

## 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>Tattle Tales Child Care                                         | Program Number<br>2190020449 | Program Type<br>FCC - Type A Home |                   |
| Address<br>4155 wayne ridge rd<br><br>Zanesville<br>OH 43701                    |                              | County<br>MUSKINGUM               |                   |
| <i>Building and Fire Approvals apply to Type A Family Child Care Homes only</i> |                              |                                   |                   |
| Building Approval Date                                                          | Use Group/Code               | Occupancy Limit                   | Maximum Under 2 ½ |
| Fire Inspection Approval Date<br>11/12/2024                                     |                              |                                   |                   |

| Inspection Information        |                          |                                  |
|-------------------------------|--------------------------|----------------------------------|
| Inspection Type<br>Compliance | Inspection Scope<br>Full | Inspection Notice<br>Unannounced |
| Inspection Date<br>12/17/2024 | Begin Time<br>1:11 PM    | End Time<br>2:08 PM              |
| Reviewer:<br>Angie Smith      |                          |                                  |

| Summary of Findings      |                                     |                       |                        |                   |
|--------------------------|-------------------------------------|-----------------------|------------------------|-------------------|
| No. Rules Verified<br>67 | No. Rules with Non-compliances<br>4 | No. Serious Risk<br>0 | No. Moderate Risk<br>1 | No. Low Risk<br>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)                                 |                  | 3          | 0         | 3     |
| Young Toddler                                             |                  | 0          | 0         | 0     |
| <b>Total Under 2 Years</b>                                | 6                | 3          | 0         | 3     |
| Older Toddler                                             |                  | 4          | 0         | 4     |
| Preschool                                                 |                  | 5          | 0         | 5     |
| School Age                                                |                  | 0          | 0         | 0     |
| <b>Total Capacity/Enrollment</b>                          | 12               | 9          | 0         | 12    |

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

|                                            |                 |        |  |
|--------------------------------------------|-----------------|--------|--|
| Tattle Tales Child Care- Stephanie<br>Reed | Mixed Age Group | 2 to 8 |  |
|--------------------------------------------|-----------------|--------|--|

### 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: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to refrain from using and storing potentially hazardous items, toxic substances, and outdoor machinery around children.

Findings: During the inspection, a potentially hazardous item or toxic substance was used or stored where children present had access to it as noted in numbers 2 and 9 below. The potentially hazardous substance or item that posed a risk to children was determined to be accessible to children in the office on the desk, children pass through this area for use of the restroom.

1. Bleach.
2. Cleaning agents, spray glass cleaner.
3. Fish tank chemicals.
4. Gasoline.
5. Pesticide.
6. Poison, including insect/rodent poison.
7. Flammable substance.
8. Windshield washer fluid.
9. Aerosol cans, aerosol spray Lysol.
10. A lawn mower.
11. A weed trimmer.
12. Hedge trimmers.
13. A snow blower.

14. Other potentially hazardous substance, equipment or machinery: [ ].

Provide staff training. Submit the program's corrective action plan, which includes a statement that the potentially hazardous substance or item is no longer accessible to children and/or children will not be outside when machinery is in use and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/17/2025

### Low Risk Non-Compliances

#### Domain: 00 License & Approvals

Rule: 5101:2-13-02 Information in OCLQS

Code: The provider is required to keep their information current in OCLQS.

Findings: During the inspection, it was determined the information in number 3 below was not up to date in the Ohio Child Care Licensing and Quality System:

1. Mailing Address;
2. Telephone Number;
3. Email Address; email address has had and not corrected an error in the address.
4. Days and Hours of Operation;
5. Services Offered;
6. Name of Program, If applicable.
7. Private pay rates.

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

Corrective Action Plan Due: 01/17/2025

#### 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 as required, that included all items listed in the appendix A of the rule. The kit was missing the item or the item were not replaced after use and/or expired listed in number 11 below:

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: 01/17/2025

**Domain: 08 Staff Files**

Rule: 5101:2-13-10 Health Training

Code: Child care staff members and substitute child care staff members are required to complete health trainings within the first ninety days of hire and prior to being left alone with children.

Findings: In review of records, it was determined the CCSM or Substitute CCSM did not meet health training requirements listed in numbers 2 First Aid and 3 CPR below:

1. All health trainings were not completed prior to being left alone with children.
2. First Aid training was not completed within the first ninety days of hire.
3. CPR training was not completed within the first ninety days of hire.
2. Communicable Disease training was not completed within the first ninety days of hire.
3. Child Abuse training was not completed within the first ninety days of hire.

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: 01/17/2025

|  |
|--|
|  |
|--|

### Rules In-Compliance/Not Verified

| Rule                                               | Status    | Documenting Statement(s), If applicable |
|----------------------------------------------------|-----------|-----------------------------------------|
| 5101:2-13-02 Voluntary Temporary Closure           | Compliant |                                         |
| Rule                                               | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-02 Voluntary Temporary Closure           | Compliant |                                         |
| Rule                                               | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-02 Change of Location                    | Compliant |                                         |
| Rule                                               | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-02 Provider Medical                      | Compliant |                                         |
| Rule                                               | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-02 Type A Ownership                      | Compliant |                                         |
| Rule                                               | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-03 Inspection Requirements               | Compliant |                                         |
| Rule                                               | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-04 Building Inspections for Type A Homes | Compliant |                                         |
| Rule                                               | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-04 Building Inspections for Type A Homes | Compliant |                                         |
| Rule                                               | Status    | Documenting Statement(s), If applicable |
|                                                    |           |                                         |

|                                                 |               |                                                |
|-------------------------------------------------|---------------|------------------------------------------------|
| 5101:2-13-05 Denial, Revocation, and Suspension | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-07 Staff Records                      | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-08 Employee Requirements              | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-08 Whistle Blower                     | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-09 Background Checks                  | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-10 Professional Development           | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-11 Outdoor Space                      | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-11 Outdoor Equipment                  | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-11 Fall Zone                          | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-12 Safe Equipment                     | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-13 Clean environment and equipment    | Compliant     |                                                |

|                                                                |               |                                                |
|----------------------------------------------------------------|---------------|------------------------------------------------|
|                                                                |               |                                                |
| <b>Rule</b>                                                    | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-13 Handwashing                                       | Compliant     |                                                |
| <b>Rule</b>                                                    | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-13 Smoke Free                                        | Compliant     |                                                |
| <b>Rule</b>                                                    | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-13 Toothbrushing                                     | Compliant     |                                                |
| <b>Rule</b>                                                    | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 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 Child Medical and Enrollment Records              | Compliant     |                                                |
| <b>Rule</b>                                                    | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-15 Health Conditions                                 | Compliant     |                                                |

| Rule                                                     | Status    | Documenting Statement(s), If applicable |
|----------------------------------------------------------|-----------|-----------------------------------------|
| 5101:2-13-15 Child Records Retention and Confidentiality | Compliant |                                         |
| Rule                                                     | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-16 Medical, Dental, and General Emergency Plan | Compliant |                                         |
| Rule                                                     | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-16 Emergency Drills                            | Compliant |                                         |
| Rule                                                     | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-16 Communicable Diseases                       | Compliant |                                         |
| Rule                                                     | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-16 Incident/Injury                             | Compliant |                                         |
| Rule                                                     | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-16 Emergency Preparedness and Response Plan    | Compliant |                                         |
| Rule                                                     | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-18 Attendance                                  | Compliant |                                         |
| Rule                                                     | Status    | Documenting Statement(s), If applicable |
| 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     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-20 Crib and Playpen Requirements      | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-21 Evening and Overnight Care         | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-21 Sanitary Environment and Hygiene   | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-22 Meals and Snacks                   | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-22 Fluid Milk                         | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-22 Food Handling                      | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-23 Infant Daily Care                  | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-23 Infant Bottle and Food Preparation | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5101:2-13-23 Diapering                          | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 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 |
| 5101:2-13-08 Child Care Staff Requirements  | Compliant |                                         |
| Rule                                        | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-14 Vehicle Inspections            | 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 |
| 5101:2-13-08 Review Policies and Procedures | 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 |                                         |