



## 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 Rc'z Playhouse&Childcare LLC	Program Number 2190021123	Program Type FCC - Type A Home	
Address 877 silvercrest ave  akron OH 44314		County SUMMIT	
<i>Building and Fire Approvals apply to Type A Family Child Care Homes only</i>			
Building Approval Date 10/15/2020	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date 02/07/2020			

Inspection Information				
Inspection Type Compliance	Inspection Scope Full	Inspection Notice Unannounced		
Inspection Date 02/10/2023	Begin Time 10:00 AM	End Time 1:30 PM		
Reviewer: Kathryn Carey				
Summary of Findings				
No. Rules Verified 66	No. Rules with Non-compliances 18	No. Serious Risk 0	No. Moderate Risk 3	No. Low Risk 18

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)		0	0	0
Young Toddler		1	0	1
<b>Total Under 2 Years</b>	6	1	0	1
Older Toddler		0	1	1
Preschool		0	0	0
School Age		0	2	2
<b>Total Capacity/Enrollment</b>	12	0	3	4

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
RCZ'S	18 months to < 30 months	2 to 1	



Department of Education  
Department of Job and Family Services



### 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: 04 Indoor/Outdoor Space**

Rule: 5101:2-13-11 Outdoor Equipment

Code: The program is required to provide equipment that has openings less than 3 1/2 inches and no more than 9 inches to avoid the risk of entrapment.

Findings: During the inspection, it was determined that equipment on the outdoor play space posed an imminent risk of harm to a child as noted in number(s) 1,2 below:

1. The climber was not anchored.
2. The swings were not securely anchored.
3. The slide was not securely anchored.
4. The climbing rope was not securely anchored at both ends.
5. The "S" hooks on the climber were not closed in order to prevent the chain from slipping off the hook and prevent strangulation.
6. The "S" hooks on the swing(s) were not closed in order to prevent the chain from slipping off the hook and prevent strangulation.
7. The [ ] had an opening that was greater than three and one-half inches, but less than nine inches. Equipment openings must be less than 3 1/2 inches or more than 9 inches to avoid the risk of entrapment. Discontinue the use of this equipment until it has been removed, repaired or replaced. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/15/2023



**Domain: 04 Indoor/Outdoor Space**

Rule: 5101:2-13-11 Fall Zone

Code: The program is required to have an adequate fall surface on the outdoor playground.

Findings: During the inspection, it was determined that the playground did not have adequate fall surface under and around equipment as noted in the following number(s) 1,2 below:

1. No fall surface
2. Adequate fall surface to soften the impact of a fall
3. Other [ ]

Any equipment designed for climbing, swinging, bouncing, or sliding needs a fall zone of protective material resilient under and around the equipment in order to protect children in the event of a fall. Submit the program's corrective action plan, which includes written verification of the discontinued use of this equipment until corrections are made along with a description of the resilient material added, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/15/2023

**Domain: 08 Staff Files**

Rule: 5101:2-13-09 Background Checks

Code: Individuals associated to the program are required to request background checks.

Findings: In review of the staff records, it was determined that a resident of the home turned 18 years of age moved into the home and background checks were not requested within 10 business days. Submit the program's corrective action plan, which includes a copy of the resident's JFS 01176, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/15/2023

**Low Risk Non-Compliances**

**Domain: 00 License & Approvals**



Rule: 5101:2-13-04 Fire Inspections for Type A Homes

Code: The program is required to have a fire approval completed within 12 months from the date of the last fire approval.

Findings: The program had not been inspected and approved within 12 months from the date of the last fire approval by the local fire department, as required. Secure and submit an updated fire approval as part of the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 03/15/2023

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to protect children in care from items and conditions that threaten their health, safety, and well being.

Findings: Children in care shall be protected from any items and conditions which threaten their health, safety, and well being. During the inspection, it was determined that children were not protected from the following item(s) or condition(s) which may threaten their health, safety, or well being as noted in the following number(s) 2, 8 below:

1. Telephone cords;
2. Stacked chairs;
3. Employee(s) purse(s);
4. Diaper bags;
5. Television not securely anchored;
6. Small or lightweight pieces of shelving units are not securely anchored to the wall;
7. Staff member stepped over a barrier/gate while holding a child;
8. Chipping or peeling paint;
9. Other [ ].

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

Corrective Action Plan Due: 03/15/2023

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to have all outlets and surge protectors covered.

Findings: During the inspection, it was determined that surge protectors or outlets did not have childproof receptacle covers. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.



Corrective Action Plan Due: 03/15/2023

**Domain: 03 Postings & Equipment**

Rule: 5101:2-13-17 Programming

Code: The program is required to provide outdoor play as required by rule.

Findings: During the inspection, it was determined that daily outdoor play was not provided as required by rule. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/15/2023

**Domain: 03 Postings & Equipment**

Rule: 5101:2-13-17 Materials and Equipment

Code: The program is required to have play materials accessible.

Findings: During the inspection, it was determined that play materials were not accessible/orderly for the following reason(s) as noted in number(s) 2 below:

1. Play materials were not readily accessible to the children;
2. Play materials were not arranged in an orderly manner so that children have opportunities to select, remove and replace play materials with minimal assistance during the day.

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

Corrective Action Plan Due: 03/15/2023

**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(s) 1,3 below:

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



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: 03/15/2023

**Domain: 04 Indoor/Outdoor Space**

Rule: 5101:2-13-11 Outdoor Space

Code: The program staff is required to protect the children from hazardous conditions in the outdoor play area.

Findings: During the inspection, it was determined that the following hazardous conditions existed in the outdoor play area, as noted in number(s) 4. below:

1. There was broken glass.
2. There were tall weeds.
3. There was poison ivy.
4. There were tree branches.
5. There was mold visible.
6. The sandbox was contaminated.
7. There were thistles with pricklers.
8. There were bird droppings.
9. Other There were nails protruding from a fence, boards sticking out of a window well, a rake left out and brick structure that should not be accessible..

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

Corrective Action Plan Due: 03/15/2023

**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: 03/15/2023

**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/ 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) 13 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: 03/15/2023

**Domain: 05 Health & Safety**





Rule: 5101:2-13-22 Fluid Milk

Code: The program is to ensure that children are served age-appropriate fluid milk.

Findings: During the inspection, it was determined that the program did not have the type of milk on-site to ensure that all children were served age-appropriate fluid milk requirements. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/15/2023

**Domain: 05 Health & Safety**

Rule: 5101:2-13-22 Fluid Milk

Code: The program is required to have written documentation when serving substitutions for fluid milk.

Findings: During the inspection, it was determined that required documentation for substitutions for fluid milk was not as file noted in number(s) 4.below:

1. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when Infants up to 12 months of age were served anything other than formula or breast milk .
2. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when Infants and toddlers 12 months of age up to 24 months of age were served anything other than unflavored whole homogenized vitamin D fortified cow's milk, breast milk, or non-cow milk substitutions that is nutritionally equivalent to milk.
3. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when toddlers and children 24 months of age and older are served anything other than unflavored one percent milk that is vitamin A and D fortified, unflavored fat free or skim milk that is vitamin A and D fortified, or non-cow milk substitutions that are nutritionally equivalent to milk.
4. Written parental consent for non-cow milk substitutions that are nutritionally equivalent to milk.

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

Corrective Action Plan Due: 03/15/2023

**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(s) 4.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: 03/15/2023

### Domain: 05 Health & Safety

Rule: 5101:2-13-16 Disaster Plan

Code: 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.

Findings: 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: 03/15/2023

### Domain: 06 Program Information

Rule: 5101:2-13-24 Parent Permission for Swimming

Code: The program is required to have written parental permission before a swimming activity.

Findings: In the review of the program's records, it was determined that written permission from the parent had not been secured before a swimming or water activity as defined in number(s) 2,3,4 below:

1. When water is directly accessible to children.
2. A child swims or plays in water eighteen inches or more in depth;
3. A child participates in activities in or on water eighteen inches or more in depth;
4. Infants and toddlers use wading pools;
5. Written permission was not updated annually for on-going activities.



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

Corrective Action Plan Due: 03/15/2023

**Domain: 07 Diapering & Infant Care**

Rule: 5101:2-13-23 Diapering

Code: The program staff is required to have adequate supplies for diapering available.

Findings: During the inspection, it was determined the required supplies were not available for diaper changing as noted in the following number(s) 1,2 below:

1. There was no disposable separation material;
2. There was no germicidal solution for sanitizing;
3. There were no plastic containers or bags for the storage of soiled clothing;
4. There was no clean supply of diapers;
5. There was no extra change of clothing;
6. Other [ ].

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

Corrective Action Plan Due: 03/15/2023

**Domain: 08 Staff Files**

Rule: 5101:2-13-07 Staff Records

Code: The provider is required to maintain current employee, child care staff members and resident records in the Ohio Professional Registry.

Findings: During the inspection, it was determined that employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 10. below:

1. The provider had not created or updated their individual profile in the OPR.
2. The provider had not created or updated the program's organizational dashboard in the OPR.
3. At least one employee, child care staff member, or substitute child care staff member had not created or updated their individual profile in the OPR.
4. At least one employee, child care staff member, or substitute child care staff member had not created an employment record in the OPR for the program on or before the first day of employment, including date of hire.
5. At least one employee, child care staff member, or substitute child care staff member had not updated changes to positions or roles in the OPR within five calendar days of the change.
6. The program's organizational dashboard in the OPR was not updated within five business days when at least one employee, child care staff member, or substitute child care staff member's scheduled days and hours changed.



7. The program's organizational dashboard in the OPR was not updated within five business days when at least one employee, child care staff member, or substitute child care staff member's group assignments changed, if applicable.
  8. The program's organizational dashboard in the OPR was not updated with the employment end date within five business days when at least one employee, child care staff member, or substitute child care staff member ended employment.
  9. At least one resident over the age of eighteen had not created a profile and employment record for the family child care provider within five days of becoming a resident or turning eighteen.
  10. The program's organizational dashboard in the OPR was not updated within five calendar days of a change in residency for at least one resident over the age of eighteen.
  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: 03/15/2023

**Domain: 08 Staff Files**

Rule: 5101:2-13-07 Provider Responsibilities

Code: The provider is required to have hours of availability to meet with parents posted in a noticeable place.

Findings: During the inspection, it was determined that the provider did not have hours of availability to meet with parents a noticeable location. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 03/15/2023

**Domain: 08 Staff Files**

Rule: 5101:2-13-09 Background Checks

Code: The program is required to have the applicable JFS 01176 "Program Notification of Background Check Review for Child Care" on file.

Findings: In review of the staff records, it was determined that background check requirements had not been followed, for the individual(s) listed on the Employee Record Chart, as noted in number(s) 2, below:

1. The JFS 01176 "Program Notification of Background Check Review for Child Care" the program received from the Department was not on file and the individual was not left alone with children.
2. The JFS 01177 "Individual Notification of Background Check Review for Child Care" was on file instead of the JFS 01176.
3. The JFS 01176 on file was for a different program.



Submit the program's corrective action plan, which includes a statement that the correct form is now on file, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/15/2023

### 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	
5101:2-13-02 Type A Ownership	Compliant	
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	
5101:2-13-08 Child Care Staff Requirements	Compliant	
5101:2-13-08 Whistle Blower	Compliant	
5101:2-13-10 Health Training	Compliant	
5101:2-13-10 Professional Development	Compliant	
5101:2-13-12 Safe Equipment	Compliant	
5101:2-13-13 Clean environment and equipment	Compliant	
5101:2-13-13 Handwashing	Compliant	
5101:2-13-13 Smoke Free	Compliant	
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 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	
<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>
5101:2-13-18 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	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-20 Crib and Playpen Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-22 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
5101:2-13-25 Medication Requirements	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
5101:2-13-11 Indoor Space	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Review Policies and Procedures	Compliant	