



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 KCE Champions LLC @ Onaway	Program Number 2200023158	Program Type Child Care Center	
Address 3115 Woodbury Rd Suite 100 Shaker Heights OH 44120		County CUYAHOGA	
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date	Food Service Risk Level Exempt		

Inspection Information		
Inspection Type Provisional	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 10/28/2021	Begin Time 11:00 AM	End Time 11:15 AM
Inspection Date 10/28/2021	Begin Time 3:30 PM	End Time 5:45 PM
Inspection Date 10/29/2021	Begin Time 1:30 PM	End Time 2:00 PM
Reviewer: Brittani Aloï		
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Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
57	8	0	2	10

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
Total Under 2 ½ Years	0	0	0	0



Older Toddler		0	0	0
Preschool		0	0	0
School Age		0	80	80
Total Capacity/Enrollment	61	0	80	80

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Juniors	5 years to < Kindergarten	2 to 27	
Juniors	5 years to < Kindergarten	2 to 27	
Seniors	School-Age to < 11 years	2 to 14	
Seniors	School-Age to < 11 years	2 to 14	

Summary of Non-Compliances

If the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited. Ohio Administrative Code 5101: 2-12-03 details the process for submitting a request for a review if a program disagrees with a licensing finding. The request for review must be submitted within seven days from the receipt of the licensing report.

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

Moderate Risk Non-Compliances
Domain: 08 Staff Files
<u>Rule:</u> 5101:2-12-09 Background Check Requirements
<u>Code:</u> The program is required to have all staff request background checks as required.
<u>Finding:</u> In review of the staff records, it was determined that background checks were not requested for the person(s) listed on the Employee Record Chart as noted in number(s) 1, 2 below:
<ol style="list-style-type: none"> 1. Submitting the JFS 01175 "Request for a Background Check for Child Care" to the Department or the OPR; 2. Submitting fingerprints electronically according to the process established by BCI.



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

Corrective Action Plan Due: 11/28/2021

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" 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 "Child Medical/Physical Care Plan" for a child with a health condition.

Finding: A written, signed and dated JFS 01236 "Child Medical/Physical Care Plan" must be on file for any child having health conditions which require monitoring for symptoms or a medical procedure be performed 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) 1, 9, 13 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. Symptoms to watch for were missing.
6. Action to be taken if symptoms to occur were missing.
7. Activities/foods/environmental conditions to avoid, if applicable, were missing.
8. Medical procedures to be followed were missing.
9. Expected benefit was missing.
10. Name of any applicable medication was missing.
11. 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.
12. Instructions regarding emergency evacuation, if applicable, were missing.
13. Training instructions were missing.
14. Dated signature of parent or certified professional who trained the program staff was missing.
15. Dated signature(s) of child care staff member(s) trained to perform the procedure were missing.
16. Directions regarding additional services, if applicable, were missing.
17. Dated signature of parent giving permission to perform the procedure was missing.
18. Dated signature of program administrator was missing.
19. The plan was not implemented.
20. The plan was not able to be implemented due to conflicting information.
21. The plan was not followed.

Submit the program's corrective action plan, which includes a copy of the completed JFS 01236 "Child Medical/Physical Care Plan", to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/28/2021



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Low Risk Non-Compliances

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

Code: The program is required to have the information listed in rule on all attendance records.

Finding: During the inspection, it was determined that the attendance records did not include the required information listed in number(s) 5 below:

1. The name of the child.
2. The birth date of the child.
3. The assigned group.
4. The child's weekly schedule.
5. The time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.

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

Corrective Action Plan Due: 11/28/2021

Domain: 08 Staff Files

Rule: 5101:2-12-08 Orientation and Staff Records

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.

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



Corrective Action Plan Due: 11/28/2021

Domain: 08 Staff Files

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

Code: The program is required to have staff complete the required one hour prescribed Child Abuse training.

Finding: In review of the staff records, it was determined that the requirement for the ODJFS one-hour prescribed Child Abuse Training was not met as noted in number(s) 1 below:

1. The training was not completed within sixty days of hire;
2. The training expired, as it is only valid for two years;
3. Not all administrators, Child Care Staff Members, and substitutes have completed the training.

Refer to the Employee Record Chart for the name(s) of the Child Care Staff Member(s) who must complete the ODJFS one-hour prescribed Child Abuse Training. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/28/2021

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 that completed medical examination statement(s) for the employee(s) listed on the Employee Record Chart were 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: 11/28/2021

Domain: 08 Staff Files

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



Code: The program is required to receive a preliminary approval from ODJFS prior to allowing an individual to engage in assigned duties or be near children.

Finding: During the inspection, it was determined that individual(s) had engaged in assigned duties or were near children and preliminary approval from ODJFS was not on file as required. Submit the program's corrective action plan, which includes a copy of the preliminary approval or a statement that the individual(s) are no longer engaged in assigned duties and is not near children, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/28/2021

Domain: 08 Staff Files

Rule: 5101:2-12-07 Administrator Responsibilities/Requirements

Code: The program administrator is required to maintain current employee records in the Ohio Professional Registry.

Finding: During the inspection, it was determined employment records were not entered or updated within five calendar days of the change in the Ohio Professional Registry (OPR) as noted in number(s) 1, 2, 3 below:

1. At least one administrator, employee or child care staff member (including substitutes) had not created an employment record in the OPR for the program.
2. The administrator had not assigned at least one employee or child care staff member to the program's organization dashboard in the OPR.
3. At least one individual's schedule was not current.
4. At least one individual's position or role was not current.
5. At least one individual's employment had not been end dated.
6. Other: []

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

Corrective Action Plan Due: 11/28/2021

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to be completed within the previous 12 months from the employee's first day of employment.



Finding: In review of the staff records, it was determined that medical examination statement(s) on file at the program were not dated within 12 months of the employee's first day of employment, for the employee(s) listed on the Employee Record Chart. Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/28/2021

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.

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: 11/28/2021

Domain: 08 Staff Files



Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements

Code: The program staff is required to have educational verification on file at the program.

Finding: In review of the staff records, it was determined that verification of a high school education was not on file for Child Care Staff Member(s) listed on the Employee Record Chart, as required. Submit the program's corrective action plan, which includes a copy of the verification of a high school education, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/28/2021

Domain: 08 Staff Files

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

Code: The program is required to maintain a current JFS 01176 "Program Notification of Background Check Review for Child Care" on file for each staff.

Finding: 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) 3 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 the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/28/2021

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
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5101:2-12-22 Meal and Snack Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Handwashing Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of Communicable Disease	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator Qualifications	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Sanitary Equipment and Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Fluid Milk Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard Precautions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food Handling/Storage	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Emergency Drills	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Materials and Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Building Approval	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 Current Information	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Schedule	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cots and Napping	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Child Medical and Enrollment Records	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-10 Professional Development Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury Reporting	Compliant	
Rule	Status	Documenting Statement(s), If applicable



5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	
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 Ratio	Compliant	Documenting Statement: Staff/child ratios observed during the inspection were in compliance.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-25 Medication Administration and Food Supplements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-03 Inspection Requirements	Compliant	