

# 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 <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. This includes complaint investigation reports with substantiated allegations. For any other child care records, please contact the Child Care Help Desk at 1-877-302-2347, option 4.

| Program Details               |                |                   |  |
|-------------------------------|----------------|-------------------|--|
| Program Name                  | Program Number | Program Type      |  |
| Rosie's Imagination Childcare | 2190020730     | FCC - Type B Home |  |
| Address                       |                | County            |  |
| 3393 Alexis rd                |                | HAMILTON          |  |
|                               |                |                   |  |
| Cincinnati                    |                |                   |  |
| OH 45239                      |                |                   |  |

| Inspection Information |                                |                  |                   |              |
|------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type        | Inspection Se                  | соре             | Inspection Notice |              |
| Compliance             | Full                           |                  | Unannounced       |              |
| Inspection Date        | Begin Time                     |                  | End Time          |              |
| 03/07/2022             | 11:40 AM                       |                  | 12:15 PM          |              |
| Reviewer:              |                                |                  |                   |              |
| Eryn Hunt              |                                |                  |                   |              |
| Summary of Findings    |                                |                  |                   |              |
| No. Rules Verified     | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 68                     | 7                              | 0                | 0                 | 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)                                 |                  | 1          | 0         | 1     |
| Young Toddler   |                  | 1          | 0         | 1     |
| Total Under 2 Years                                       | 3                | 2          | 0         | 2     |
| Older Toddler   |                  | 1          | 0         | 1     |
| Preschool   |                  | 2          | 0         | 2     |
| School Age  |                  | 2          | 0         | 2     |
| Total Capacity/Enrollment                                 | 6                | 5          | 0         | 7     |

| Staff-Child Ratios at the Time of Inspection |                 |                |         |
|--|-----------------|----------------|---------|
| Group  | Age Group/Range | Ratio Observed | Comment |
| PLACEMENTS 3/7/22                            |                 | 1 to 0         |         |



#### **Summary of Non-Compliances**

If the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited. Ohio Administrative Code 5101: 2-13-03 details the process for submitting a request for a review if a program disagrees with a licensing finding. The request for review must be submitted within seven days from the receipt of the licensing report.

# Serious Risk Non-Compliances

No Serious Risk Non-Compliances were observed during this inspection

**Moderate Risk Non-Compliances** 

No Moderate Risk Non-Compliances were observed during this inspection

Low Risk Non-Compliances

Domain: 01 Ratio & Supervision

Rule: 5101:2-13-18 Attendance

Code: The program is required to have a tracking method for children.

Findings: During the inspection, it was determined that the method for tracking the children in the group did not meet the requirements in rule as noted in the number(s) 1-5 below:



Department of Education Department of Job and Family Services

- 1. There was no method in place.
- 2. The method did not include each child's name.
- 3. The method did not include each child's birthdate.
- 4. The tracking method did not remain with the group at all times.
- 5. The tracking method was not updated throughout the day as children entered or left the group.

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

Corrective Action Plan Due: 04/07/2022

#### Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Pets

Code: The program is required to properly care for all pets.

Findings: During the inspection, it was determined that a pet at the program posed a threat to the safety or health of the children, in that proper licensing and/or inoculations not on file. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/07/2022

#### 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/ on the vehicle/ on a field trip] as required, that included all items listed in the appendix A of the rule. The kit(s) were missing the item(s) or the item(s) were not replaced after use and/or expired listed in number(s) 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: 04/07/2022

# Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-23 Infant Daily Care

Code: The program staff is required to provide a daily written record for each infant in care.

Findings: During the inspection, it was determined that there was no daily written record for each infant provided to the parent or person picking up the infant on a daily basis. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/07/2022

# Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-23 Infant Bottle and Food Preparation Code: The program is required to retain and update infant feeding instructions.

Findings: During the inspection, it was determined that written instructions for feeding the infants noted on the Children Record Review form were not on file, as required by this rule. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 04/07/2022

Domain: 08 Staff Files

Rule: 5101:2-13-07 Provider Responsibilities

Code: The provider is required to maintain the required liability insurance or have a completed JFS 01933 "Liability Insurance Statement for Family Child Care Providers" on file for each child in care.



Findings: During the inspection, it was determined the provider did not obtain or maintain the required liability insurance/have a completed JFS 01933 "Liability Insurance Statement for Family Child Care Providers" completed for each child in care. Correct the violation and submit proof of insurance with the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 04/07/2022

# 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(s) 1 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: 04/07/2022

Domain: 09 Children's Files

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



Code: The program is required to have a completed JFS 01234 "Child Enrollment and Health Information for Child Care" on file on the premises for each child.

Findings: In review of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in number(s) 1 below:

- 1. No enrollment form was completed for at least one child
- 2. The current JFS 01234 was not completed for at least one child
- 3. Complete child information
- 4. Complete parent information
- 5. Complete emergency contact information
- 6. Complete physician information
- 7. Information regarding the parent list
- 8. Health information
- 9. Additional information for all boxes checked "yes"
- 10. Emergency transportation information
- 11. Parent/guardian's signature
- 12. Diapering Statement
- 13. Acknowledgement of Policies and Procedures
- 14. Enrollment form for at least one child was not updated by either the parent or the administrator
- 15. Enrollment form for at least one child was not signed by the administrator
- 16. Other [ ]

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

Corrective Action Plan Due: 04/07/2022

# Rules In-Compliance/Not Verified

| Rule                             | Status    | Documenting Statement(s), If applicable |
|----------------------------------|-----------|---|
| 5101:2-13-02 License Visible     | Compliant |   |
|                                  |           |   |
|                                  |           |   |
|                                  |           |   |
| Rule                             | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-02 Voluntary Temporary | Compliant |   |
| Closure                          |           |   |
|                                  |           |   |
|                                  |           |   |
| Rule                             | Status    | Documenting Statement(s), If applicable |



| 5101:2-13-02 Change of Location                        | Compliant |   |
|--|-----------|---|
| Dede   | Chattar   |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-02 Information in OCLQS                      | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-02 Provider Medical                          | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-03 Inspection                                | Compliant |   |
| Requirements   |           |   |
| Dula   | Chatura   |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-04 Building Requirements<br>for Type B Homes | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-04 Fire Safety for Type B                    | Compliant | bocumenting statement(s), it applicable |
| Homes  |           |   |
| Dula   | Chatura   |   |
| Rule<br>5101:2-13-04 Flammable and                     | Status    | Documenting Statement(s), If applicable |
|  | Compliant |   |
| Combustible Materials in a Type B<br>Home              |           |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-04 Heaters in a Type B                       | Compliant | Documenting statement(s), if applicable |
| Home   | Compliant |   |
|  |           |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-07 Staff Records                             | Compliant |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-07 Type B Provider - Foster                  | Compliant |   |
| Parent   |           |   |
|  |           |   |
| Rule   | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-08 Employee Requirements                     | Compliant |   |



| Rule                           | Status    | Documenting Statement(s), If applicable |
|--------------------------------|-----------|---|
| 5101:2-13-08 Child Care Staff  | Compliant |   |
| Requirements                   |           |   |
|                                |           |   |
|                                |           |   |
| Rule                           | Status    | Documenting Statement(s), If applicable |
| 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 |
| 5101:2-13-10 Health Training   | Compliant |   |
|                                |           |   |
|                                |           |   |
|                                | -         |   |
| Rule                           | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-10 Professional      | Compliant |   |
| Development                    |           |   |
|                                |           |   |
|                                |           |   |
| 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 |   |
| S101.2-13-11 Outdoor Equipment | Compliant |   |
|                                |           |   |
| L                              | l         | I                                       |
| Rule                           | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-11 Fall Zone         | Compliant |   |
|                                |           |   |
|                                |           |   |
|                                | 1         |   |
| 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  | Compliant |   |
| equipment                           |           |   |
|                                     |           |   |
|                                     |           | · · · · · · · · · · · · · · · · · · ·   |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-13 Handwashing            | Compliant |   |
| 5                                   |           |   |
|                                     |           |   |
|                                     | -         |   |
| 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 |   |
|                                     |           |   |
|                                     | <u> </u>  |   |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-14 Requirements for Field | Compliant |   |
| and Routine Trips                   | Compliant |   |
| and Noutine mps                     |           |   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-14 Ratio and Supervision  | Compliant |   |
| for Field and Routine Trips         |           |   |
|                                     |           |   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-14 Driver Requirements    | Compliant |   |
|                                     |           |   |
|                                     |           |   |
| Dula                                | Chattan   |   |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-14 Vehicle Inspections    | Compliant |   |
|                                     |           |   |
|                                     | 1         |   |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-14 Vehicle Requirements   | Compliant |   |
|                                     |           |   |
|                                     |           |   |
|                                     | L         |   |
| Rule                                | Status    | Documenting Statement(s), If applicable |
| 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<br>General Emergency Plan | Compliant |   |
|   | -         |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-16 Emergency Drills                               | Compliant |   |
| Dula  | Ctatus    | Desumanting Statement(s) If applicable  |
| Rule<br>5101:2-13-16 Communicable Diseases                  | Status    | Documenting Statement(s), If applicable |
| 5101.2-13-16 Communicable Diseases                          | Compliant |   |
|   | 1         |   |
| 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 Disaster Plan                                  | Compliant | <u> </u>                                |
|   |           |   |
| 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 | Documenting statement(s), it applicable |
| 5101.2-15-19 Child Guidance                                 | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-20 Sleep and Nap                                  | Compliant |   |
| Requirements  |           |   |
|   |           |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-20 Crib and Playpen<br>Requirements               | Compliant |   |



| Rule  | Status   | Documenting Statement(s), If applicable   |
|---|--|---|
| 5101:2-13-21 Evening and Overnight  | Compliant  |   |
| Care  |  |   |
|   |  |   |
| Rule  | Status   | Documenting Statement(s), If applicable   |
| 5101:2-13-21 Sanitary Environment   | Compliant  |   |
| and Hygiene   |  |   |
| ,,,   |  |   |
|   |  |   |
| Rule  | Status   | Documenting Statement(s), If applicable   |
| 5101:2-13-22 Meals and Snacks   | Compliant  |   |
|   |  |   |
| L   |  | I   |
| 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 Diapering  | Compliant  |   |
|   |  |   |
|   |  |   |
|   |  |   |
|   | -  |   |
| Rule  | Status   | Documenting Statement(s), If applicable   |
| 5101:2-13-24 Parent Permission for  | Status<br>Compliant  | Documenting Statement(s), If applicable   |
|   |  | Documenting Statement(s), If applicable   |
| 5101:2-13-24 Parent Permission for  |  | Documenting Statement(s), If applicable   |
| 5101:2-13-24 Parent Permission for  |  |   |
| 5101:2-13-24 Parent Permission for<br>Swimming  | Compliant<br>Status  | Documenting Statement(s), If applicable         Documenting Statement(s), If applicable |
| 5101:2-13-24 Parent Permission for<br>Swimming<br>Rule  | Compliant  |   |
| 5101:2-13-24 Parent Permission for<br>Swimming<br>Rule<br>5101:2-13-25 Medication   | Compliant<br>Status  |   |
| 5101:2-13-24 Parent Permission for<br>Swimming<br>Rule<br>5101:2-13-25 Medication<br>Requirements   | Compliant<br>Status<br>Compliant   | Documenting Statement(s), If applicable   |
| 5101:2-13-24 Parent Permission for<br>Swimming<br>Rule<br>5101:2-13-25 Medication<br>Requirements<br>Rule   | Compliant<br>Status<br>Compliant<br>Status   |   |
| 5101:2-13-24 Parent Permission for<br>Swimming<br>Rule<br>5101:2-13-25 Medication<br>Requirements   | Compliant<br>Status<br>Compliant   | Documenting Statement(s), If applicable   |
| 5101:2-13-24 Parent Permission for<br>Swimming<br>Rule<br>5101:2-13-25 Medication<br>Requirements<br>Rule   | Compliant<br>Status<br>Compliant<br>Status   | Documenting Statement(s), If applicable   |
| 5101:2-13-24 Parent Permission for<br>Swimming<br>Rule<br>5101:2-13-25 Medication<br>Requirements<br>Rule   | Compliant<br>Status<br>Compliant<br>Status   | Documenting Statement(s), If applicable   |
| 5101:2-13-24 Parent Permission for         Swimming         Rule         5101:2-13-25 Medication         Requirements         Rule         5101:2-13-18 Group Size and Ratios   | Compliant Status Compliant Status Compliant Status Compliant   | Documenting Statement(s), If applicable Documenting Statement(s), If applicable         |
| 5101:2-13-24 Parent Permission for         Swimming         Rule         5101:2-13-25 Medication         Requirements         Rule         5101:2-13-18 Group Size and Ratios         Rule         Rule                           | Compliant          Status         Compliant         Status         Compliant         Status         Status         Status         Status         Status         Status         Status         Status | Documenting Statement(s), If applicable   |
| 5101:2-13-24 Parent Permission for         Swimming         Rule         5101:2-13-25 Medication         Requirements         Rule         5101:2-13-18 Group Size and Ratios   | Compliant Status Compliant Status Compliant Status Compliant   | Documenting Statement(s), If applicable Documenting Statement(s), If applicable         |
| 5101:2-13-24 Parent Permission for         Swimming         Rule         5101:2-13-25 Medication         Requirements         Rule         5101:2-13-18 Group Size and Ratios         Rule         5101:2-13 Written Policies and | Compliant          Status         Compliant         Status         Compliant         Status         Status         Status         Status         Status         Status         Status         Status | Documenting Statement(s), If applicable Documenting Statement(s), If applicable         |



| Rule                                    | Status    | Documenting Statement(s), If applicable |
|---|-----------|---|
| 5101:2-13-12 Carbon Monoxide            | Compliant |   |
| Detectors - Type B Only                 |           |   |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |           |   |
|   | ·         |   |
| 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 |
| 5101:2-13-24 Swimming Sites             | Compliant |   |
|   |           |   |
|   |           |   |
|   |           |   |
| Rule                                    | Status    | Documenting Statement(s), If applicable |
| 5101:2-13-17 Materials and              | Compliant |   |
| Equipment                               |           |   |
|   |           |   |
|   |           |   |
|   |           |   |