



## Family Child Care 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>Watch Me Grow Learning Center          | Program Number<br>2190019942 | Program Type<br>FCC - Type B Home |
| Address<br>836 Sandelwood dr<br><br>Elyria<br>OH 44035 |                              | County<br>LORAIN                  |

| Inspection Information        |                          |                                  |
|-------------------------------|--------------------------|----------------------------------|
| Inspection Type<br>Compliance | Inspection Scope<br>Full | Inspection Notice<br>Unannounced |
| Inspection Date<br>02/08/2023 | Begin Time<br>11:15 AM   | End Time<br>1:20 PM              |
| Reviewer:<br>Jennifer Verda   |                          |                                  |

| Summary of Findings      |                                     |                       |                        |                   |
|--------------------------|-------------------------------------|-----------------------|------------------------|-------------------|
| No. Rules Verified<br>68 | No. Rules with Non-compliances<br>8 | No. Serious Risk<br>0 | No. Moderate Risk<br>0 | No. Low Risk<br>8 |

| 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)                                 | 3                | 1          | 0         | 1     |
| Young Toddler   |                  | 0          | 0         | 0     |
| <b>Total Under 2 Years</b>                                |                  | 1          | 0         | 1     |
| Older Toddler   | 6                | 2          | 0         | 2     |
| Preschool   |                  | 1          | 0         | 1     |
| School Age  |                  | 9          | 0         | 9     |
| <b>Total Capacity/Enrollment</b>                          | 6                | 12         | 0         | 13    |

| Staff-Child Ratios at the Time of Inspection |                          |                |         |
|--|--------------------------|----------------|---------|
| Group  | Age Group/Range          | Ratio Observed | Comment |
| N. Stevens                                   | 12 months to < 18 months | 1 to 1         |         |



### 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: 01 Ratio & Supervision**

Rule: 5101:2-13-18 Attendance

Code: The program is required to have attendance records with the required information.



Findings: During the inspection, it was determined that the attendance records did not include the required information listed in number 4 below:

1. The name of the child;
2. The birth date of the child;
3. The assigned group for the child;
4. The child's weekly schedule;
5. The time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.

The missing information must be added to the form used to maintain attendance records. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/24/2023

**Domain: 03 Postings & Equipment**

Rule: 5101:2-13-16 Medical, Dental, and General Emergency Plan

Code: The program is required to post the fire and weather alert plan with a diagram.

Findings: During the inspection, it was determined the following information was not posted for item number 2 below:

1. Fire alert plan, including a diagram indicating evacuation routes.
2. Weather alert plan was missing details for tornado.
3. Weather alert plan was missing a diagram indicating evacuation routes.

Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 03/24/2023

**Domain: 05 Health & Safety**

Rule: 5101:2-13-22 Meals and Snacks

Code: The program is required to post the current menu in a noticeable location that is accessible to parents and note any substitutions at the time of the change.

Findings: During the inspection, it was determined that the program's weekly menu did not meet the requirement as noted in number 3 below.

1. The menu was not posted.
2. The posted menu was not in a visible place readily accessible to parents.
3. The menu was not currently dated.



4. The entire menu was substituted.
5. At least one item on menu did not match what was served.
6. The meal or snack served did not match the posted menu.

Submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 03/24/2023

**Domain: 05 Health & Safety**

Rule: 5101:2-13-16 Emergency Drills

Code: The program is required to complete and document the required drills.

Findings: During the inspection, it was determined that the required drills were not completed for item number(s) 2, 3 below:

1. Monthly fire drills
2. Monthly weather emergency drills (March through September)
3. Emergency/lockdown drills in each quarter of the calendar year

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

Corrective Action Plan Due: 03/24/2023

**Domain: 05 Health & Safety**

Rule: 5101:2-13-16 First Aid Kit/Standard Precautions

Code: The program is required to meet the requirements for first aid kits.

Findings: During the inspection, it was determined that the program did not have a first aid kit onsite that included all items listed in the appendix A of the rule. The kit was missing the item( or the item listed in number below: 13

1. One roll of first-aid tape;
2. Individually wrapped sterile gauze; squares in assorted sizes;
3. Sterile adhesive bandages in assorted sizes;
4. Tweezers;
5. Gauze rolled bandage;
6. Triangular bandage;
7. Rounded end scissors;
8. 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);



9. A working digital thermometer;
10. Disposable non-latex gloves;
11. A working flashlight;
12. 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;
13. 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;
14. Pocket mask or face shield, appropriate; for all ages of children in care, for cardiopulmonary resuscitation (CPR) administration;
15. Soap or waterless sanitizer (field trip or transporting away from the program only);
16. Bottled water (field trip or transporting away from the program only).

Correct the violation and submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/24/2023

#### Domain: 08 Staff Files

Rule: 5101:2-13-10 Health Training

Code: The program is required to meet the health training requirements.

Findings: In review of records, it was determined the provider did not have current valid documentation for training(s) listed in number(s) 1, 4 below:

1. First Aid - expired training
2. First Aid - did not have verification of the completion of First Aid training
3. First Aid - documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
4. CPR - expired training
5. CPR - had not taken CPR training
6. CPR - did not have verification of the completion of CPR training
7. CPR - training taken did not include all age groups and developmental levels of all children in care
8. CPR - documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
9. CPR- audiovisual or electronic media training taken did not include an in-person component of the training
10. Communicable Disease - expired training
11. Communicable Disease - had not taken CD training
12. Communicable Disease - did not have verification of the completion of CD training
13. Communicable Disease - documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
14. Child Abuse - expired training
15. Child Abuse - had not taken Child Abuse training
16. Child Abuse - documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule



Correct the violation and submit the documentation of current certification with the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 03/24/2023

**Domain: 08 Staff Files**

Rule: 5101:2-13-10 Professional Development

Code: The program staff is required to complete at least six clock hours of training annually.

Findings: In review of records, it was determined the Child Care Staff Member(s) indicated on the Employee Record Chart did not meet the annual professional development requirement as noted in number 1.

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 verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/24/2023

**Domain: 09 Children's Files**

Rule: 5101:2-13-15 Child Medical and Enrollment Records

Code: The program is required to have a completed medical on file for each child.

Findings: In review of of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in number 2 below

:

1. No medical was on file for at least one child
2. Medical(s) on file was not updated every 13 months
3. Medical(s) were missing child's name and date of birth
4. Medical(s) were missing the date of the medical examination
5. The date of the exam was more than 13 months prior to the date the form was signed
6. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care
7. Medical(s) were missing the signature, business address and telephone number of the physician, physician's assistant(PA), advance practice nurse (APN) or certified



- nurse practitioner (CNP) who examined the child
8. Medical(s) were missing a record of immunizations the child has had specifying month, day and year
  9. Medical(s) were missing a statement from the physician, PA, APN, or CNP that the child has been immunized or is in the process of being immunized against the diseases required by division 5104.014 of the Revised Code and found in appendix A to this rule
  10. Medical(s) were missing a statement from the child's parent or guardian that he or she has declined to have the child immunized against the disease for reasons of conscience, including religious convictions
  11. Other [ ]

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

Corrective Action Plan Due: 03/24/2023

**Rules In-Compliance/Not Verified**

| Rule                                     | Status    | Documenting Statement(s), If applicable |
|--|-----------|---|
| 5101:2-13-02 License Visible             | Compliant |   |
| 5101:2-13-02 Voluntary Temporary Closure | Compliant |   |
| 5101:2-13-02 Change of Location          | Compliant |   |
| 5101:2-13-02 Information in OCLQS        | Compliant |   |
| 5101:2-13-02 Provider Medical            | Compliant |   |



| Rule  | Status    | Documenting Statement(s), If applicable |
|---|-----------|---|
| 5101:2-13-03 Inspection Requirements                              | Compliant |   |
| 5101:2-13-04 Building Requirements for Type B Homes               | Compliant |   |
| 5101:2-13-04 Fire Safety for Type B Homes                         | Compliant |   |
| 5101:2-13-04 Flammable and Combustible Materials in a Type B Home | Compliant |   |
| 5101:2-13-04 Heaters in a Type B Home                             | Compliant |   |
| 5101:2-13-07 Staff Records  | Compliant |   |
| 5101:2-13-07 Type B Provider - Foster Parent                      | Compliant |   |
| 5101:2-13-08 Employee Requirements                                | Compliant |   |
| 5101:2-13-08 Child Care Staff Requirements                        | Compliant |   |
| 5101:2-13-08 Whistle Blower                                       | Compliant |   |





| Rule   | Status    | Documenting Statement(s), If applicable |
|--|-----------|---|
| 5101:2-13-09 Background Checks               | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-11 Outdoor Space                   | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-11 Outdoor Equipment               | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-11 Fall Zone                       | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-12 Safe Equipment                  | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-12 Safe Environment                | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-13 Clean environment and equipment | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-13 Handwashing                     | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-13 Smoke Free                      | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-13 Toothbrushing                   | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |



|  |               |  |
|--|---------------|--|
| 5101:2-13-14 Requirements for Field and Routine Trips          | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-14 Ratio and Supervision for Field and Routine Trips | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-14 Driver Requirements                               | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-14 Vehicle Inspections                               | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-14 Vehicle Requirements                              | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-15 Health Conditions                                 | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-15 Child Records Retention and Confidentiality       | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-16 Communicable Diseases                             | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-16 Incident/Injury                                   | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-16 Disaster Plan                                     | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-19 Supervision                                       | Compliant     |  |



| Rule  | Status    | Documenting Statement(s), If applicable |
|---|-----------|---|
| 5101:2-13-19 School Age Supervision             | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-19 Child Guidance                     | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-20 Sleep and Nap Requirements         | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-20 Crib and Playpen Requirements      | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-21 Evening and Overnight Care         | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-21 Sanitary Environment and Hygiene   | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-22 Fluid Milk                         | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-22 Food Handling                      | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-23 Infant Daily Care                  | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-23 Infant Bottle and Food Preparation | Compliant |   |



| Rule   | Status    | Documenting Statement(s), If applicable |
|--|-----------|---|
| 5101:2-13-23 Diapering                               | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-24 Parent Permission for Swimming          | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-25 Medication Requirements                 | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-07 Provider Responsibilities               | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-18 Group Size and Ratios                   | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13 Written Policies and Procedures            | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-12 Carbon Monoxide Detectors - Type B Only | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-11 Indoor Space                            | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-17 Programming                             | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-24 On-site Pools                           | Compliant |   |



| Rule              | Status    | Documenting Statement(s), If applicable |
|-------------------|-----------|---|
| 5101:2-13-12 Pets | Compliant |   |

| Rule                        | Status    | Documenting Statement(s), If applicable |
|-----------------------------|-----------|---|
| 5101:2-13-24 Swimming Sites | Compliant |   |

| Rule                                 | Status    | Documenting Statement(s), If applicable |
|--------------------------------------|-----------|---|
| 5101:2-13-17 Materials and Equipment | Compliant |   |