

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	Program Number	Program Type
Kayela's ABC & 123 Childcare	2200021875	FCC - Type B Home
Address		County
6562 Cheviot Rd		HAMILTON
#11		
Cincinnati		
OH 45247		

Inspection Information				
Inspection Type	Inspect	ion Scope	Inspection Notice	
Compliance	Full		Unannounced	
Inspection Date	Begin T	īme	End Time	
05/25/2023	11:15	AM	12:55 PM	
Reviewer:				
Lisa Johnson-Garrett				
Summary of Findings				
No. Rules Verified	No. Rules with Non-complian	ces No. Serious R	isk No. Moderate Risk	No. Low Risk
68	9	0	1	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		0	0	0
Total Under 2 Years	3	1	0	1
Older Toddler		0	0	0
Preschool		2	0	2
School Age		2	0	2
Total Capacity/Enrollment	6	4	0	5

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Inspection 5/25/23	Mixed Age Group	1 to 3	



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: 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 over 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: 07/01/2023

Low Risk Non-Compliances

Domain: 01 Ratio & Supervision Rule: 5101:2-13-18 Attendance



Code: The program is required to maintain attendance records.

Findings: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number(s) 1 below:

- 1. No attendance record was being maintained.
- 2. The attendance record was not being consistently completed.
- 3. The original attendance documentation was not kept at the program for a period of one year.

Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/29/2023

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 ki[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) 4 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).



requirements of this rule.

Corrective Action Plan Due: 06/29/2023

Domain: 05 Health & Safety Rule: 5101:2-13-16 Disaster Plan Code: The program is required to have a completed written disaster plan. Findings: During the inspection, it was determined the program's written disaster plan did not meet the requirement or was missing the information in number(s) 1 below: Procedures: 1. The written disaster plan had not been completed 2. The plan was not provided to all child care staff and employees 3. Weather emergencies and natural disasters which include severe thunderstorms, tornadoes, flash flooding, major snowfall, blizzards, ice storms or earthquakes 4. Emergency outdoor and indoor lockdown or evacuation due to threats of violence which includes active shooter, bioterrorism or terrorism 5. Emergency or disaster evacuations due to hazardous materials and spills, gas leaks or bomb threats. 6. Outbreaks, epidemics or other infectious disease emergencies 7. Loss of power, water, or heat 8. Other threatening situations that may pose a health or safety hazard to the children in the program Details: 9. Shelter in place or evacuation, how the program will care for and account for the children until they can be reunited with the parent 10. Assisting infants and children with special needs and/or health conditions 11. Emergency contact information for parents and the program 12. Procedures for notifying and communicating with parents regarding the location of the children if evacuated 13. Procedures for communicating with parents during loss of communications, no phone or internet service available 14. The location of supplies and procedures for gathering necessary supplies for staff and children if required to shelter in place 15. What to do if a disaster occurs during the transport of children or when on a field trip or routine trip 16. Making the plan available to all child care staff members and employees 17. Training of staff or reassignment of staff duties as appropriate 18. Updating the plan on a yearly basis 19. Contact with local emergency management officials Add the missing information to the disaster plan. Submit the program's corrective action plan, which includes the missing information, to the Department to verify compliance with the requirements of this rule. Corrective Action Plan Due: 06/29/2023

Correct the violation and submit the program's corrective action plan to verify compliance with the



Domain: 06 Program Information

Rule: 5101:2-13-14 Vehicle Inspections

Code: The program is required to complete and document weekly vehicle inspections.

Findings: During the inspection, it was determined that the program had not performed/documented weekly inspections of vehicles used for transporting children. The weekly inspection needs to include the following:

1. A visual inspection of the tires for wear and tire pressure;

- 2. A visual inspection of headlights, taillights, signals, mirrors, wiper blades, and dash gauges;
- 3. An inspection for properly functioning child and driver restraints;
- 4. An inspection for properly functioning doors and windows;
- 5. An inspection for, and cleaning of, debris from the inside of the vehicle;
- 6. Other [].

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

Corrective Action Plan Due: 06/29/2023

Domain: 06 Program Information

Rule: 5101:2-13-14 Requirements for Field and Routine Trips

Code: The program is required to have written parental permission for trips on file.

Findings: During the inspection, it was determined that written parental permission was not secured for field trips and/or routine trips off the premises or out of the areas approved for child care, as required. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/29/2023

Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-20 Crib and Playpen Requirements Code: The program is required to refrain from using a crib that is assigned to a child for storage.

Findings: During the inspection, it was determined that a crib/playpen, assigned to a child, was used for storage. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 06/29/2023



Domain: 08 Staff Files

Rule: 5101:2-13-07 Provider Responsibilities

Code: The provider is required to cooperate with any other government agencies as necessary to maintain compliance with Chapter 5101:2-13 of the Administrative Code.

Findings: During the inspection, it was determined the provider did not cooperate with other government agencies to maintain compliance with the licensing rules in that Providing proof of resident in/out of the home, existing application prove residence in your home. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/01/2023

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) 1 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: 06/29/2023



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	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Information in OCLQS	Compliant	
5101.2 15 02 mornation in 0 0205	compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Provider Medical	Compliant	
S101.2-15-02 Provider Intedical	compliant	
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Rule		Documenting Statement(s), If applicable
5101:2-13-03 Inspection	Compliant	
Requirements		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Building Requirements	Compliant	
for Type B Homes		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Fire Safety for Type B	Compliant	
Homes		



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Flammable and	Compliant	
Combustible Materials in a Type B		
Home		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Heaters in a Type B	Compliant	
Home		
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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
5101:2-13-10 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	
Rule	Status	Documenting Statement(s), If applicable



Rule Status Documenting Statement(statement(statement)) 5101:2-13-12 Safe Equipment Compliant Compliant Rule Status Documenting Statement(statement)	
5101:2-13-12 Safe Equipment Compliant	
5101:2-13-12 Safe Equipment Compliant	
Rule Status Documenting Statement(s)	
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	s), If applicable
5101:2-13-12 Safe Environment Compliant	
Rule Status Documenting Statement(statement)	s), if applicable
5101:2-13-13 Clean environment and Compliant	
equipment	
Rule Status Documenting Statement(statement)	s), If applicable
5101:2-13-13 Handwashing Compliant	
Rule Status Documenting Statement(s	s), If applicable
5101:2-13-13 Smoke Free Compliant	
Rule Status Documenting Statement(statement(statement))	s), If applicable
5101:2-13-13 Toothbrushing Compliant	
Rule Status Documenting Statement(statement)	s), If applicable
5101:2-13-14 Ratio and Supervision Compliant	
for Field and Routine Trips	
Rule Status Documenting Statement(statement)	s), If applicable
5101:2-13-14 Driver Requirements Compliant	
Rule Status Documenting Statement(statement(statement))	s), If applicable
5101:2-13-14 Vehicle Requirements Compliant	
Rule Status Documenting Statement(statement)	s), If applicable



5101:2-13-15 Child Medical and	Compliant	
Enrollment Records		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Health Conditions	Compliant	Documenting statement(s), if applicable
5101.2-13-13 Health Conditions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Child Records Retention	Compliant	
and Confidentiality		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Medical, Dental, and	Compliant	bocumenting statement(s), in applicable
General Emergency Plan		
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
5101:2-13-19 Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 School Age Supervision	Compliant	Documenting statement(s), if applicable
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	Compliant	
Requirements		
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	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-22 Fluid Milk	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-22 Food Handling	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Infant Daily Care	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Infant Bottle and Food	Compliant	
Preparation		
	I	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Diapering	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-24 Parent Permission for	Compliant	
Swimming		
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Rule	Status	Documenting Statement(s), If applicable



	Consultant	
5101:2-13-25 Medication	Compliant	
Requirements		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-18 Group Size and Ratios	Compliant	
5101.2-15-18 Group Size and Natios	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13 Written Policies and	Compliant	
Procedures		
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	Decumenting Statement(c) If applicable
		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		