



## 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<br>LCFYMCA At Central                   | Program Number<br>2200022188 | Program Type<br>Child Care Center |                   |
| Address<br>6565 Summit Road SW Pataskala<br>OH 43062 |                              |                                   | County<br>LICKING |
| Building Approval Date                               | Use Group/Code               | Occupancy Limit                   | Maximum Under 2 ½ |
| Fire Inspection Approval Date<br>08/04/2022          | Food Service Risk Level      |                                   |                   |

| Inspection Information         |                          |                                  |
|--------------------------------|--------------------------|----------------------------------|
| Inspection Type<br>Annual      | Inspection Scope<br>Full | Inspection Notice<br>Unannounced |
| Inspection Date<br>10/19/2022  | Begin Time 8:20 AM       | End Time 12:05 PM                |
| Reviewer:<br>STEPHANIE WALTERS |                          |                                  |

| Summary of Findings      |                                     |                       |                        |                   |
|--------------------------|-------------------------------------|-----------------------|------------------------|-------------------|
| No. Rules Verified<br>58 | No. Rules with Non-compliances<br>6 | No. Serious Risk<br>0 | No. Moderate Risk<br>3 | No. Low Risk<br>6 |

| 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   |                  | 42         | 0         | 42    |
| School Age  |                  | 0          | 33        | 33    |
| <b>Total Capacity/Enrollment</b>                          | 154              | 42         | 33        | 75    |

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



|            |                      |         |  |
|------------|----------------------|---------|--|
| Dinosaurs  | 4 years to < 5 years | 2 to 6  | At arrival                                 |
| Dinosaurs  | 4 years to < 5 years | 2 to 9  |  |
| Frogs      | 3 years to < 4 years | 2 to 11 | At arrival,<br>combined with<br>Chameleons |
| Frogs      | 3 years to < 4 years | 1 to 8  |  |
| Chameleons | 3 years to < 4 years | 1 to 6  | In room                                    |
| Chameleons | 3 years to < 4 years | 1 to 10 |  |

### 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: 5101:2-12-12 Safe Environment

Code: The program is required to store chemicals and machinery in a place that is inaccessible to children. The program is required to provide an outdoor play area away from machinery in operation.

Finding: During the inspection, a potentially hazardous item or toxic substance was used or stored in cabinet under sink in the Chameleon room where children had access to it, as noted in number(s) 1, 2, 9 below.

1. Bleach.
2. Cleaning agent.
3. Fish tank chemicals.
4. Gasoline.
5. Pesticide.



6. Poison, including insect/rodent poison.
7. Flammable substance.
8. Windshield washer fluid.
9. Aerosol cans. air freshener
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: 12/14/2022

#### Domain: 08 Staff Files

Rule: 5101:2-12-09 Background Check Requirements

Code: The program is required to have staff update their background checks every five years as required.

Finding: In review of the staff records, it was determined that background checks were not updated every five years for the individual(s) listed on the Employee Record Chart as noted in number(s) 3 below:

1. Owner;
2. Administrator;
3. Child Care Staff Member, employee.

Submit the program's corrective action plan, which includes a statement the background check update has been requested, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/14/2022

#### 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. The program is required to implement and/or follow instructions on the JFS 01236 for a child with a health condition.



Finding: A written, signed and dated JFS 01236 "Child Medical/Physical Care Plan for Child Care" must be on file for any child having health conditions which require monitoring for symptoms, or a medical procedure be performed, or ongoing administration of medication or medical foods at the program. In review of the children's records, it was determined that the required written information was either not on file, implemented or followed, for at least one child indicated on the Children Records Review, as noted in number(s) 18 below:

1. No plan was on file.
2. Child's name was missing.
3. Child's date of birth was missing.
4. Name of the condition was missing.
5. Indication if medication is required was missing.
6. Symptoms to watch for were missing.
7. Directions for when should the medication or medical food be administered were missing.
8. Instructions for administration were missing.
9. Conditions that trigger the need for medication or medical foods were missing.
10. Expected results of the medication or medical food were missing.
11. Actions to be taken if the symptoms do not subside were missing.
12. Activities, foods, environmental conditions to avoid were missing.
13. Training instructions were missing.
14. Directions for action to be taken if expected result of medication or medical food does not occur were missing.
15. Instructions regarding emergency evacuation, if applicable, were missing.
16. Dated signature of parent was missing.
17. Dated signature of certified professional who trained the program staff was missing, if parent was not the trainer.
18. Printed name(s)/Dated signature(s) of child care staff member(s) trained to perform the procedure were missing.
19. Dated signature(s) of administrator was missing.
20. Name of any applicable medication was missing.
21. Date medication was administered was missing.
22. Time medication was administered was missing.
23. Dosage administered was missing.
24. Signature of staff member who administered the medication was missing.
25. 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.
26. The plan was not implemented.
27. The plan was not able to be implemented due to conflicting information.
28. The plan was not followed.

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: 12/14/2022



### Low Risk Non-Compliances

#### Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to provide an environment that protects the children in care from any items and conditions that may threaten their health, safety, and well-being.

Finding: 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 number(s) 5 below:

1. Open pull cords that are not closed loop.
2. Telephone cords.
3. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
4. Stacked chairs.
5. Employee(s) purse(s). in reach in the unlocked cabinet in the Chameleon room
6. Diaper bags.
7. Television not securely anchored.
8. Small or lightweight pieces of shelving units are not securely anchored to the wall.
9. Smoke detector needing batteries replaced.
10. Staff member stepped over a barrier/gate while holding a child.
11. Emergency exits were blocked by the following classroom furniture: [ ].
12. Other [ ].

Provide staff training. 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: 12/14/2022

#### Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to be completed and on file at the program.

Finding: In review of the staff records, it was determined a completed medical examination statement for the employee(s) listed on the Employee Record Chart was not on file, as required by this rule. Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, to verify compliance with the requirements of this rule.



Corrective Action Plan Due: 12/14/2022

**Domain: 08 Staff Files**

Rule: 5101:2-12-10 Health Training Requirements

Code: The program is required to have all child care staff members complete training in child abuse and neglect recognition and prevention within sixty days of hire. Staff must complete training in first aid and CPR within the first ninety days of hire.

Finding: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in number(s) 2 below:

1. Child abuse and neglect recognition and prevention training was not completed within sixty days of hire.
2. First aid training was not completed within ninety days of hire.
3. Cardiopulmonary resuscitation (CPR) training was not completed within ninety days of hire.
4. The child abuse and neglect recognition and prevention training was expired.
5. The first aid training was expired.
6. The CPR training was expired.

Refer to the Employee Record Chart for the name(s) of the child care staff member(s) who must complete the required health and safety training(s). Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/14/2022

**Domain: 08 Staff Files**

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to include all information.

Finding: In review of the staff records, it was determined that the medical statements for those employees listed on the Employee Record Chart did not include the required information listed below in number(s) 3, 4.

1. Date of examination;
2. Signature, business address, and telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination;
3. A statement that verifies that the employee is:
  - a. Physically fit for employment in a program caring for children;



- b. Immunized against Tetanus, Diphtheria, Pertussis (Tdap);
- c. Immunized against Measles, Mumps, and Rubella (MMR);
- 4. Tuberculosis (TB) screening/test

- a. Documentation of the screening process to determine if the employee resided in a country identified by the World Health Organization as having a high burden of TB and arrived in the United States within the five years preceding the date of application for employment;
- b. Results of a TB test for employees meeting both criteria in 4a;
- c. Results of additional testing for employees with a positive TB test;
- d. Written statement, signed by a representative of the TB control unit, that the employee's TB is no longer infectious or the individual is receiving a TB treatment regimen for employees with a positive TB test.

Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, or TB results/documentation, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/14/2022

#### **Domain: 08 Staff Files**

Rule: 5101:2-12-08 Orientation Training & Whistle Blower Protection

Code: The program is required to have staff complete the online staff orientation training.

Finding: In review of the staff records, it was determined that child care staff member(s) had not completed the online orientation training as noted in number(s) 1 below:

- 1. Within 30 days of starting employment at the program as a child care staff member.
- 2. No documentation of completing the training after December 31, 2016.
- 3. Completion of the training was not verified in the OPR.

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

Corrective Action Plan Due: 12/14/2022

#### **Domain: 09 Children's Files**

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

Code: The program is required to maintain a complete JFS 01236 "Child Medical/Physical Care Plan for Child Care" on file for any child having a health condition.



**Finding:** In review of the children's records, it was determined that the JFS 01236 "Child Medical/Physical Care Plan for Child Care" did not meet the requirements of the rule as noted in number(s) 3 below:

1. The JFS 01236 had not been updated as needed and at least annually.
2. A separate JFS 01236 had not been used for each condition.
3. The program used an old version of the JFS 01236.

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

Corrective Action Plan Due: 12/14/2022

#### Rules In-Compliance/Not Verified

| Rule  | Status    | Documenting Statement(s), If applicable |
|---|-----------|---|
| 5101:2-12-02 License Posted                 | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-02 Current Information            | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-03 Inspection Requirements        | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-04 Building Department Inspection | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-04 Fire Inspection                | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |



|   |           |   |
|---|-----------|---|
| Rule: 5101:2-12-04 Food Service Requirements                  | Compliant | Documenting Statement: The food service license was observed posted. Following is the audit number and date of expiration: LKIN-CBMLJF 3/1/23.                                    |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-07 Administrator Qualifications                     | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-07 Administrator Responsibilities/Requirements      | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-07 Written Program Policies and Procedures          | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-08 Child Care Staff Member Educational Requirements | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-10 Professional Development Requirements            | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-11 Indoor Space Requirements                        | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-11 Outdoor Space Requirements                 | Compliant | Documenting Statement: The quarterly playground inspections were completed and documented, as required. The most recent inspection report form was dated 10/1/22.                 |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-11 Outdoor Play Equipment                     | Compliant | Documenting Statement: The outdoor play space and equipment were not viewed during this inspection due to inclement weather conditions; however, the requirements were discussed. |
| Rule  | Status    | Documenting Statement(s), If applicable   |



| Rule: 5101:2-12-11 Outdoor Play Fall Zones                     | Compliant | Documenting Statement: The protective surfaces under the outdoor equipment were not viewed during this inspection due to muddy conditions; however, the requirements were discussed. |
|--|-----------|--|
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-12 Safe Equipment                                    | Compliant |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-13 Sanitary Equipment and Environment          | Compliant | Documenting Statement: During the inspection, the equipment was observed clean and in good repair.   |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-13 Handwashing Requirements                          | Compliant |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-13 Smoke Free Environment                            | Compliant |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-14 Transportation and Field Trip Procedures    | Compliant | Documenting Statement: The form(s) used by the program for routine trips were verified to meet the requirements of the rule.   |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-15 Child Medical and Enrollment Records        | Compliant | Documenting Statement: At the time of the inspection, 25% of the children's records were reviewed, and the records were complete, as required by the rule.                           |
| Rule: 5101:2-12-15 Child Medical and Enrollment Records        | Compliant | Documenting Statement: In review of 25% of the records, at the time of the inspection, children's medical statements were complete and on file, as required by the rule.             |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan | Compliant | Documenting Statement: On the day of the inspection, the complete prescribed JFS 01242 "Medical, Dental, and General   |



|   |           | Emergency Plan For Child Care” were posted in the program as required.   |
|---|-----------|--|
| Rule  | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-16 Emergency Drills               | Compliant | Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection. |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-16 First Aid/Standard Precautions | Compliant | Documenting Statement: During the inspection, the program had complete first aid kits available as required.                         |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-16 Management of Communicable Disease   | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-16 Incident/Injury Reporting            | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-16 Written Disaster Plan          | Compliant | Documenting Statement: The program’s written disaster plan was reviewed during the inspection and met the requirements.              |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-17 Daily Schedule                       | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-17 Materials and Equipment              | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-17 Daily Outdoor Play                   | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-18 License Capacity                     | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |



|  |           |   |
|--|-----------|---|
| Rule: 5101:2-12-18 Ratio                 | Compliant | Documenting Statement: Staff/child ratios observed during the inspection were in compliance.  |
| Rule                                     | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-18 Group Size                  | Compliant |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-18 Attendance Records    | Compliant | Documenting Statement: During the inspection, attendance records were reviewed. Child Care Staff Members were viewed recording the attendance for each child upon arrival and departure. All attendance records met the requirements of the rule and were kept with the group at all times. |
| Rule                                     | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-19 Supervision                 | Compliant |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-19 Child Guidance              | Compliant |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-20 Cots and Napping            | Compliant |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-22 Meal and Snack Requirements | Compliant |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-22 Fluid Milk Requirements     | Compliant |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-22 Safe Food Handling/Storage  | Compliant |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-25 Medication Administration   | Compliant |   |



Department of Education  
Department of Job and Family Services