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 |
| Kyhilia Johnson | 2200023300 | FCC - Type B Home |
| Address | | County |
| 9636 Wildbrook Ave | | HAMILTON |
| | | |
| Cincinnati | | |
| OH 45231 | | |

| Inspection Information | | | | |
|------------------------|--------------------------------|-------------------|-------------------|--------------|
| Inspection Type | Inspection So | cope | Inspection Notice | |
| Compliance | Full | | Unannounced | |
| Inspection Date | Begin Time | | End Time | |
| 03/29/2023 | 9:16 AM | | 9:49 AM | |
| Reviewer: | | | | |
| Jacob Downard | | | | |
| | Sui | mmary of Findings | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 68 | 4 | 0 | 0 | 4 |

| 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 Years | 3 | 0 | 0 | 0 |
| Older Toddler | | 2 | 0 | 2 |
| Preschool | | 0 | 0 | 0 |
| School Age | | 2 | 0 | 2 |
| Total Capacity/Enrollment | 6 | 4 | 0 | 4 |

| Staff-Child Ratios at the Time of Inspection | | | |
|--|--|--------|--|
| Group | Age Group/Range Ratio Observed Comment | | |
| 3/29/2023 | | 1 to 0 | |



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

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to store alcohol so it is not accessible to children.



Findings: During the inspection, alcohol was determined to be in a space that could be accessible to school age children during hours of operation but no children were present. These items must be removed or stored in space not approved or used for children as required. Submit the program's corrective action plan to verify compliance with this rule.

Corrective Action Plan Due: 04/29/2023

Domain: 08 Staff Files

Rule: 5101:2-13-07 Provider Responsibilities

Code: The provider is required to maintain the required liability insurance or have a completed JFS 01933

"Liability Insurance Statement for Family Child Care Providers" on file for each child in care.

Findings: During the inspection, it was determined the provider did not have a completed JFS 01933 "Liability Insurance Statement for Family Child Care Providers" completed for each child in care. Correct the violation and submit proof of insurance with the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 04/29/2023

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 both communicable disease and child abuse trainings.

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: 04/29/2023

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 the JFS 01234 "Child Enrollment and Health Information For Child Care", was missing information for Bakari. Please have the parent complete the second page checking every box that is required.

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

Corrective Action Plan Due: 04/29/2023

Rules In-Compliance/Not Verified

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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 License Visible | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Voluntary Temporary | Compliant | |
| Closure | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Change of Location | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Information in OCLQS | Compliant | 3 |
| 310112 10 02 11110111110111111 0 0 0 0 0 | Compilant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Provider Medical | Compliant | bocumenting statement(s), it applicable |
| 3101.2-13-02 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 | Decumenting Statement/s) If applicable |
| | | Documenting Statement(s), If applicable |
| 5101:2-13-04 Fire Safety for Type B | Compliant | |
| Homes | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Flammable and | Compliant | |
| | Compliant | |
| Combustible Materials in a Type B | | |
| Home | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| | | Documenting Statement(3), 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 Staff Records | Compliant | |
| 3101.2-13-07 Staff Records | Compilant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-07 Type B Provider - Foster | Compliant | |
| Parent | Compilant | |
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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 |
| | | bocumenting statement(s), if applicable |
| 5101:2-13-08 Child Care Staff | Compliant | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-08 Whistle Blower | Compliant | |
| 3101.2 13 00 Whistic blower | Compilant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-09 Background Checks | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-10 Professional | Compliant | |
| Development | ' | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-11 Outdoor Space | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-11 Outdoor Equipment | Compliant | |
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| 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 | g a manufacture of the second |
| 0-0-1-10 | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Clean environment and | Compliant | |
| equipment | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Handwashing | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Smoke Free | Compliant | bocumenting statement(s), it applicable |
| 3101.2-13-13 31110Ke 11ee | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Toothbrushing | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Requirements for Field | Compliant | |
| and Routine Trips | | |
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| Rule | Ctatus | Decumenting Statement(s) If and inchis |
| | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Ratio and Supervision | Compliant | |
| for Field and Routine Trips | | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-14 Driver Requirements | Compliant | |
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| 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 | |
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| Rule 5101:2-13-15 Health Conditions | Status | Documenting Statement(s), If applicable |
| | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-15 Child Records Retention | Compliant | |
| and Confidentiality | | |
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| Rule | Chatus | Decumenting Statement/s) If applicable |
| 5101:2-13-16 Medical, Dental, and | Status Compliant | Documenting Statement(s), If applicable |
| General Emergency Plan | Compilant | |
| deficial Emergency Fian | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Emergency Drills | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 First Aid Kit/Standard | Compliant | |
| Precautions | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Communicable Diseases | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Incident/Injury | Compliant | 5 |
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| Rule | Status | Documenting Statement(s), If applicable |

| 5101:2-13-16 Disaster Plan | Compliant | |
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| 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 | bocamenting statement(5), it applicable |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-19 School Age Supervision | Compliant | bocamenting statement(5), it applicable |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-19 Child Guidance | Compliant | Documenting Statement(s), if applicable |
| 3101.2-13-13 Clina dalatice | Compilant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-20 Sleep and Nap Requirements | Compliant | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-20 Crib and Playpen Requirements | Compliant | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-21 Evening and Overnight | Compliant | |
| Care | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-21 Sanitary Environment | Compliant | |
| and Hygiene | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-22 Meals and Snacks | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-22 Fluid Milk | Compliant | |

| Rule | Status | Decumenting Statement(s) If applicable |
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| | | Documenting Statement(s), If applicable |
| 5101:2-13-22 Food Handling | Compliant | |
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| Rule | Ctatus | Documenting Statement(s) If applicable |
| | Status | Documenting Statement(s), If applicable |
| 5101:2-13-23 Infant Daily Care | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-23 Infant Bottle and Food | | bocumenting statement(s), if applicable |
| | Compliant | |
| Preparation | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-23 Diapering | Compliant | bocamenting statement(3), it applicable |
| JIOI.2 13 23 Diapering | Compilant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-24 Parent Permission for | Compliant | bootimenting statement(s), it approase |
| Swimming | Compilant | |
| Switting | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 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 | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13 Written Policies and | Compliant | |
| Procedures | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-12 Carbon Monoxide | Compliant | |
| Detectors - Type B Only | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-11 Indoor Space | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-17 Programming | Compliant | bocumenting statement(s), if applicable |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-24 On-site Pools | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-12 Pets | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-24 Swimming Sites | Compliant | bootinening statement(s), it applicable |
| JIOI.2 IJ 27 JWIIIIIIIII JICS | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-17 Materials and | Compliant | |
| Equipment | | |