. |
| | | |

| Rule | Status | Documenting Statement(s), If applicable |
|------|--------|---|

| 5101:2-12-02 Current Information | Compliant | |
|-------------------------------------|---------------------|---|
| Pula | Status | Decumenting Statement/s) If applicable |
| Rule 5101:2-12-03 Inspection | Status Compliant | Documenting Statement(s), If applicable |
| Requirements | Compilant | |
| Requirements | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Building Department | Compliant | |
| Inspection | | |
| 36.5.5.5 | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Fire Inspection | Compliant | Documenting Statement: Please Note: |
| , | ' | Documentation of a fire inspection |
| | | without any uncorrected violations must |
| | | be secured for the program. Secure a |
| | | new fire inspection by 10/9/24. |
| | | |
| Rule: 5101:2-12-04 Fire Inspection | Compliant | Documenting Statement: Although the |
| · | · | program had documentation of a current |
| | | fire inspection without any uncorrected |
| | | violations at the time of the licensing |
| | | inspection, the program did not have the |
| | | fire inspection completed within 12 |
| | | months from the date of the last fire |
| | | inspection without any uncorrected |
| | | violations. Please ensure that fire |
| | | inspections are completed in accordance |
| | | with the rule requirements. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Food Service | Compliant | Documenting Statement: The program |
| Requirements | | has obtained a food service exemption |
| | | status from the local health department. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-05 Denial, Revocation and | Compliant | |
| Suspension | | |
| Dula | Ctatus | Decumenting Chake we said a life well and |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-07 Administrator | Compliant | Documenting Statement: The |
| Qualifications | | administrator has completed the rules |
| | | review course. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| | | |

| 5101:2-12-07 Administrator Responsibilities/Requirements | Compliant | |
|--|-------------|--|
| responsibilities, requirements | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-07 Written Program | Compliant | Documenting Statement: During the |
| Policies and Procedures | | inspection, the requirements of the rule |
| | | regarding the program's written policies |
| | | and procedures were discussed. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-08 Medical Statement | Compliant | Documenting Statement: During the |
| Naie. 3101.2 12 00 Medical Statement | Compilation | inspection, the requirements of the rule |
| | | regarding staff medical statements were |
| | | discussed. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-08 Orientation | Compliant | Documenting Statement: On the day of |
| Training & Whistle Blower Protection | | the inspection, all child care staff |
| | | members had met orientation training requirements. |
| | | requirements. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-09 Background Check | Compliant | Documenting Statement: During the |
| Requirements | | inspection, the required documentation |
| | | regarding background checks was on file |
| | | for all employees listed. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-10 Health Training | Compliant | Documenting Statement: The program |
| Requirements | | had at least one Child Care Staff Member |
| | | with currently valid training in First Aid, |
| | | Management of Communicable Disease, |
| | | CPR, and Child Abuse Prevention present |
| | | and readily accessible during all hours of |
| | | operation. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-10 Professional | Compliant | Documenting Statement: At the time of |
| Development Requirements | - 3 | the inspection, all child care staff |
| | | members had completed the required |
| | | amount of professional development |
| | | training. |
| | | |
| | | |

| Rule | Status | Documenting Statement(s), If applicable |
|--------------------------------------|---------------------|--|
| 5101:2-12-11 Indoor Space | Compliant | 2 2 2 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Separation of Children | Compliant | |
| Under 2 1/2 Years | | |
| | l c | |
| Rule 5101:2-12-11 Outdoor Space | Status Compliant | Documenting Statement(s), If applicable |
| Requirements | Compliant | |
| Regulieries | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Equipment | Compliant | |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Fall Zones | Compliant | |
| | l | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Equipment | Compliant | |
| | | |
| | | |
| Rule: 5101:2-12-12 Safe Environment | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-12 Sale Environment | Compliant | Documenting Statement: Cleaning supplies were viewed stored out of the |
| | | reach of children. |
| | | Teach of children. |
| Rule: 5101:2-12-12 Safe Environment | Compliant | Documenting Statement: The indoor |
| | | temperature of the program during the |
| | | inspection was comfortable and met rule |
| | | compliance. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-13 Sanitary | Compliant | Documenting Statement: During the |
| Equipment and Environment | | inspection, the cleaning and sanitation of |
| , , | | items and toys mouthed by children were |
| | | discussed. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Handwashing | Compliant | |
| Requirements | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Smoke Free | Compliant | boothering otacement(3), it applicable |
| Environment | | |
| | <u> </u> | 1 |

| Rule | Status | Documenting Statement(s), If applicable |
|--------------------------------------|-----------|--|
| Rule: 5101:2-12-15 Child Medical and | Compliant | Documenting Statement: In review of |
| Enrollment Records | | 25% of the records, at the time of the |
| | | inspection, children's medical statements |
| | | were complete and on file, as required by |
| | | the rule. |
| | | |
| Rule: 5101:2-12-15 Child Medical and | Compliant | Documenting Statement: During the |
| Enrollment Records | | inspection, the requirements of the rule |
| | | regarding children's medical statements |
| | | and enrollments forms were discussed. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Medical, Dental, | Compliant | Documenting Statement: On the day of |
| and General Emergency Plan | | the inspection, the complete prescribed |
| | | JFS 01242 "Medical, Dental, and General |
| | | Emergency Plan For Child Care" were |
| | | posted in the program as required. |
| | | |
| D. J. | Chahara | Danis and in a Chatana and a life and include |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Emergency Drills | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 First Aid/Standard | Compliant | the state of the s |
| Precautions | ' | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Management of | Compliant | |
| Communicable Disease | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Incident/Injury | Compliant | |
| Reporting | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-17 Daily Schedule | Compliant | Documenting Statement: Daily schedules |
| | | were observed posted. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Materials and | Compliant | |
| Equipment | | |
| D 1 | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Outdoor Play | Compliant | |

| Designation. | _ | |
|-------------------------------------|------------|--|
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 License Capacity | Compliant | Documenting Statement: The program |
| , , | ' | was operating within their license |
| | | capacity limits. |
| | | capacity innits. |
| | | |
| Rule | Status | Decumenting Statement(s) If applicable |
| | | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 Ratio | Compliant | Documenting Statement: Staff/child |
| | | ratios observed during the inspection |
| | | were in compliance. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 Group Size | Compliant | Documenting Statement: Complete |
| | | transition agreements were verified in the |
| | | classrooms for children currently in |
| | | transition to a new group. |
| | | 0.11 |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 Attendance | Compliant | Documenting Statement: Child Care Staff |
| Records | Compilant | Members were observed recording the |
| Records | | attendance for each child upon arrival |
| | | · |
| | | and documenting each child's departure. |
| Rule: 5101:2-12-18 Attendance | Camarliant | Description Statements During the |
| | Compliant | Documenting Statement: During the |
| Records | | inspection, the requirements of the rule |
| | | regarding attendance records were |
| | | discussed. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Supervision | Compliant | |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Child Guidance | Compliant | |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-20 Cots and Napping | Compliant | Documenting Statement: Cots were |
| | | placed appropriately and safely during |
| | | nap time. |
| | | , |
| | - | , |
| Rule | Status | Documenting Statement(s), If applicable |
| | - 30.000 | |

| Rule: 5101:2-12-20 Cribs | Compliant | Documenting Statement: Cribs were |
|--------------------------------------|-----------|--|
| Nuie. 5101.2 12 20 Ci 103 | Compilant | separated from the play space by a safe |
| | | and sturdy and physical barrier. |
| | | aliu Sturuy aliu pilysical partier. |
| Rule: 5101:2-12-20 Cribs | Compliant | Documenting Statement: All cribs were |
| | | labeled with the assigned infant's name. |
| | | labeled with the assigned infance hame. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Meal and Snack | Compliant | |
| Requirements | | |
| 2.1 | I a | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Fluid Milk Requirements | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Safe Food | Compliant | |
| Handling/Storage | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-23 Infant Daily Care | Compliant | Documenting Statement: During the |
| | | inspection, the requirements of the rule |
| | | regarding infant daily care were |
| | | discussed. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Diapering and Toilet | Compliant | |
| Training | Compilant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-25 Medication | Compliant | |
| Administration | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-08 Child Care Staff | Compliant | Documenting Statement: All Child Care |
| Member Educational Requirements | | Staff Members had verification of |
| | | educational requirements on file at the |
| | | program. |
| | | |
| | | |
| | | |