



## Center Licensing Inspection Full Report

All licensed child care programs are inspected at least once each year. Non-compliances are documented and grouped as Serious, Moderate or Low risk violations. Documenting statements and supplemental information may be included in this report. Licensing inspection reports from the previous three years can be viewed on the child care website at <http://jfs.ohio.gov/CDC/childcare.stm>. This includes complaint investigation reports with substantiated allegations. For any other child care records, please contact the Child Care Help Desk at 1-877-302-2347, option 4.

Program Details			
Program Name Cleveland Metroparks Nature Preschool at North Chagrin Reservation	Program Number 2200021851	Program Type Child Care Center	
Address 401 Buttermilk Falls Parkway Mayfield Village OH 44143		County CUYAHOGA	
Building Approval Date 06/15/2020	Use Group/Code E	Occupancy Limit 217	Maximum Under 2 ½
Fire Inspection Approval Date 06/09/2023	Food Service Risk Level Exempt		

Inspection Information		
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 10/05/2023	Begin Time 8:50 AM	End Time 12:20 PM
Reviewer: Kathryn Noftz		

Summary of Findings				
No. Rules Verified 58	No. Rules with Non-compliances 2	No. Serious Risk 0	No. Moderate Risk 1	No. Low Risk 1

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		0	0	0
<b>Total Under 2 ½ Years</b>	0	0	0	0
Older Toddler		0	0	0
Preschool		0	27	27
School Age		0	0	0
<b>Total Capacity/Enrollment</b>	12	0	27	27

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



North Chagrin-A	3 years to < 4 years	2 to 11	
North Chagrin-A	3 years to < 4 years	2 to 11	
North Chagrin-A	3 years to < 4 years	2 to 11	

### 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: 09 Children's Files**

Rule: 5101:2-12-15 Medical/Physical Care Plans

Code: The program is required to have a completed JFS 01236 "Child Medical/Physical Care Plan for Child Care" on file at the program for any child having a health condition and must implement and/or follow instructions on the plan. The program is required to have staff trained to perform the procedures on the JFS 01236 "Child Medical/Physical Care Plan for Child Care" present at the program when the child requiring the procedure is onsite. Only staff who have been trained shall be permitted to perform the procedures listed on the JFS 01236.

Finding: In review of the children's records, it was determined the program did not meet the requirements for caring for at least one child, indicated on the Children Records Review, with a condition that requires a JFS 01236 ""Child Medical/Physical Care Plan"" as noted in number(s) 18,19,39,44 below:

1. No plan was on file.

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2. Child's name was missing.
3. Name of the condition was missing.
4. Indication if medication or medical food is required was missing.



5. Signs, symptoms or situations that require staff to take action were missing.
  6. Activities, foods, environmental conditions to avoid were missing.
  7. Training instructions for procedures for staff to follow were missing or incomplete.
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8. Child's name was missing or not attached.
  9. Child's date of birth was missing or not attached.
  10. Child's weight was missing or not attached.
  11. Name of the medication/medical food was missing or not attached.
  12. Dosage of medication/medical food to be administered was missing or not attached.
  13. Time for medication/medical food to be administered was missing or not attached.
  14. Expiration date for medication/medical food was missing or not attached.
  15. Symptoms that require staff to administer medication/medical food were missing or not attached.
  16. Specific instructions to administer the medication/medical food were missing or not attached.
  17. Actions to be taken if the symptoms do not subside were missing or not attached.
  18. Physician's signature was missing or not attached.
  19. The date of the physician's signature was missing or not attached.

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20. Child's name was missing.
21. Instructions regarding emergency evacuation, if applicable, were missing.
22. Signature of parent granting permission to implement the plan and verifying training was missing.
23. Date of parent signature was missing.
24. Certified Professional Trainer information was missing.
25. Signature of certified professional who trained the program staff was missing, if parent was not the trainer.
26. Date of trainer signature was missing.
27. Printed name(s) of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
28. Signature(s) of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
29. Date of staff signature was missing.
30. Administrator/Provider signature was missing.
31. Date of administrator/Provider was missing.

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32. Child's name was missing.
33. Name of medication or medical food was missing.
34. Date the medication/medical food was administered was missing.
35. Time medication/medical food was administered was missing.
36. Dosage of medication/medical food that was administered was missing.
37. Signature of person administering medication/medical food was missing.
38. The plan was not followed or implemented.
39. The plan was not able to be implemented due to conflicting information.
40. None of the child care staff members trained in the procedures on the JFS 01236 were onsite when a child requiring the plan was present.
41. Child care staff members trained in the procedures on the JFS 01236 were not scheduled to be present the entire the time the child requiring the plan was onsite.
42. None of the child care staff members trained in the procedures on the JFS 01236 accompanied the child requiring the plan during a trip.



43. A child care staff member who had not been trained in the procedures on the JFS 01236 performed the procedure.

44. Medication listed in the procedures to follow was not onsite available to administer as instructed and alternate instructions for this situation were not included on the plan.

Provide staff training. Submit the program's corrective action plan, which includes a copy of the completed JFS 01236, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/04/2023

#### Low Risk Non-Compliances

##### Domain: 05 Health & Safety

Rule: 5101:2-12-16 Emergency Drills

Code: The program is required to complete fire drills, weather drills, and emergency/lockdown drills appropriately.

Finding: During the inspection, it was determined that the required drills were not completed for item number(s) 1,2 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 the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/04/2023



**Rules In-Compliance/Not Verified**

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	
5101:2-12-02 Current Information	Compliant	
5101:2-12-03 Inspection Requirements	Compliant	
5101:2-12-04 Building Department Inspection	Compliant	
Rule: 5101:2-12-04 Fire Inspection	Compliant	Documenting Statement: Please Note: Documentation of a fire inspection without any uncorrected violations must be secured for the program. Secure a new fire inspection by 6-9-24
Rule: 5101:2-12-04 Food Service Requirements	Compliant	Documenting Statement: The program has obtained a food service exemption status from the local health department.
5101:2-12-07 Administrator Qualifications	Compliant	
5101:2-12-07 Administrator Responsibilities/Requirements	Compliant	
5101:2-12-07 Written Program Policies and Procedures	Compliant	
5101:2-12-08 Medical Statement	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Orientation Training & Whistle Blower Protection	Compliant	
5101:2-12-09 Background Check Requirements	Compliant	
5101:2-12-10 Health Training Requirements	Compliant	
5101:2-12-10 Professional Development Requirements	Compliant	
5101:2-12-11 Indoor Space Requirements	Compliant	
5101:2-12-12 Safe Equipment	Compliant	
5101:2-12-12 Safe Environment	Compliant	
5101:2-12-13 Sanitary Equipment and Environment	Compliant	
5101:2-12-13 Handwashing Requirements	Compliant	
5101:2-12-13 Smoke Free Environment	Compliant	
Rule: 5101:2-12-14 Transportation and Field Trip Procedures	Compliant	Documenting Statement: The form(s) used by the program for routine and/or field trips were verified to meet the requirements of the rule.
Rule	Status	Documenting Statement(s), If applicable



5101:2-12-15 Child Medical and Enrollment Records	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-16 First Aid/Standard Precautions	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-16 Management of Communicable Disease	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-16 Incident/Injury Reporting	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-16 Written Disaster Plan	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-17 Daily Schedule	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-17 Materials and Equipment	Compliant	Documenting Statement: Sufficient equipment was observed in all categories.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-18 License Capacity	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-18 Ratio	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-18 Group Size	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-18 Attendance Records	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>



5101:2-12-19 Supervision	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-19 Child Guidance	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-22 Safe Food Handling/Storage	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-25 Medication Administration	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-08 Child Care Staff Member Educational Requirements	Compliant	