



## 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<br>Primrose School of Broadview Heights         | Program Number<br>2180018861         | Program Type<br>Child Care Center |                   |
| Address<br>1200 W. Royalton Rd Broadview Heights<br>OH 44147 |                                      | County<br>CUYAHOGA                |                   |
| Building Approval Date<br>10/30/2018                         | Use Group/Code<br>E                  | Occupancy Limit<br>270            | Maximum Under 2 ½ |
| Fire Inspection Approval Date<br>09/25/2023                  | Food Service Risk Level<br>Level III |                                   |                   |

| Inspection Information        |                          |                                  |
|-------------------------------|--------------------------|----------------------------------|
| Inspection Type<br>Annual     | Inspection Scope<br>Full | Inspection Notice<br>Unannounced |
| Inspection Date<br>10/19/2023 | Begin Time 8:45 AM       | End Time 1:29 PM                 |
| Reviewer:<br>MARY WOODLAND    |                          |                                  |

| Summary of Findings      |                                     |                       |                        |                   |
|--------------------------|-------------------------------------|-----------------------|------------------------|-------------------|
| No. Rules Verified<br>58 | No. Rules with Non-compliances<br>6 | No. Serious Risk<br>0 | No. Moderate Risk<br>1 | No. Low Risk<br>5 |

| 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)                                 |                  | 22         | 0         | 22    |
| Young Toddler   |                  | 28         | 3         | 31    |
| <b>Total Under 2 ½ Years</b>                              | 60               | 50         | 3         | 53    |
| Older Toddler   |                  | 19         | 3         | 22    |
| Preschool   |                  | 65         | 12        | 77    |
| School Age  |                  | 9          | 38        | 47    |
| <b>Total Capacity/Enrollment</b>                          | 216              | 93         | 53        | 199   |

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



|                   |                          |         |                     |
|-------------------|--------------------------|---------|---------------------|
| Early Preschool 2 | 30 months to < 36 months | 2 to 12 | At Arrival          |
| Early Preschool 2 | 30 months to < 36 months | 2 to 13 | During Outdoor Play |
| Early Preschool 2 | 30 months to < 36 months | 2 to 13 | At Lunch            |
| Young Infants     | 0 to < 12 months         | 2 to 5  | At Arrival          |
| Young Infants     | 0 to < 12 months         | 2 to 7  | 2nd                 |
| Middle Infants    | 12 months to < 18 months | 2 to 7  | At Arrival          |
| Middle Infants    | 12 months to < 18 months | 2 to 8  | 2nd                 |
| Older Infant      | 12 months to < 18 months | 2 to 6  | At Arrival          |
| Older Infant      | 12 months to < 18 months | 2 to 10 | 2nd                 |
| Toddlers          | 18 months to < 30 months | 2 to 10 | At Arrival          |
| Toddlers          | 18 months to < 30 months | 3 to 10 | During Activities   |
| Early Preschool 1 | 30 months to < 36 months | 3 to 12 | At Arrival          |
| Early Preschool 1 | 30 months to < 36 months | 3 to 13 | During Activities   |
| Preschool 1       | 3 years to < 4 years     | 2 to 16 | At Arrival          |
| Preschool 1       | 3 years to < 4 years     | 2 to 17 | At Lunch            |
| Preschool 2       | 3 years to < 4 years     | 2 to 15 | At Arrival          |
| Preschool 2       | 3 years to < 4 years     | 2 to 16 | At Lunch            |
| Pre-K 1           | 4 years to < 5 years     | 2 to 13 | At Arrival          |
| Pre-K 1           | 4 years to < 5 years     | 2 to 14 | At Lunch            |
| Pre-K 2           | 4 years to < 5 years     | 2 to 13 | At Arrival          |
| Pre-K 2           | 4 years to < 5 years     | 2 to 15 | During Outdoor Play |
| Pre-K 2           | 4 years to < 5 years     | 2 to 15 | At Lunch            |
| Explorers (SA)    | School-Age to < 11 years | 1 to 9  | At Arrival          |
| Explorers (SA)    | School-Age to < 11 years | 1 to 9  | At Lunch/Activities |

### 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**



### Moderate Risk Non-Compliances

#### 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 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.

Finding: 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(s) 18 below:

1. No plan was on file.

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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.

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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.
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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 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: 11/18/2023

### Low Risk Non-Compliances

#### Domain: 02 Safe & Sanitary Environment

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

Code: The program is required to provide equipment and materials that are easy to clean.



**Finding:** During the inspection, it was determined that at least one piece of equipment, furnishings, or material at the program was not constructed of materials to facilitate cleaning as noted in number(s) 1; 5 below:

1. The material had a tear.
2. The material was not washable.
3. The material was porous.
4. The surface was cracked.
5. The surface was repaired, but in a manner that still did not facilitate cleaning.
6. Other [ ].

Equipment, furnishings, and furniture shall be constructed of materials to facilitate cleaning. 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:** 5101:2-12-22 Fluid Milk Requirements

**Code:** The program is required to serve age-appropriate fluid milk or obtain written documentation when serving substitutions for fluid milk.

**Finding:** During the inspection, it was determined that required documentation for substitutions for fluid milk was not on file as noted in number(s) 3 below:

1. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when infants up to 12 months of age are served anything other than formula or breast milk.
2. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when infants and toddlers 12 months of age up to 24 months of age are served anything other than unflavored whole homogenized vitamin D fortified cow's milk, breast milk, or non-cow milk substitution that is nutritionally equivalent to milk.
3. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when toddlers and children 24 months of age and older are served anything other than unflavored one per cent milk that is vitamin A and D fortified, unflavored fat free or skim milk that is vitamin A and D fortified, or non-cow milk substitutions that are nutritionally equivalent to milk.
4. Written parental consent for non-cow milk substitutions that are nutritionally equivalent to milk for children 12 months of age and older.
5. The program did not have the type of milk on-site to ensure that all children were served age-appropriate fluid milk.

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 number(s) 12 below:

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 not required at this time.

**Domain: 08 Staff Files**





**Rule: 5101:2-12-10 Health Training Requirements**

**Code:** The program is required to have all child care staff members complete training in child abuse and neglect recognition and prevention within sixty days of hire. Staff must complete training in first aid and CPR within the first ninety days of hire.

**Finding:** In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in number(s) 4 below:

1. Child abuse and neglect recognition and prevention training was not completed within sixty days of hire.
2. First aid training was not completed within ninety days of hire.
3. Cardiopulmonary resuscitation (CPR) training was not completed within ninety days of hire.
4. The child abuse and neglect recognition and prevention training was expired.
5. The first aid training was expired.
6. The CPR training was expired.

Refer to the Employee Record Chart for the name(s) of the child care staff member(s) who must complete the required health and safety training(s). Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/18/2023

**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.

**Finding:** 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 number(s) 2; 5a; 5b; 5c 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: 11/18/2023

### Rules In-Compliance/Not Verified

| Rule  | Status    | Documenting Statement(s), If applicable   |
|---|-----------|---|
| 5101:2-12-02 License Posted                 | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-02 Current Information            | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-03 Inspection Requirements        | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-04 Building Department Inspection | Compliant |   |
| 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 9/25/24. |
| Rule  | Status    | Documenting Statement(s), If applicable   |





| 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: AAXD-CNMJ27 and 3/1/24.         |
|---|-----------|--|
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-07 Administrator Qualifications                     | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-07 Administrator Responsibilities/Requirements      | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-07 Written Program Policies and Procedures          | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-08 Orientation Training & Whistle Blower Protection | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-09 Background Check Requirements              | Compliant | Documenting Statement: During the 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 Professional Development Requirements      | Compliant | Documenting Statement: At the time of 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 Requirements                        | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-11 Separation of Children Under 2 1/2 Years         | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-11 Outdoor Space Requirements                 | Compliant | Documenting Statement: The quarterly playground inspections were completed   |



|   |           | and documented, as required. The most recent inspection report form was dated 9/8/23.   |
|---|-----------|---|
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-11 Outdoor Play Equipment                         | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-11 Outdoor Play Fall Zones                  | Compliant | Documenting Statement: The protective material used under outdoor equipment was artificial turf.  |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-12 Safe Equipment                                 | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-12 Safe Environment                               | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-13 Handwashing Requirements                       | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-13 Smoke Free Environment                         | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-14 Transportation and Field Trip Procedures | Compliant | Documenting Statement: The program uses the ODJFS sample trip permission form for routine/field trips to secure written permission from parents or guardians. |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-14 Transportation - Driver Requirements     | Compliant | Documenting Statement: The driver(s) had completed the required ODJFS driver training.  |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-14 Transportation - Vehicle Requirements    | Compliant | Documenting Statement: An annual safety check of the vehicle(s), using the JFS 01230 "Vehicle Inspection Report For   |



|  |           | Child Care Centers" form, was verified for the Ford Bus VIN 9443 and dated 4/20/23.   |
|--|-----------|---|
| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-15 Child Medical and Enrollment Records        | Compliant | Documenting Statement: In review of 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   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan | Compliant | Documenting Statement: On the day of the inspection, the complete prescribed JFS 01242 "Medical, Dental, and General Emergency Plan For Child Care" were posted in the program as required. |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Emergency Drills                            | Compliant | Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.  |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-16 Management of Communicable Disease                | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-16 Incident/Injury Reporting                         | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Written Disaster Plan                       | Compliant | Documenting Statement: Annual training of the written disaster plan was completed by staff.   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-17 Daily Schedule                                    | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-17 Materials and Equipment                           | Compliant |   |





| 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 |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-18 Ratio                             | Compliant |  |
| 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 |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-19 Child Guidance                    | Compliant |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-20 Cots and Napping                  | Compliant |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-20 Cribs                       | Compliant | Documenting Statement: All cribs were labeled with the assigned infant's name.                                     |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-22 Meal and Snack Requirements | Compliant | Documenting Statement: Meals served at the program included foods from the four food groups in sufficient amounts. |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-22 Safe Food Handling/Storage        | Compliant |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-23 Infant Daily Care                 | Compliant |  |



|   |           |  |
|---|-----------|--|
|   |           |  |
| Rule  | Status    | Documenting Statement(s), If applicable                      |
| Rule: 5101:2-12-23 Infant Bottle and Food Preparation         | Compliant | Documenting Statement: All bottles were labeled as required. |
| Rule  | Status    | Documenting Statement(s), If applicable                      |
| 5101:2-12-23 Diapering and Toilet Training                    | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable                      |
| 5101:2-12-25 Medication Administration                        | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable                      |
| 5101:2-12-08 Child Care Staff Member Educational Requirements | Compliant |  |