

# **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 <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 Deta            | ils             |     |                   |
|-------------------------------|-------------------------|-----------------|-----|-------------------|
| Program Name                  | Program Number          |                 | Pro | gram Type         |
| Jireh Learning Center         | 2180017623              |                 | Chi | ld Care Center    |
|                               |                         |                 |     |                   |
| Address                       |                         |                 | Cou | unty              |
| 7724 Detroit avenue CLEVELAND |                         |                 | CU  | YAHOGA            |
| ОН                            |                         |                 |     |                   |
| 44102                         |                         |                 |     |                   |
|                               |                         |                 |     |                   |
| Building Approval Date        | Use Group/Code          | Occupancy Limit |     | Maximum Under 2 ½ |
|                               |                         |                 |     |                   |
| Fire Inspection Approval Date | Food Service Risk Level |                 |     |                   |
| 02/21/2024                    | Level II                |                 |     |                   |
|                               |                         |                 |     |                   |

| Inspection Information     |                                |                  |                                  |              |
|----------------------------|--------------------------------|------------------|----------------------------------|--------------|
| Inspection Type<br>Annual  | Inspection<br>Full             | Scope            | Inspection Notice<br>Unannounced |              |
| Inspection Date 12/18/2024 | Begin Time<br>3:00 PM          |                  | End Time<br>4:00 PM              |              |
| Inspection Date 12/19/2024 | Begin Time<br>9:00 AM          |                  | End Time<br>12:30 PM             |              |
| Reviewer:<br>ELAINE OBRIEN |                                |                  |                                  |              |
| Reviewer:<br>ELAINE OBRIEN |                                |                  |                                  |              |
| Summary of Findings        |                                |                  |                                  |              |
| No. Rules Verified         | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk                | No. Low Risk |
| 58                         | 3 0 0 3                        |                  |                                  |              |

| 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     |
| Total Under 2 ½ Years                                     | 0                | 0          | 0         | 0     |
| Older Toddler   |                  | 0          | 0         | 0     |
| Preschool   |                  | 15         | 15        | 30    |
| School Age  |                  | 0          | 24        | 24    |
| Total Capacity/Enrollment                                 | 67               | 15         | 39        | 54    |



| Staff-Child Ratios at the Time of Inspection |                          |                |                 |  |
|--|--------------------------|----------------|-----------------|--|
| Group  | Age Group/Range          | Ratio Observed | Comment         |  |
| PS 2   | 3 years to < 4 years     | 1 to 7         | Day 2           |  |
| PS 2   | 30 months to < 36 months | 1 to 8         | Day one         |  |
| PS 1   | 3 years to < 4 years     | 2 to 11        | Day 2           |  |
| PS 1   | 3 years to < 4 years     | 1 to 8         | Day one         |  |
| SA   | School-Age to < 11 years | 1 to 5         | Day one Arrival |  |
| SA   | School-Age to < 11 years | 1 to 6         | Day one         |  |
|  | New 1829                 |                | Programming     |  |

# **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   |   |  |
|---|---|--|
| No Moderate Risk Non-Compliances were observed during this inspection |   |  |
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## **Low Risk Non-Compliances**

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Sanitary Equipment and Environment

Code: The program is required to follow the cleaning schedule for equipment.

<u>Finding</u>: During the inspection, it was determined that the program was not providing a clean and healthy environment, furniture, materials and equipment as required by Appendix A, as noted in number(s) 30 below:

- 1. Item(s) soiled with blood or bodily fluids were not cleaned/sanitized immediately.
- 2. Blankets/sheets were not cleaned weekly, when soiled, or before use by another child.
- 3. Children's individual blankets and belongings were stored in an unsanitary manner.
- 4. Bottles, bottle caps, nipples and other equipment used for bottle feeding were not cleaned and sanitized in a dishwasher or by washing, rinsing, and boiling for one minute.
- 5. Carpets were not vacuumed weekly or cleaned when soiled.
- 6. Changing table/pad was not sanitized after each use or cleaned when visibly soiled.
- 7. Reusable cloths were not being washed daily or when visibly soiled.
- 8. Cots/Pads/Mats were not cleaned and sanitized before assigning to a different child, when used by a sick child, when soiled or at least every three months.
- 9. Cribs were not cleaned and sanitized monthly, or when soiled, or before use by another child.
- 10. Diaper Receptables were not cleaned and sanitized daily or more frequently as needed to eliminate odor.
- 11. Dishes/Cups/Silverware were not cleaned and sanitized after each use.
- 12. Water Containers were not labeled with the child's name, or were not cleaned and sanitized before use again on another day.
- 13. Dividers were not cleaned when visibly soiled.
- 14. Dress up clothes and hats (dramatic play) were not cleaned monthly or when soiled.
- 15. Floors were not cleaned weekly or when soiled.
- 16. The food prep area, including sinks, were not cleaned before and after preparing food (including bottle preparation) or between preparing raw or cooked food.
- 17. Potty chairs were not cleaned after each use, rinsed with water, cleaned and sanitized or contents were not emptied into a toilet.
- 18. Food tables, highchair trays were not cleaned before and after each use.
- 19. Tables used for play were not cleaned when visibly soiled or sanitized daily.
- 20. Toilet bowls were not cleaned when visibly soiled or sanitized weekly.
- 21. Toilet seat(s), handle(s) and hand washing sink(s) were not cleaned when visibly soiled or sanitized daily.
- 22. Mouthed toys were not cleaned and sanitized after each child's use.
- 23. Toys, other than those mouthed by children, were not cleaned monthly or when visibly soiled.
- 24. Washable furniture, including fabrics on infant equipment, were not cleaned weekly or when soiled.
- 25. Upholstered furniture was not steam cleaned when soiled.
- 26. Slip covers were not washed at least every six months or when soiled.
- 27. Wastebaskets/rinse buckets, including lids, were not being emptied daily or cleaned and sanitized when visibly soiled.
- 28. The manufacturer's directions for the cleaning product were not followed.



- 29. The solution used for sanitizing was not a commercial product registered by the United States Environmental Protection Agency as a sanitizer.
- 30. Other The bleach and water mixture was not made daily.

Furniture, materials and equipment must be maintained according to the cleaning and sanitizing schedule in Appendix A to this rule. 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: 08 Staff Files**

Rule: 5101:2-12-08 Medical Statement

Code: The program staff's medical statements are required to be completed and on file at the program.

<u>Finding</u>: In review of the staff records, it was determined that the medical statements for the employees listed on the Employee Record Chart did not meet the requirements as listed in numbers 5a and c below.

- 1. A medical statement was not on file for at least one employee;
- 2. The medical statement(s) on file did not have a date of examination within 12 months of the employee'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 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);
- 6. Tuberculosis (TB) screening/test information was missing:
- 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 6a.
- 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: 01/18/2025



#### **Domain: 08 Staff Files**

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

<u>Code</u>: 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.

<u>Finding</u>: 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(s) 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: 01/18/2025

### 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. |
| Dula                              | Chatus    | Desumenting Statement(s) If applicable   |

| Rule                             | Status    | Documenting Statement(s), If applicable |
|----------------------------------|-----------|---|
| 5101:2-12-02 Current Information | Compliant |   |



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|-------------------------------------|-------------|---|
|                                     |             |   |
|                                     |             |   |
| Rule                                | Status      | Documenting Statement(s), If applicable   |
| 5101:2-12-03 Inspection             | Compliant   |   |
| Requirements                        |             |   |
|                                     |             |   |
| Rule                                | Status      | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-04 Building         | Compliant   | Documenting Statement: A copy of the  |
| Department Inspection               |             | certificate of occupancy was available on-  |
| Pi 20                               |             | site for review.  |
|                                     |             |   |
|                                     |             |   |
| Rule                                | Status      | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-04 Fire Inspection  | Compliant   | Documenting Statement: Please Note:   |
|                                     | 1           | Documentation of a fire inspection  |
|                                     |             | without any uncorrected violations must   |
|                                     |             | be secured for the program. Secure a  |
|                                     |             | new fire inspection by February 28, 2025.   |
|                                     |             | 1.000 1.100 1 |
| 1                                   | J.          |   |
| Rule                                | Status      | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-04 Food Service     | Compliant   | Documenting Statement: The food service   |
| Requirements                        | smandy-same | license was observed posted. Following is   |
| 1.54a 5.1.5.1.5                     |             | the audit number and date of expiration:  |
|                                     |             | DDOD D2XPW3 Expires March 1, 2024.  |
|                                     |             | DD DD DZAL WO EXPINES WATER 1, 202 H  |
|                                     | 1           |   |
| Rule                                | Status      | Documenting Statement(s), If applicable   |
| 5101:2-12-07 Administrator          | Compliant   | 3 (7/ 1)  |
| Qualifications                      | Sompliant   |   |
|                                     | 1           |   |
| Rule                                | Status      | Documenting Statement(s), If applicable   |
| 5101:2-12-07 Administrator          | Compliant   | Decamenting statement(e); it approaches   |
| Responsibilities/Requirements       | Compilant   |   |
|                                     | 1           |   |
| Rule                                | Status      | Documenting Statement(s), If applicable   |
| 5101:2-12-07 Written Program        | Compliant   | becamerting statement(s), if applicable   |
| Policies and Procedures             | Compliant   |   |
| 1 officies and 1 foccuutes          | I           |   |
| Rule                                | Status      | Documenting Statement(s), If applicable   |
| 5101:2-12-08 Orientation Training & | Compliant   | Documenting Statement(s), if applicable   |
| Whistle Blower Protection           | Compliant   |   |
| willstie blower Frotection          | I .         |   |
| Pulo                                | Ctatus      | Desumenting Statement(s) If a will all  |
| 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 anyline  -    |
|--|--|---|
| 5101:2-12-10 Health Training   | - Company and Comp | Documenting Statement(s), If applicable   |
|  | Compliant  |   |
| Requirements   | 1  |   |
| Dula   | Chatina  | Designmenting Statements of Smillimble    |
| Rule   | Status   | Documenting Statement(s), If applicable   |
| 5101:2-12-11 Indoor Space  | Compliant  |   |
| Requirements   | 1  |   |
| D.I.   | C  | D .: C:/ \ If I: II                       |
| Rule   | Status   | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-11 Outdoor Space   | Compliant  | Documenting Statement: The quarterly      |
| Requirements   |  | playground inspections were completed     |
|  |  | and documented, as required. The most     |
|  |  | recent inspection report form was dated   |
|  |  | October 2024.                             |
|  |  |   |
| Dula   | Ctatus   | Decumenting Ct-t                          |
| Rule   | Status   | Documenting Statement(s), If applicable   |
| 5101:2-12-12 Safe Equipment  | Compliant  |   |
|  | 1  |   |
| Rule   | Status   | Documenting Statement(s), If applicable   |
| 5101:2-12-12 Safe Environment  | Compliant  | bocumenting statement(s), it applicable   |
| 3101.2 12 12 3aic Environment  | Compilant  |   |
|  |  |   |
| Rule   | Status   | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-13 Handwashing   | Compliant  | Documenting Statement: Children were      |
| Requirements   |  | viewed washing their hands, as required   |
| The state of the s |  | by the rule.                              |
|  |  | Section and the section of                |
|  | 1  |   |
| Rule   | Status   | Documenting Statement(s), If applicable   |
| 5101:2-12-13 Smoke Free  | Compliant  |   |
| Environment  |  |   |
|  |  |   |
| Rule   | Status   | Documenting Statement(s), If applicable   |
| 5101:2-12-14 Transportation and Field  | Compliant  |   |
| Trip Procedures  |  |   |
|  | •  |   |
| Rule   | Status   | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-14 Transportation -  | Compliant  | Documenting Statement: The driver(s)      |
| Driver Requirements  |  | had completed the required ODJFS driver   |
|  |  | training.                                 |
|  |  |   |
|  | *  |   |
| Rule   | Status   | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-14 Transportation -  | Compliant  | Documenting Statement: An annual          |
| Vehicle Requirements   |  | safety check of the vehicle(s), using the |
|  |  | JFS 01230 "Vehicle Inspection Report For  |
|  | E  | I I                                       |



|  |                     | Child Care Centers" form, was verified and dated June 11, 2024.   |
|--|---------------------|---|
| Rule   | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-15 Child Medical and<br>Enrollment Records           | Compliant           | bocamenting statement(s), it applicable   |
|  |                     |   |
| Rule: 5101:2-12-15 Medical/Physical                            | Status              | Documenting Statement(s), If applicable  Documenting Statement: The program   |
| Care Plans   | Compliant           | had current information on the medical status and the required treatment plan for the children with health conditions.  |
|  |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan | Compliant           | Documenting Statement: On the day of<br>the inspection, the complete prescribed<br>JFS 01242 "Medical, Dental, and General<br>Emergency Plan For Child Care" were<br>posted in the program as required. |
|  |                     |   |
| Rule 5101:2-12-16 Emergency Drills                             | Status<br>Compliant | Documenting Statement(s), If applicable   |
|  |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-16 First Aid/Standard<br>Precautions                 | Compliant           |   |
|  |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Management of Communicable Disease          | Compliant           | Documenting Statement: The JFS 08087 "Communicable Disease Chart" was posted and was readily available to staff and parents.  |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| 5101:2-12-16 Incident/Injury<br>Reporting                      | Compliant           | Documenting Statement(s), if applicable   |
| Pula   | Chatus              | Documenting Statement(s) If a reliable  |
| Rule<br>5101:2-12-17 Daily Schedule                            | Status<br>Compliant | Documenting Statement(s), If applicable   |
|  |                     |   |
| Rule<br>5101:2-12-17 Materials and<br>Equipment                | Status<br>Compliant | Documenting Statement(s), If applicable   |



| Rule                                 | Status    | Documenting Statement(s), If applicable                                 |
|--------------------------------------|-----------|---|
| 5101:2-12-17 Daily Outdoor Play      | Compliant |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable                                 |
| 5101:2-12-18 License Capacity        | Compliant | Documenting Statement(s), if applicable                                 |
| 5101.2 12 10 Electrise capacity      | Compilant |   |
| -                                    | <u>,</u>  |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable                                 |
| Rule: 5101:2-12-18 Ratio             | Compliant | Documenting Statement: The Appendix A                                   |
|                                      |           | "Staff/Child Ratios, Age Grouping and                                   |
|                                      |           | Maximum Group Size" was posted in a                                     |
|                                      |           | noticeable area at the program as                                       |
|                                      |           | required.   |
| Rule: 5101:2-12-18 Ratio             | Compliant | Documenting Statement: Staff/child                                      |
| 1                                    |           | ratios observed during the inspection                                   |
|                                      |           | were in compliance.   |
|                                      |           | •   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable                                 |
| 5101:2-12-18 Group Size              | Compliant |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable                                 |
| 5101:2-12-18 Attendance Records      | Compliant |   |
|                                      | ,         |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable                                 |
| 5101:2-12-19 Supervision             | Compliant |   |
| L                                    |           |   |
| 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.   |
|                                      |           | nap time.   |
|                                      | 1         | -   |
| Rule                                 | Status    | Documenting Statement(s), If applicable                                 |
| 5101:2-12-22 Meal and Snack          | Compliant |   |
| Requirements                         |           |   |
|                                      | T         |   |
| 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                     | 3         |   |
|                                      | 187       | *                                       |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-23 Diapering and     | Compliant | Documenting Statement: Appropriate      |
| Toilet Training                      |           | diaper changing procedures were         |
|                                      |           | observed during the inspection in PS 2  |
|                                      |           | room(s).                                |
|                                      |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-25 Medication              | Compliant |   |
| Administration                       | *         |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-08 Child Care Staff Member | Compliant |   |
| Educational Requirements             |           |   |
|                                      |           |   |
| Rule                                 | Status    | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Written Disaster  | Compliant | Documenting Statement: Annual training  |
| Plan                                 |           | of the written disaster plan was        |
|                                      |           | completed by staff.                     |
|                                      |           |   |