

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 Det | ails | | |
|-----------------------------------|----------------|-------------------------|--------------------|--|
| Program Name | Program Number | | Program Type | |
| All Star Learning Center | 2180018950 | | Child Care Center | |
| Address 3654 w.117th cleveland | I | | County CUYAHOGA | |
| OH 44111 | | | COTATIONA | |
| | | | | |
| Building Approval Date 08/10/2022 | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ | |
| Fire Inspection Approval Date | | Food Service Risk Level | | |
| 05/09/2023 | Level III | | | |

| Inspection Information | | | | |
|----------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type | Inspection Sc | оре | Inspection Notice | |
| Annual | Full | | Unannounced | |
| Inspection Date 09/27/2023 | Begin Time 8 | :30 AM | End Time 11:00 AM | |
| Reviewer: | | | <u> </u> | |
| Akeea Nelson | | | | |
| Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58 | 5 | 0 | 2 | 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) | | 4 | 0 | 4 |
| Young Toddler | | 7 | 0 | 7 |
| Total Under 2 ½ Years | 27 | 11 | 0 | 11 |
| Older Toddler | | 1 | 0 | 1 |
| Preschool | | 11 | 0 | 11 |
| School Age | | 0 | 9 | 9 |
| Total Capacity/Enrollment | 51 | 12 | 9 | 32 |

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

| Infants | 0 to < 12 months | 1 to 3 | Arrival Ratio |
|----------------------|--------------------------|--------|-------------------|
| Infants | 0 to < 12 months | 1 to 3 | Departure Ratio |
| Toddlers | 18 months to < 30 months | 1 to 7 | Departure Ratio |
| Preschool/School age | 3 years to < 4 years | 1 to 8 | Arrival Ratio- |
| | | | Combined with |
| | | | infants, toddlers |
| | | | preschool, and |
| | | | school-age |
| | | | children. |
| Preschool/School age | 3 years to < 4 years | 1 to 7 | Departure Ratio- |
| | | | 1 school-age |
| | | | child. |

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: 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.

<u>Finding</u>: During the inspection, it was determined that children were left unattended while inside the program as noted in number(s) 2 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.
- 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.

Corrective Action Plan Due: 10/27/2023

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.

<u>Finding</u>: During the inspection, a ratio of 1 child care staff member(s) for 8 children was determined to have occurred for the infant/toddler/preschool/school-age group when the situation in number(s) 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: 10/27/2023

Low Risk Non-Compliances

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

<u>Code</u>: The program is required to maintain a record of the arrival and departure of each child. The program is also required to retain the original attendance record at the center for a period of one year.

<u>Finding</u>: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number(s) 2 below:

- 1. No attendance record was being maintained.
- 2. The attendance record was not being consistently completed.
- 3. The record did not include the name of at least one child.
- 4. The record did not include the birth date of at least one child.
- 5. The record did not include the assigned group.
- 6. The record did not include the child's weekly schedule.
- 7. The record did not include the time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.
- 8. The original attendance record was not kept at the program for a period of one year.

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

Corrective Action Plan Due: 10/27/2023

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(s) 2 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: 10/27/2023

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 | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Building Department | Compliant | |
| Inspection | | |
| | | |
| 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 5/9/24. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| | | |
| Rule: 5101:2-12-04 Food Service | Compliant | Documenting Statement: The food service |
| Requirements | | license was observed posted. Following is |
| | | the audit number and date of expiration: |
| | | ASNR-CPZQPY 3/1/24. |
| | | ASINK-CPZQP1 3/1/24. |
| | | |
| Rule | Status | Decumenting Statement/s) If applicable |
| | | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator | Compliant | |
| Qualifications | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator | Compliant | |
| Responsibilities/Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| | | |
| Rule: 5101:2-12-07 Written Program | Compliant | Documenting Statement: No changes |
| Policies and Procedures | | have been made to the written policies |
| | | and procedures since it was last approved |
| | | by this Department. |
| | | by this separational |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Medical Statement | Compliant | |
| 3101.2-12-08 Wiedical Statement | Compilant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Orientation Training & | Compliant | Bocamenting Statement(3), it applicable |
| _ | Compliant | |
| Whistle Blower Protection | | |
| Dula | Chahara | Danisant' Ciri (A) (Ciri |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-09 Background Check | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-10 Health Training | Compliant | |
| Requirements | | |
| Requirements | | |
| Pulo | Status | Documenting Statementic) If applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-10 Professional | Compliant | |
| Development Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| | | |

| Rule 5101:2-12-11 Separation of Children | Status Compliant | Documenting Statement(s), If applicable |
|-------------------------------------------------------|---------------------|-----------------------------------------------------------------------------|
| Under 2 1/2 Years | Compilant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Space Requirements | Compliant | Documenting Statement: The quarterly playground inspections were completed |
| , requirements | | and documented, as required. The most |
| | | recent inspection report form was dated |
| | | 7/5/23. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Equipment | Compliant | |
| Rule | Status | Decumenting Statement(s) If applicable |
| 5101:2-12-11 Outdoor Play Fall Zones | Compliant | Documenting Statement(s), If applicable |
| STOTIZ TZ TT Gutdoor Flay Fall Zories | Сотграни | |
| 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 |
| Rule: 5101:2-12-13 Sanitary Equipment and Environment | Compliant | Documenting Statement: On the day of the inspection, the program provided a |
| Equipment and Environment | | clean environment in accordance with |
| | | Appendix A of this rule, which included |
| | | the furniture, materials and equipment. |
| | <u> </u> | |
| 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 | |
| Environment | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Tidio | Julia | bodamenting statement(s), it applicable |

| D 1 5404 2 42 44 To 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | Carallant | December 11 Challes and The constant |
|---------------------------------------------------------|-----------|------------------------------------------|
| Rule: 5101:2-12-14 Transportation and | Compliant | Documenting Statement: The program |
| Field Trip Procedures | | uses the ODJFS sample trip permission |
| | | form for routine trips to secure written |
| | | permission from parents or guardians. |
| | | permission from parents of guardians. |
| | | |
| Doda | Chatura | Danis anti- Chatana anti-) If a maliable |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-15 Child Medical and | Compliant | Documenting Statement: At the time of |
| Enrollment Records | | the inspection, 25% of the children's |
| | | records were reviewed, and the records |
| | | were complete, as required by the rule. |
| | | |
| | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-15 Medical/Physical | Compliant | Documenting Statement: The program |
| Care Plans | | had current information on the medical |
| Care riuris | | |
| | | status and the required treatment plan |
| | | for the children with health conditions. |
| | | |
| 2.1 | | S () (|
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Medical, Dental, and | Compliant | |
| General Emergency Plan | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Emergency Drills | Compliant | |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 First Aid/Standard | Compliant | Documenting Statement: During the |
| Precautions | · | inspection, the program had complete |
| 1.1000.0.0 | | first aid kits available as required. |
| | | mist ala kits avallable as required. |
| | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Management of | Compliant | Southeriting statement(3), ir applicable |
| Communicable Disease | Compilant | |
| Communicable Disease | 1 | |
| D. I. | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Incident/Injury | Compliant | |
| Reporting | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Schedule | Compliant | |
| , | <u> </u> | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Materials and | Compliant | |
| Equipment | | |
| <u> </u> | <u> </u> | |

| Rule | Status | Documenting Statement(s), If applicable |
|--------------------------------------|-------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 5101:2-12-17 Daily Outdoor Play | Compliant | 2 common of the content of the conte |
| 3101.2 12 17 bany outdoor riay | Compilation | |
| <u> </u> | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 License Capacity | Compliant | bootimenting statement(s), it approases |
| 3101.2 12 10 Election capacity | Compilation | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 Group Size | Compliant | boodinenting statement(s), it applicable |
| 3101.2 12 10 Group 3/2C | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Child Guidance | Compliant | bocamenting statement(s), it applicable |
| 3101.2 12 13 clinia daladilec | Compilant | |
| | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-20 Cots and Napping | Compliant | bocamenting statement(3), it applicable |
| 3101.2-12-20 Cots and Napping | Compilant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Meal and Snack | Compliant | bocumenting statement(s), if applicable |
| | Compliant | |
| Requirements | | |
| 2.1 | l c | 5 5 |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Fluid Milk Requirements | Compliant | |
| | | |
| Dula | Chahua | Designmenting Statements of applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Safe Food | Compliant | |
| Handling/Storage | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Infant Daily Care | Compliant | |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Infant Bottle and Food | Compliant | |
| Preparation | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Diapering and Toilet | Compliant | |
| Training | | |
| | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-25 Medication | Compliant | Documenting Statement: The program |
| Administration | | had complete written documentation for |
| Administration | | nad complete written documentation for |



| | | administering medication or food supplements. |
|--------------------------------------|-----------|-----------------------------------------------|
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Child Care Staff Member | Compliant | |
| Educational Requirements | | |
| | | |
| | | |