

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 Deta | ails | |
|-----------------------------------|-------------------------|-----------------|-------------------|
| Program Name | Program Number | | Program Type |
| YMCA Early Learning Center at New | 2210024731 | | Child Care Center |
| Bremen | | | |
| Address | | | County |
| 714 E. Monroe St. New Bremen | | | AUGLAIZE |
| OH 45869 | | | |
| | | | |
| | | | |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ |
| 06/15/2021 | E | 98 | |
| Fire Inspection Approval Date | Food Service Risk Level | | |
| 02/03/2021 | Exempt | | |

| Inspection Information | | | | |
|---|--------------------------------|-------------------|-------------------|--------------|
| Inspection Type | Inspection So | cope | Inspection Notice | |
| Annual | Full | | Unannounced | |
| Inspection Date Begin Time 9:15 AM 01/06/2023 | | End Time 12:30 PM | | |
| Reviewer: SARA DIERKSHEIDE | | | | |
| Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58 | 2 | 0 | 1 | 1 |

| 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) | | 9 | 0 | 9 |
| Young Toddler | | 11 | 0 | 11 |
| Total Under 2 ½ Years | 26 | 20 | 0 | 20 |
| Older Toddler | | 4 | 0 | 4 |
| Preschool | | 30 | 0 | 30 |
| School Age | | 10 | 0 | 10 |
| Total Capacity/Enrollment | 98 | 44 | 0 | 64 |

| Staff-Child Ratios at the Time of Inspection | | | |
|--|--|----------------|---------|
| Group Age Group/Range | | Ratio Observed | Comment |

| Infants | 0 to < 12 months | 2 to 8 | |
|-----------|--------------------------|---------|--|
| Toddlers | 18 months to < 30 months | 2 to 13 | |
| Preschool | 3 years to < 4 years | 2 to 14 | |
| PreK | 4 years to < 5 years | 1 to 13 | |

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

Domain: 09 Children's Files

Rule: 5101:2-12-25 Medication Administration

<u>Code</u>: The program is required to use the appropriate form and retain current documentation to administer medications. The program is also required to obtain separate documentation for each medication and child, and retain on file each JFS 01217 "Request for Administration of Medication for Child Care" for at least one year. The program is required to administer medication only if it has the prescription label attached or has written instructions from a licensed physician. The program is also required to have each medication to be administered stored in its original container.

<u>Finding</u>: During the inspection, it was determined the program did not meet the requirement(s) for administering a medication or medical food that is not required by a JFS 01236 "Child Medical/Physical Care Plan for Child Care" or a prescription topical product to a child as noted in number(s) 6 below:

- 1. No JFS 01217 "Request for Administration of Medication for Child Care" was on file.
- 2. The child's name was missing on the JFS 01217.
- 3. The child's date of birth was missing on the JFS 01217 and was needed to determine the correct dosage.
- 4. The child's weight was missing on the JFS 01217 and was needed to determine the correct dosage.

- 5. The name of the medication was missing on the JFS 01217.
- 6. The exact dose was missing on the JFS 01217. The dosage on the JFS 1217 and the JFS 1236 was different. Please ensure that all dosages are consistent between forms.
- 7. The time to administer was missing on the JFS 01217.
- 8. The time period to administer was missing on the JFS 01217.
- 9. The medication's expiration date was missing on the JFS 01217.
- 10. The Parent/Guardian's dated signature was missing on the JFS 01217.
- 11. Physician instructions were missing on the JFS 01217.
- 12. Possible side effects were missing on the JFS 01217.
- 13. Physician's dated signature was missing on the JFS 01217.
- 14. Physician's phone number was missing on the JFS 01217.
- 15. Date medication was administered was missing on the JFS 01217.
- 16. Time medication was administered was missing on the JFS 01217.
- 17. Dosage administered was missing on the JFS 01217.
- 18. Staff member's signature was missing on the JFS 01217.
- 19. A prescription label was not attached to the prescription medication.
- 20. The medication or product, [], was not brought to the program in its original container.
- 21. Parent instructions conflict with either the manufacturer or physician instructions.

Submit the program's corrective action plan, which includes the completed JFS 01217 for each child needed, verification that the prescription label is now attached, and/or verification that the medication or product is now in its original container, and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/05/2023

Low Risk Non-Compliances

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

<u>Code</u>: 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.

<u>Finding</u>: 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: 02/05/2023

Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(s), If applicable |
|------------------------------------|-----------|--|
| Rule: 5101:2-12-02 License Posted | Compliant | Documenting Statement: The license was |
| | | in a location visible to parents as |
| | | required. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-02 Current Information | Compliant | |
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| | Lau | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-03 Inspection | Compliant | |
| Requirements | | |
| Dula | Chatter | December 1 Chatana and 1 If a malicable |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Building | Compliant | Documenting Statement: On the day of |
| Department Inspection | | the inspection, the program was |
| | | operating in compliance with the current |
| | | building approval(s). |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Fire Inspection | Compliant | Documenting Statement: Please Note: |
| | | Documentation of a fire inspection |
| | | without any uncorrected violations must |
| | | be secured for the program. Secure a |
| | | new fire inspection by 2/22/23 |
| | | |
| | | |

| Rule | Status | Documenting Statement(s), If applicable |
|---------------------------------------|-----------|---|
| Rule: 5101:2-12-07 Administrator | Compliant | Documenting Statement: The |
| Qualifications | | administrator has completed the rules |
| | | review course. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-07 Administrator | Compliant | Documenting Statement: The |
| Responsibilities/Requirements | | administrator's hours of availability to |
| | | meet with parents were posted in a |
| | | noticeable location. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-07 Written Program | Compliant | Documenting Statement: During the |
| Policies and Procedures | | inspection, the requirements of the rule |
| | | regarding the program's written policies |
| | | and procedures were discussed. |
| Rule: 5101:2-12-07 Written Program | Compliant | Documenting Statement: The written |
| Policies and Procedures | Compilant | policies and procedures reviewed on the |
| Folicies and Frocedures | | day of the inspection were verified as |
| | | complete. |
| | | complete. |
| | • | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-08 Medical Statement | Compliant | Documenting Statement: All employees |
| | | had current medical statements on file. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-08 Child Care Staff | Compliant | Documenting Statement: All Child Care |
| Member Educational Requirements | , | Staff Members had verification of |
| · | | educational requirements on file at the |
| | | program. |
| | | |
| Rule | Status | Documenting Statement/s) If applicable |
| Rule: 5101:2-12-08 Orientation | Compliant | Documenting Statement(s), If applicable Documenting Statement: On the day of |
| Training & Whistle Blower Protection | Compilant | the inspection, all child care staff |
| Training & Willstie Blower Flotection | | members had met orientation training |
| | | requirements. |
| | | requirements. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-09 Background Check | Compliant | Documenting Statement: During the |
| Requirements | | inspection, the required documentation |
| | | regarding background checks was on file |
| İ | | for all employees listed. |

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| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-10 Health Training | Compliant | Documenting Statement: The program |
| Requirements | | had at least one Child Care Staff Member |
| | | with currently valid training in First Aid, |
| | | Management of Communicable Disease, |
| | | CPR, and Child Abuse Prevention present |
| | | and readily accessible during all hours of |
| | | operation. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-10 Professional | Compliant | Documenting Statement: At the time of |
| Development Requirements | Compliant | the inspection, all child care staff |
| Development Requirements | | members had completed the required |
| | | amount of professional development |
| | | training. |
| | | training. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Indoor Space | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Separation of Children | Compliant | |
| Under 2 1/2 Years | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Space | Compliant | Documenting Statement: The outdoor |
| Requirements | Compliant | play area is separated from traffic and |
| Requirements | | other hazards by a fence. |
| | | other hazards by a felice. |
| Rule: 5101:2-12-11 Outdoor Space | Compliant | Documenting Statement: The quarterly |
| Requirements | | playground inspections were completed |
| | | and documented, as required. The most |
| | | recent inspection report form was dated |
| | | 10-17-22. m |
| | | 10 17 22.111 |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Play | Compliant | Documenting Statement: The playground |
| Equipment | | safety kit was used to verify the outdoor |
| | | play equipment was free from |
| | | entrapment hazards and unsafe and |
| | | protruding bolts. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Nuic | Status | Documenting Statement(s), if applicable |

| Rule: 5101:2-12-11 Outdoor Play Fall Zones | Compliant | Documenting Statement: The protective material used under outdoor equipment was pea gravel. |
|---|-----------|---|
| | | |
| | _ | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-12 Safe Equipment | Compliant | Documenting Statement: Equipment was observed to be in good condition. |
| Pulo | Status | Decumenting Statement(s) If applicable |
| Rule: 5101:2-12-12 Safe Environment | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-12 Sale Environment | Compliant | Documenting Statement: Cleaning supplies were viewed stored out of the reach of children. |
| Rule: 5101:2-12-12 Safe Environment | Compliant | Documenting Statement: All electrical outlets were covered with safety receptacles. |
| Rule: 5101:2-12-12 Safe Environment | Compliant | Documenting Statement: All area rugs had nonskid backing. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-13 Sanitary | Compliant | Documenting Statement: On the day of |
| Equipment and Environment | Compliant | the inspection, the program provided a |
| | | clean environment in accordance with |
| | | Appendix A of this rule, which included |
| | | the furniture, materials and equipment. |
| | I a | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-13 Handwashing Requirements | Compliant | Documenting Statement: Staff and children were observed washing hands as |
| | | required by the rule. |
| Pulo | Status | Documenting Statements of and inchin |
| Rule Rule: E101:2-12-12 Smake Free | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-13 Smoke Free Environment | Compliant | Documenting Statement: A notice was observed posted stating that smoking is |
| Environment | | prohibited at the program. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-15 Child Medical and | Compliant | Documenting Statement: At the time of |
| Enrollment Records | Compilant | the inspection, 25% of the children's |
| 2 Samene necords | | records were reviewed, and the records |
| | | were complete, as required by the rule. |
| | | |

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|---|-----------|---|
| Rule: 5101:2-12-15 Child Medical and Enrollment Records | Compliant | Documenting Statement: In review of |
| Enrollment Records | | 25% of the records, at the time of the |
| | | inspection, children's medical statements |
| | | were complete and on file, as required by |
| | | the rule. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-15 Medical/Physical | Compliant | Documenting Statement: The program |
| Care Plans | | had current information on the medical |
| | | status and the required treatment plan |
| | | for the children with health conditions. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Medical, Dental, | Compliant | Documenting Statement: On the day of |
| and General Emergency Plan | ' | the inspection, the complete prescribed |
| and constant and general transfer | | JFS 01242 "Medical, Dental, and General |
| | | Emergency Plan For Child Care" were |
| | | posted in the program as required. |
| | | posted in the program as required. |
| | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Emergency Drills | Compliant | Documenting Statement: Documentation |
| | | for completed fire, weather, and |
| | | emergency/lockdown drills was verified |
| | | during this inspection. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 First Aid/Standard | Compliant | Documenting Statement: During the |
| Precautions | | inspection, the program had complete |
| | | first aid kits available as required. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Management of | Compliant | Documenting Statement: The JFS 08087 |
| Communicable Disease | | "Communicable Disease Chart" was |
| | | posted and was readily available to staff |
| | | and parents. |
| | | |
| Rule: 5101:2-12-16 Management of | Compliant | Documenting Statement: The program |
| Communicable Disease | | staff stated parents were informed when |
| | | their child had any exposure to a |
| | | contagious illness by number(s) 1, 3 |
| | | below: |
| | | |
| | | 1. A posted notice; |
| | | 2. Verbal communication; |



| | | 2 A suritton notice cont homes. |
|---------------------------------------|-------------|---|
| | | 3. A written notice sent home; |
| | | 4. A note posted on the classroom door; |
| | | 5. Other []. |
| | | |
| | T | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Incident/Injury | Compliant | Documenting Statement: The JFS 01299 |
| Reporting | | "Incident/Injury Report For Child Care" |
| | | forms reviewed during this inspection |
| | | were complete as required. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Written Disaster | Compliant | Documenting Statement: The program's |
| Plan | Compilant | written disaster plan was reviewed during |
| Pidii | | |
| | | the inspection and met the requirements. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-17 Daily Schedule | Compliant | Documenting Statement: Daily schedules |
| | | were observed posted. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-17 Materials and | Compliant | Documenting Statement: Sufficient |
| Equipment | Compilation | equipment was observed in all categories. |
| Equipment | | equipment was observed in an eategories. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-17 Daily Outdoor Play | Compliant | Documenting Statement: During the |
| | | inspection, the requirements of the rule |
| | | regarding daily outdoor play were |
| | | discussed. |
| | | |
| Rule: 5101:2-12-17 Daily Outdoor Play | Compliant | Documenting Statement: Outdoor play |
| | | was observed for the Pre-K group(s). |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 License Capacity | Compliant | Documenting Statement: The program |
| indic. 3101.2 12 10 License Capacity | Compliant | was operating within their license |
| | | capacity limits. |
| | | capacity illinits. |
| | L | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 Ratio | Compliant | Documenting Statement: The Appendix A |
| | | "Staff/Child Ratios, Age Grouping and |
| | | Maximum Group Size" was posted in a |

| | | noticeable area at the program as required. |
|--------------------------------------|---------------------|---|
| 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 |
| Rule: 5101:2-12-18 Group Size | Compliant | Documenting Statement: The group sizes observed on the day of the inspection were in compliance. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-19 Supervision | Compliant | Documenting Statement: Child Care Staff Members were supervising the children and were able to intervene as needed. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-19 Child Guidance | Compliant | Documenting Statement: Appropriate child guidance techniques and practices were observed being used during the inspection. |
| | | |
| Rule 5101:2-12-20 Cots and Napping | Status Compliant | Documenting Statement(s), If applicable |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-20 Cribs | Compliant | Documenting Statement: Cribs were separated from the play space by a safe and sturdy and physical barrier. |
| Rule: 5101:2-12-20 Cribs | Compliant | Documenting Statement: All cribs were labeled with the assigned infant's name. |
| | 1 6 | |
| Rule: 5101:2-12-22 Safe Food | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: Food was stored |
| Handling/Storage | Compilant | in a safe and sanitary manner. |
| Pulo | Status | Decumenting Statement(s) If applicable |
| Rule: 5101:2-12-23 Infant Daily Care | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: An appropriate program of activities with infants was observed. |

| Rule: 5101:2-12-23 Infant Daily Care | Compliant | Documenting Statement: Appropriate daily written records for all infants were viewed. |
|---|--------------------|---|
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-23 Infant Bottle and Food Preparation | Compliant | Documenting Statement: All bottles were labeled as required. |
| Rule: 5101:2-12-23 Infant Bottle and Food Preparation | Compliant | Documenting Statement: All bottles were warmed in accordance with the rule in a commercial bottle warmer. |
| | l s | |
| Rule: 5101:2-12-23 Diapering and Toilet Training | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: Appropriate diaper changing procedures were observed during the inspection in the infant/toddler room(s). |