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
Coley's Care	2200023289	FCC - Type B Home
Address		County
3801 35th St. NE		STARK
Canton		
OH 44705		

	Insp	ection Information		
Inspection Type	Inspection So	cope	Inspection Notice	
Compliance	Full		Announced	
Inspection Date	Begin Time		End Time	
11/30/2023	7:55 PM		9:15 PM	
Reviewer:				
Raquel Borsellino				
	Sui	mmary of Findings		
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
68	9	0	1	9

Lic	ense Capacity and	d Enrollment a	at the Time of I	nspection
Age Group	License Capacity	Enrollment		
	Totals	Full Time	Part Time	Total
Infant (Birth to < 18 m)		2	0	2
Young Toddler		3	0	3
Total Under 2 Years	3	5	0	5
Older Toddler		0	0	0
Preschool		4	0	4
School Age		6	0	6
Total Capacity/Enrollment	6	10	0	15

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Nicole Maske	Mixed Age Group	1 to 2	



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.

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

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-13-11 Outdoor Space

Code: The program is required to have an outdoor play space free from immediate risk.

Findings: During the inspection, it was determined that an area was used which was not protected from traffic and other hazards by a continuous fence in good condition, or natural barrier, that ensured children were not able to leave the playground area. The fence or natural barrier was determined to present an immediate risk for a child to be able to leave the play area as noted in number 1 below:

- 1. The fence, natural barrier, or combination of fence and natural barrier was not continuous.
- 2. The fencing had missing slat boards through which children could leave the playground.
- 3. The gate was broken and did not close.
- 4. The latch on the gate was broken.
- 5. The gate had no latch.
- 6. The fencing was broken.
- 7. The latch was easily opened by children on the playground.
- 8. The latch was not engaged to prevent children from opening the gate.
- The portable fencing approved for use by the Department was not being used.
- 10. Other [].

Discontinue use of the playground and provide a space for outdoor play which is well defined by a continuous fence or natural barrier and protected from other hazards. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/31/2023



Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5101:2-13-04 Fire Safety for Type B Homes

Code: The program is required to maintain smoke alarms in the appropriate areas of the program building.

Findings: During the inspection, it was determined that the Type B Home did not have a working smoke alarm on each level of the home. A working smoke alarm must be placed, installed, tested, and maintained in accordance with manufacturer's recommendations. Submit the program's corrective action plan to verify compliance with this rule.

Corrective Action Plan Due: 12/31/2023

Domain: 00 License & Approvals

Rule: 5101:2-13-02 Information in OCLQS

Code: The provider is required to keep their information current in OCLQS.

Findings: During the inspection, it was determined the information in number 5 below was not up to date in the Ohio Child Care Licensing and Quality System:

- 1. Mailing Address;
- 2. Telephone Number;
- 3. Email Address;
- 4. Days and Hours of Operation;
- 5. Services Offered;
- 6. Name of Program, If applicable.
- 7. Private pay rates.

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

Corrective Action Plan Due: 12/31/2023

Domain: 03 Postings & Equipment

Rule: 5101:2-13-16 Medical, Dental, and General Emergency Plan

Code: The program is required to post the fire and weather alert plan with a diagram.

Findings: During the inspection, it was determined the following information was not posted for item number 3 below:

- 1. Fire alert plan, including a diagram indicating evacuation routes.
- 2. Weather alert plan was missing details for [].
- 3. Weather alert plan was missing a diagram indicating evacuation routes.

Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 12/31/2023

Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-20 Crib and Playpen Requirements

Code: The program is required to provide mattresses in good condition and sheets that are not too large or too small for cribs and playpens.

Findings: During the inspection, it was determined that sheets, mattresses and/or mattress covers did not meet the rule requirement as noted in number 2 below:

- 1. At least one crib or playpen did not have a sheet.
- 2. At least one sheet was too large.
- 3. At least one sheet was too small.
- 4. At least one sheet was torn.
- 5. The mattress was not at least one and one-half inches thick.
- 6. The mattress was not firm.
- 7. There was space between the mattress and the sides and end panels of the crib or playpen which exceeded one and one-half inches.
- 8. The mattress cover was not waterproof.
- 9. The mattress cover was torn.
- 10. Other: [].

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

Corrective Action Plan Due: 12/31/2023

Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-23 Infant Bottle and Food Preparation

Code: The program is required to retain and update infant feeding instructions.

Findings: During the inspection, it was determined that written instructions for feeding the infants noted on the Children Record Review form were not on file, as required by this rule. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 12/31/2023

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) 1,2, & 11 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: Residents profile needs to eb updated with current schedule

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

Corrective Action Plan Due: 12/31/2023



Domain: 08 Staff Files

Rule: 5101:2-13-10 Health Training

Code: The program is required to meet the health training requirements.

Findings: In review of records, it was determined the provider did not have current valid documentation for training listed in number 14 below:

- 1. First Aid expired training
- 2. First Aid did not have verification of the completion of First Aid training
- 3. First Aid documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
- 4. CPR expired training
- 5. CPR had not taken CPR training
- 6. CPR did not have verification of the completion of CPR training
- 7. CPR training taken did not include all age groups and developmental levels of all children in care
- 8. CPR documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
- 9. CPR- audiovisual or electronic media training taken did not include an in-person component of the training
- 10. Communicable Disease expired training
- 11. Communicable Disease had not taken CD training
- 12. Communicable Disease did not have verification of the completion of CD training
- 13. Communicable Disease documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
- 14. Child Abuse expired training
- 15. Child Abuse had not taken Child Abuse training
- 16. Child Abuse documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule

Correct the violation and submit the documentation of current certification with the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 12/31/2023

Domain: 09 Children's Files

Rule: 5101:2-13-15 Child Medical and Enrollment Records

Code: The program is required to have a completed medical on file for each child.

Findings: In review of of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in number 4, 6, & 7 below:

- 1. No medical was on file for at least one child
- 2. Medical(s) on file was not updated every 13 months
- 3. Medical(s) were missing child's name and date of birth

- 4. Medical(s) were missing the date of the medical examination
- 5. The date of the exam was more than 13 months prior to the date the form was signed
- 6. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care
- 7. Medical(s) were missing the signature, business address and telephone number of the physician, physician's assistant(PA), advance practice nurse (APN) or certified nurse practitioner (CNP) who examined the child
- 8. Medical(s) were missing a record of immunizations the child has had specifying month, day and year
- 9. Medical(s) were missing a statement from the physician, PA, APN, or CNP that the child has been immunized or is in the process of being immunized against the diseases

required by division 5104.014 of the Revised Code and found in appendix A to this rule

10. Medical(s) were missing a statement from the child's parent or guardian that he or she has declined to have the child immunized against the disease for reasons of conscience, including religious convictions

11. Other []

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

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Corrective Action Plan Due: 12/31/2023

Domain: 09 Children's Files

Rule: 5101:2-13-15 Child Medical and Enrollment Records

Code: The program is required to have a completed JFS 01234 "Child Enrollment and Health Information for Child Care" on file on the premises for each child.

Findings: In review of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in numbers 6, 9, 8, 10, 11, 12, 13, 14 & 15 below:

- 1. No enrollment form was completed for at least one child
- 2. The current JFS 01234 was not completed for at least one child
- 3. Complete child information
- 4. Complete parent information
- 5. Complete emergency contact information
- 6. Complete physician information
- 7. Information regarding the parent list
- 8. Health information
- 9. Additional information for all boxes checked "yes"
- 10. Emergency transportation information
- 11. Parent/guardian's signature
- 12. Diapering Statement
- 13. Acknowledgement of Policies and Procedures
- 14. Enrollment form for at least one child was not updated by either the parent or the administrator

15. Enrollment form for at least one child was not signed by the administrator

16. Other []

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

Corrective Action Plan Due: 12/31/2023

Rules In-Compliance/Not Verified

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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 Provider Medical	Compliant	
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Rule	Status	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	'	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Flammable and	Compliant	
Combustible Materials in a Type B	'	
Home		
Rule	Status	Documenting Statement(s), If applicable
Nuic	Status	Documenting Statement(s), if applicable

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5101:2-13-04 Heaters in a Type B	Compliant	
Home		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Employee Requirements	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Child Care Staff	Compliant	bootinenting statement(s), in approasie
Requirements		
neganements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Whistle Blower	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-09 Background Checks	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-10 Professional	Compliant	bocumenting statement(s), if applicable
Development	Compilant	
Development		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Outdoor Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Fall Zone	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Safe Equipment	Compliant	bootimenting statement(s), it applicable
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Safe Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable

Designation.		
5101:2-13-13 Clean environment and	Compliant	
equipment		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Handwashing	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Smoke Free	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Toothbrushing	Compliant	
	1	
Rule	Status	Documenting Statement(s) If applicable
5101:2-13-14 Requirements for Field	Status Compliant	Documenting Statement(s), If applicable
<u> </u>	Compliant	
and Routine Trips		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Ratio and Supervision	Compliant	bocumenting statement(s), it applicable
for Field and Routine Trips	Compliant	
Tor ricid and Routine Trips		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Driver Requirements	Compliant	State of the state
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Vehicle Inspections	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Vehicle Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Health Conditions	Compliant	
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Rule	Status	Documenting Statement(s), If applicable

Designating.	1	1
5101:2-13-15 Child Records Retention	Compliant	
and Confidentiality		
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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 First Aid Kit/Standard	Compliant	bocumenting statement(s), it applicable
Precautions	Compliant	
Frecautions		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Communicable Diseases	Compliant	(-), spp
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Incident/Injury	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Disaster Plan	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-18 Attendance	Compliant	
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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	bocumenting statement(s), if applicable
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 Child Guidance	Compliant	g statement (e), is applicable
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Rule	Status	Documenting Statement(s), If applicable

5101:2-13-20 Sleep and Nap	Compliant	
Requirements		
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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	Socialite in ing state in ent(s), it applicable
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Rule 5101:2-13-22 Food Handling	Status Compliant	Documenting Statement(s), If applicable
3101.2-13-22 Food Hamaning	Compilant	
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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 Diapering	Compliant	
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
5101:2-13-25 Medication	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-07 Provider Responsibilities	Compliant	

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