



Center Complaint Inspection Summary 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 Nurturing Excellence Child Enrichment Center LLC.	Program Number 2200022359	Program Type Child Care Center
Address 1008 East 152nd Street Suite B Cleveland OH 44110		County CUYAHOGA

Inspection Information			
Inspection Type Complaint		Inspection Scope Partial	Inspection Notice Unannounced
Reviewer(s) Brittani Aloï	Inspection Day 01/04/2024	Begin Time 11:20 AM	End Time 12:05 PM
Summary of Findings			
No. Rules Verified 6	No. Rules with Non-compliances 6	No. Serious Risk 1	No. Moderate Risk 1
		No. Low Risk 5	

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Preschool/School age	18 months to < 30 months	1 to 9	Group included one child under 2.5 years old
Infants/Toddlers	0 to < 12 months	1 to 3	



Complaint Allegations

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.

Domain:01 Ratio & Supervision

Rule: 5101:2-12-19 Supervision

Code: The program staff are not permitted to leave children unattended.

Allegation: A child was left unattended outside of the building.

Determination: Substantiated

Findings: During the inspection, it was determined that children were not supervised while outside the program as noted in number(s) 7 below:

1. Child(ren) left unattended outside the facility building.
2. Child(ren) left unattended outside the facility building more than once.
3. Child(ren) left unattended off the program's premises.
4. Child(ren) left unattended during a swimming activity.
5. Child(ren) left unattended in a vehicle.
6. Child(ren) left unattended inside the building and no adults were present in the building.
7. Other- a child walked out of the facility building and was left unattended off the program's premises.

Children must be supervised and within sight and hearing of a child care staff member at all times. 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.

Risk Level: Serious

Corrective Action Plan Due: 02/21/2024

Summary of Additional Non-Compliances

Serious Risk Non-Compliances

No Additional Serious Risk Non-Compliances were observed during this inspection



Moderate Risk Non-Compliances

Domain:01 Ratio & Supervision

Rule: 5101:2-12-18 Ratio

Code: The program is required to maintain the appropriate staff to child ratio for each group served.

Findings: During the inspection, a ratio of 1 child care staff member(s) for 9 children was determined to have occurred for the Preschool/School age group when the situation in number(s) 15 below occurred:

1. A child care staff member stepped out of the room.
2. A child care staff member had not arrived at work on time.
3. Children were present who were not scheduled to be there.
4. A child care staff member was unable to work.
5. A child was injured in that group.
6. A child arrived in the group before a second staff member was scheduled to arrive with the group.
7. Two groups were combined, and the program did not follow the ratio for the youngest child in the group.
8. A child was transitioning to the next older age group, and the program did not follow the ratio for the youngest child in the group.
9. Ratio was doubled for more than two hours while children were napping.
10. Ratio was doubled while children were napping for a group that included at least one infant.
11. Ratio was doubled while children were napping and there were not enough staff members in the building to meet staff/child ratio.
12. Ratio was doubled in the school age group to allow access to the program, however, the program does not serve only school age children.
13. Both child care staff members did not have a working communication device when one staff member left the group to allow access to the school age only program.
14. The child care staff member did not return to the group after allowing access to the school age only program.
15. Other- there was a child in the room under 2.5 years old and the program did not follow the ratio for the youngest child in the group.

Additional child care staff members must be hired or current child care staff members must be rescheduled to maintain compliance. 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: 03/17/2024

Low Risk Non-Compliances

Domain:01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

Code: The program is required to maintain a record of the arrival and departure of each child. The program is also required to retain the original attendance record at the center for a period of one year.

Findings: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number(s) 2 below:

1. No attendance record was being maintained.
2. The attendance record was not being consistently completed.



3. The record did not include the name of at least one child.
4. The record did not include the birth date of at least one child.
5. The record did not include the assigned group.
6. The record did not include the child's weekly schedule.
7. The record did not include the time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.
8. The original attendance record was not kept at the program for a period of one year.

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

Corrective Action Plan Due: 03/17/2024

Domain:01 Ratio & Supervision

Rule: 5101:2-12-18 Group Size

Code: The program may combine all age groups when there are twelve or fewer children in the center.

Findings: During the inspection, it was determined groups which included children less than two and one half years were combined with groups of children two and one half years and older and there were more than 12 children in the center. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.

Domain:01 Ratio & Supervision

Rule: 5101:2-12-20 Cots and Napping

Code: The program is required to provide enough cots or mats for each child in attendance to be assigned their individual cot/mat. Cots and mats must be firm, resilient, and in good condition.

Findings: During the inspection, it was determined that cots or mats did not meet the requirements as noted in number(s) 2 below:

1. The program did not have enough individually assigned cots and/or mats for each child.
2. A child was sleeping on the floor.
3. Frames were bent/broken.
4. Covers were torn.
5. Cots were missing bolts.
6. Cots were sagging.
7. Legs on the cots were broken.
8. Cots did not stand at least 3 inches but no more than 18 inches off the floor.
9. Cots were not at least 36 inches in length and as long as the child is tall.
10. Mats were not at least 1 inch thick and as wide and long as the child assigned.
11. Other [].

Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.



Domain:01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

Code: The program is required to have a method for tracking the children in each group. The tracking method must be updated throughout the day and kept with the group at all times.

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

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 date of birth;
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 the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/17/2024

Domain:05 Health & Safety

Rule: 5101:2-12-16 Incident/Injury Reporting

Code: The program is required to submit notification of a serious incident in OCLQS by the next business day.

Findings: During the inspection, it was determined that a Serious Incident was not reported in the Ohio Child Licensing and Quality System (OCLQS), as required, by the program administrator or designee for an incident(s) as listed in number(s) 3 below:

1. An incident, injury or illness that required professional medical consultation or treatment.
2. An unusual or unexpected incident which jeopardizes the safety of a child, child care staff member or employee of the program.
3. An incident defined as a serious risk non-compliance in appendix A to rule 5101:2-12-03 of the Administrative Code.
4. The program did not submit the report in OCLQS by the next business day as required by rule.

Submit the program's corrective action plan, which includes a statement that the program administrator or designee has completed the Serious Incident Report in OCLQS, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/17/2024