

# **Center Complaint Inspection Summary 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					
Maple Heights Creative Playrooms	2180017416	Child Care Center				
Address	County					
16574 Broadway Avenue Maple Heights O	CUYAHOGA					

Inspection Information							
Inspection Type			Inspection Scope		Inspection Notice		
Complaint			Partial		Unannounced		
Reviewer(s) PATRICIA REMINGTON Inspection		n Day	Begir	n Time	End Time		
		05/03/20	22	11:00 AM		2:15 PM	
Summary of Findings							
No. Rules Verified	No. Rules with Non-cor	mpliances No. Serious Risl			No. Moderate Risk	No. Low Risk	
12	6		0		3	3	

Staff-Child Ratios at the Time of Inspection						
Group	Age Group/Range	Ratio Observed	Comment			
Infant	0 to < 12 months	2 to 6				
Toddler 1 & 2 Combined	18 months to < 30 months	2 to 11				
Preschool	3 years to < 4 years	1 to 8				
Pre-K	4 years to < 5 years	1 to 16	Teacher left the			
			room			
School Age	School-Age to < 11 years	2 to 17				



## **Complaint Allegations**

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.

#### 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.

Allegation: Center is out of ratio

**Determination**: Substantiated

Findings: During the inspection, required staff/child ratios were not maintained for different groups on multiple occasions, as noted below:

The ratio determined for the Toddler group was 1 Child Care Staff Member(s) for 13 children. Additionally, a ratio of 1 Child Care Staff Member(s) for 16 children was determined for the Pre-K group.

Additional 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.

Risk Level: Moderate

Corrective Action Plan Due: 06/11/2022

#### Domain:01 Ratio & Supervision

Rule: 5101:2-12-19 Supervision

Code: The program staff is required to supervise children in their assigned group by sight and hearing. Supervision includes being near enough to respond and reach children immediately and protecting them from harm.

Allegation: Toddlers left the classroom and were unsupervised.

Determination: Substantiated

Findings: During the inspection, it was determined that children were left unattended while inside the program as noted in number(s) 3 below:

- 1. Child(ren) were left unattended once.
- 2. Child(ren) were left unattended more than once.
- 3. Child(ren) left the group and were unattended. When a teacher walked out of the classroom and left 1 teacher with 13 toddlers, some of the children left the room and walked up the stairs.
- 4. Child care staff were using a baby monitor to supervise children.
- 5. Child care staff were using a walkie talkie to supervise children.
- 6. Child care staff were using mirrors to view children in another room.
- 7. Child care staff were using a video camera instead of physically being present in the room.
- 8. Other [ ].

Children must be supervised and within sight and hearing of a child care staff member at all times. 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.

Risk Level: Moderate

Corrective Action Plan Due: 06/11/2022

#### 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.

Allegation: Adults in the building without a profile in OPR.

Determination: Substantiated

Findings: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 1 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.

Risk Level: Low

Corrective Action Plan Due: 06/11/2022

## **Summary of Additional Non-Compliances**

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

#### **Moderate Risk Non-Compliances**

## **Domain:08 Staff Files**

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

Code: The program is required to have all staff request background checks as required.

Findings: In review of the staff records, it was determined that background checks were not requested for the person(s) listed on the Employee Record Chart as noted in number(s) 1 below:

- 1. Submitting the request for a background check for child care in the OPR.
- 2. Submitting fingerprints electronically according to the process established by BCI.

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

Corrective Action Plan Due: 06/11/2022

# **Low Risk Non-Compliances**

## Domain:05 Health & Safety

Rule: 5101:2-12-16 Incident/Injury Reporting

Code: The program is required to complete the JFS 01299 "Incident/Injury Report" for injuries and incidents at the program.

Findings: During the inspection, it was determined that a JFS 01299 "Incident/Injury Report" was not completed by child care staff for the situation(s) listed in number(s) 4 below:

- 1. A child became ill or received an injury which required first aid treatment.
- 2. A child was transported for emergency medical care.
- 3. A child received a bump or blow to the head.
- 4. An unusual or unexpected incident which jeopardized the safety of a child or employee of a program.

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: 06/11/2022

#### Domain:08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to be completed and on file at the program.



Findings: In review of the staff records, it was determined a completed medical examination statement for the employee(s) listed on the Employee Record Chart was not on file, as required by this rule. Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/11/2022