



## 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 Kid Friendly Academy	Program Number 2200023399	Program Type Child Care Center
Address 30840 Lakeshore Blvd Willowick OH 44095		County LAKE

Inspection Information			
Inspection Type Complaint		Inspection Scope Partial	Inspection Notice Unannounced
Reviewer(s) SHELLY WILLIAMS	Inspection Day 03/06/2023	Begin Time 10:00 AM	End Time 12:15 PM
Reviewer(s) SHELLY WILLIAMS	Inspection Day 03/17/2023	Begin Time 8:10 AM	End Time 9:00 AM

Summary of Findings				
No. Rules Verified 13	No. Rules with Non-compliances 13	No. Serious Risk 1	No. Moderate Risk 4	No. Low Risk 8

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Toddler 3	18 months to < 30 months	1 to 7	
Infant 1 and 2	0 to < 12 months	2 to 9	
Infant 1 and 2	0 to < 12 months	2 to 14	Day 2 Infant 1 and 2 combined with Toddler 1,2,and 3
Toddler 1 and 2	18 months to < 30 months	2 to 8	
PS	3 years to < 4 years	1 to 12	
PS	3 years to < 4 years	1 to 8	Day 2
Pre-K	3 years to < 4 years	1 to 10	
Pre-K	4 years to < 5 years	1 to 17	Day 2 School age and Pre-K combined and in hallway to bring children to the school bus
Pre-K	4 years to < 5 years	1 to 12	Day 2 Pre-k and School Age combined
School Age	School-Age to < 11 years	1 to 2	Day 2, Driver leaving to take



Department of Education  
Department of Job and Family Services

			children to school on center transportation
--	--	--	---



### 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 is required to ensure all staff are not under the influence of any substance that impairs their ability to supervise children or perform duties.

Allegation: Complainant alleged administrator was slurring words, extremely tired, and unable to perform the duties of her job.

Determination: Substantiated

Findings: During the inspection it was determined the program did not ensure all employees were not under the influence of any substance that impairs the Child Care Staff Member's ability to supervise children and/or perform duties, as noted in number(s) 3 below:

1. The Child Care Staff Member was under the influence of an illegal substance;
2. The Child Care Staff Member was under the influence of a substance that impairs the ability to supervise children;
3. The Child Care Staff Member was under the influence of a substance that impairs the ability to perform duties.

The Child Care Staff Member was fulfilling the administrator role; and this presented a risk to children. Provide staff training. Submit the program's corrective action plan, which includes a statement describing the action taken with the employee and a plan to ensure all employees adhere to these requirements, and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Risk Level: Moderate

Corrective Action Plan Due: 04/30/2023

#### 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.

Allegation: Complainant alleged classrooms were out ratio due to employees calling off.

Determination: Substantiated

Findings: During the inspection, a ratio of 2 child care staff member(s) for 14 and 1 child care staff member to 17 children was determined to have occurred for the Infant and Pre-K groups when the situation in number(s) 2,7 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 [ ].

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.

Risk Level: Moderate

Corrective Action Plan Due: 04/30/2023

**Domain:01 Ratio & Supervision**

Rule: 5101:2-12-19 Supervision

Code: The program staff is required to protect or remove a child from a situation and/or person that are determined to be unsafe.

Allegation: Complainant alleged that children were not protected from other children harming themselves or others and did not intervene to assist children. .

Determination: Substantiated

Findings: During the inspection, it was determined the administrator, child care staff, and/or employees of the program did not protect or remove children from a situation and/or person determined to be unsafe as noted in number(s) 2 below:

1. Verbal argument involving adults;
2. Staff member(s) allow child(ren) to do something unsafe;
3. Staff member(s) doing something unsafe;
4. Other [ ].

While the program did not protect the child(ren) from an unsafe situation and/or person, it was determined the situation would not or did not result in a serious incident or injury to a child. All program employees must take actions to protect children in care. 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: Low

Corrective Action Plan Due: 04/23/2023

**Domain:01 Ratio & Supervision**

Rule: 5101:2-12-19 Supervision



Code: The program staff is required to meet each child's basic, developmental, behavioral and special needs.

Allegation: Complainant alleged children's basic needs such as potty training, children's developmental needs and behavioral needs were not being met because children were being moved to other classrooms throughout the day, Program did not take parental preferences in account when parents requested the child not be moved to another classroom. The program did not follow a procedure to address or resolve a parental concern.

Determination: Substantiated

Findings: During the inspection, it was determined that child-care staff did not meet the basic needs of a child as noted in number(s) 4,9,10,11 below:

1. Assisting children with toileting
2. Assisting children with handwashing
3. Assisting children with basic hygiene
4. Responding appropriately to a child in distress
5. Assisting a child wiping his/her nose
6. Washing a child's face
7. Assisting a child in tying his/her shoes
8. Assisting a child in changing his/her clothes when needed
9. A child's developmental needs were not met
10. A child's behavioral needs were not met
11. Parental preferences, that were not in conflict with a licensing rule, were not followed

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 required at this time.

Risk Level: Low

Corrective Action Plan Due: 04/30/2023

### Domain:03 Postings & Equipment

Rule: 5101:2-12-17 Daily Schedule

Code: The program is required to have a balance of activities daily.

Allegation: Complainant alleged children's basic needs were not met in that learning activities were not completed consistently in the classrooms due to children being moved from room to room and inadequate staffing.

Determination: Substantiated

Findings: During the inspection, it was determined that the combined pre-k/School Age classroom(s) did not have a well-balanced program as noted in number(s) 1,2 below:

1. The classroom(s) did not provide opportunities for a balance of quiet and active play;
2. The classroom(s) did not provide activities to promote the children's physical, social-emotional, cognitive and language development;
3. The classroom(s) did not provide opportunities for child initiated activities.

A well-balanced program of activities suitable to the developmental levels and abilities of each child in care shall be implemented on a daily basis. 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 required at this time.



Risk Level: Low

Corrective Action Plan Due: 04/30/2023

**Domain:08 Staff Files**

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

Code: The program is required to have all staff request background checks as required.

Allegation: Complainant alleged that the administrator's husband was working in the building.

Determination: Substantiated

Findings: 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:

1. Submitting the request for a background check for child care in the OPR.
2. Submitting fingerprints electronically according to the process established by BCI.

Submit the program's corrective action plan, which includes a copy of the JFS 01176, to the Department to verify compliance with the requirements of this rule.

Risk Level: Moderate

Corrective Action Plan Due: 04/23/2023

**Summary of Additional Non-Compliances**

**Serious Risk Non-Compliances**

**Domain:01 Ratio & Supervision**

Rule: 5101:2-12-19 Supervision

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

Findings: During the inspection, it was determined that children were not supervised while outside the program as noted in number(s) 1 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 [ ].

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.



Corrective Action Plan Due: 03/29/2023

### Moderate Risk Non-Compliances

#### Domain:06 Program Information

Rule: 5101:2-12-14 Transportation - Vehicle Requirements

Code: The program is required to use the correct vehicle type as specified in rule. The program is also required to have all vehicles used to transport children inspected by an ASE certified mechanic, FMCSA inspector or the State Highway patrol annually, and correct all repairs that are listed on the vehicle inspection report.

Findings: During the inspection, it was determined the program used a vehicle to transport children that was not approved and/or did not have a current annual vehicle inspection indicating the vehicle was mechanically safe as noted in number(s) 1 below:

1. The program used a converted cargo van or passenger vans designed to carry nine or more passengers. The program must cease the use of this vehicle immediately.
2. The vehicle was not inspected.
3. The vehicle was inspected by someone other than an ASE certified mechanic, federal motor carrier safety administration (FMCSA) safety inspector or the Ohio State Highway Patrol.
4. The vehicle inspection was not updated annually.
5. The vehicle inspection completed from the Ohio Highway Patrol did not meet the rule requirement.
6. The annual safety check of the vehicle(s) used by the program to transport children noted repairs or corrections that had not been completed and/or documented. The safety violations need to be corrected immediately.

Submit the program's corrective action plan, which includes either discontinuing the use of the vehicle, documentation for any new vehicle now being used to transport children, or a copy of the JFS 01230 "Vehicle Inspection Report for Child Care Centers", to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/23/2023

### Low Risk Non-Compliances

#### Domain:01 Ratio & Supervision

Rule: 5101:2-12-18 Group Size

Code: The program is required to maintain the appropriate group size for each group of children served.

Findings: During the inspection, group size limitations were not maintained for the group of combined group of infants and toddlers as it was determined there were 14 children grouped together. The group size shall not exceed twice the maximum number of children allowed per Child Care Staff Member. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/23/2023



**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 original attendance documentation was not kept at the program for a period of one year.

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: 04/23/2023

**Domain:02 Safe & Sanitary Environment**

Rule: 5101:2-12-12 Safe Equipment

Code: The program is required to use straps on equipment that is manufactured with straps.

Findings: During the inspection, it was determined that the following equipment was not used according to manufacturer's guidelines as noted in number(s) 2 below:

1. The straps were missing on the [ ].
2. The straps were attached, but were not used on the high chairs.
3. The straps were attached and were used, but were not used in a safe manner.
4. Manufacturer's guidelines for the [ ] were not followed in that [ ].

Provide staff training. Submit the program's corrective action plan, which includes a statement that training has been provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/23/2023

**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.

Findings: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 1,2 below:

1. At least one administrator, employee or child care staff member (including substitutes) had not created a profile.
2. At least one administrator, employee or child care staff member had not created an employment record for the program on or before their first day of employment.





3. At least one administrator, employee or child care staff member had not updated changes to positions or roles within five calendar days of the change.
4. The administrator had not assigned at least one employee or child care staff member to the program's organization dashboard.
5. At least one individual's schedule was not current.
6. At least one individual's position or role did not include an applicable group assignment.
7. At least one individual's employment had not been end dated.
8. Other: [ ]

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

Corrective Action Plan Due: 04/30/2023

**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.

Findings: 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: 04/23/2023