

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 Deta	ils	
Program Name	Program Number		Program Type
Erica's Learning and Childcare	2210025282		FCC - Type A Home
Address	,		County
706 Prospect Street			CUYAHOGA
Berea			
OH 44017			
Building and Fire Approvals apply to Type A Family Child	d Care Homes only	·	
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
08/12/2021			
Fire Inspection Approval Date			
09/23/2021			

	Insp	ection Information		
Inspection Type	Inspection So	cope	Inspection Notice	
Compliance	Full		Unannounced	
Inspection Date	Begin Time		End Time	
08/09/2024	10:30 AM		12:30 PM	
Reviewer:				
Pamelina Rose				
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
66	5	0	0	5

Lic	License Capacity and Enrollment at the Time of Inspection			
Age Group	License Capacity	Enrollment		
0.000	Totals	Full Time	Part Time	Total
Infant (Birth to < 18 m)		1	0	1
Young Toddler	*	2	0	2
Total Under 2 Years	6	3	0	3
Older Toddler		3	0	3
Preschool		3	0	3
School Age		7	0	7
Total Capacity/Enrollment	12	13	0	16

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Erica's Learning	Mixed Age Group	2 to 8	





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

Low Risk Non-Compliances

Domain: 01 Ratio & Supervision

Rule: 5101:2-13-18 Attendance

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 program 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 numbers 2 below:

- 1. No attendance record was being maintained.
- 2. The attendance record was not being consistently completed.
- 3. The record did not include the name of at least one child.
- 4. The record did not include the birth date of at least one child.
- 5. The record did not include the assigned group.
- 6. The record did not include the child's weekly schedule.
- 7. The record did not include the time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.
- 8. The original attendance record was not kept at the program for a period of one year.

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

Corrective Action Plan Due: 09/11/2024

Domain: 06 Program Information

Rule: 5101:2-13-14 Requirements for Field and Routine Trips

Code: The program is required to obtain written parental permission before leaving the premises and retain the forms for at least one year from the date of the trip. Routine trip permission forms must be updated annually.

Findings: In review of the program's records, it was determined that requirements for written permission from the parent/guardian for a field trip or routine trip were not met as listed in numbers 1 below:

- 1. Written parental permission was not secured for field trips and/or routine trips off the premises.
- 2. The written permission was missing the child's name.
- 3. The written permission was missing the date(s) of the trip(s) (field trips only).
- 4. The written permission was missing the destination(s) of the trip(s).
- 5. The written permission was missing the departure and return time(s) of the trip(s) (field trips only).
- 6. The written permission was missing the signature of the parent.
- 7. The written permission was missing the date on which the permission was signed.
- 8. The written permission was missing a statement notifying parents how their child will be transported.
- 9. Permission forms for routine trips were not being updated annually.
- 10. Written parental permission forms for field trips and/or routine trips were not being maintained on file for at least one year from the date of the trip.
- 11. Other: [].

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

Corrective Action Plan Due: 09/11/2024

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 CCSM or Substitute CCSM was left alone with children and did not have current valid documentation for trainings listed in numbers 10.14 below:

- 1. First Aid expired training
- 2. First Aid did not have verification of 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 the program serves 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 by staff 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 the 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: 09/11/2024

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 numbers 1,2 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: []

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

Corrective Action Plan Due: 09/11/2024

Domain: 08 Staff Files

Rule: 5101:2-13-10 Professional Development

Code: The program staff is required to complete at least six clock hours of training annually.

Findings: In review of records, it was determined the Child Care Staff Members indicated on the Employee Record Chart did not meet the annual professional development requirement as noted in numbers 1.

- 1. The child care staff member(s) had not completed at least six hours of professional development.
- 2. Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.
- 3. Training topic did not meet the requirements listed in appendix A of this rule.
- 4. Documentation of training did not meet the requirements of this rule.
- 5. The substitute(s) had been used more than ninety days annually between July first and June thirtieth and had not completed at least six hours of professional development.
- 6. Other [].

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

Corrective Action Plan Due: 09/11/2024

Rules In-Compliance/Not Verified Rule Status Documenting Statement(s), If applicable 5101:2-13-02 License Visible Compliant Documenting Statement(s), If applicable Rule Status 5101:2-13-02 Voluntary Temporary Compliant Closure Documenting Statement(s), If applicable Rule Status 5101:2-13-02 Change of Location Compliant Rule Status Documenting Statement(s), If applicable 5101:2-13-02 Information in OCLQS Compliant Documenting Statement(s), If applicable Rule Status 5101:2-13-02 Provider Medical Compliant Rule Status Documenting Statement(s), If applicable 5101:2-13-02 Type A Ownership Compliant Documenting Statement(s), If applicable Rule Status 5101:2-13-03 Inspection Compliant Requirements Rule Status Documenting Statement(s), If applicable 5101:2-13-04 Building Inspections for Compliant Type A Homes

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Fire Inspections for Type	Compliant	
A Homes	,	
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 Whistle Blower	Compliant	
	,	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-09 Background Checks	Compliant	
Rule	Status	Documenting Statement(s), If applicable
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	
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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
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5101:2-13-13 Clean environment and	Compliant	
5101:2-13-13 Clean environment and	Compliant	
5101:2-13-13 Clean environment and equipment	Compliant	
	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Handwashing	Compliant	
Signif is is manawasining	Compilation	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Smoke Free	Compliant	
	,	
	8	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Toothbrushing	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Ratio and Supervision	Compliant	
for Field and Routine Trips		
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Rule		Documenting Statement(s), If applicable
5101:2-13-14 Driver Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Vehicle Inspections	Compliant	Documenting Statement(s), if applicable
3101.2-13-14 Vehicle hispections	Compliant	
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 Child Medical and	Compliant	
Enrollment Records		
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
5101:2-13-15 Child Records Retention	Compliant	
and Confidentiality		
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Rule	Chatus	Decumenting Statement/s) If applicable
Rule	Status	Documenting Statement(s), If applicable

5404.0.40.46.14.11.1.0		
5101:2-13-16 Medical, Dental, and	Compliant	
General Emergency Plan		
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	
Precautions		
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	O THE TELESCOPE
Signature Sign	Compilant	
	<u> </u>	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Emergency	Compliant	bocumenting statement(3), if applicable
	Compilant	
Preparedness and Response Plan		
Rule	Ctatus	Decumenting Statement(s) If applicable
	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	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 Child Guidance	L a	
	Compliant	
Rule	Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
Rule 5101:2-13-20 Sleep and Nap		Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
Rule 5101:2-13-20 Sleep and Nap	Status	Documenting Statement(s), If applicable
Rule 5101:2-13-20 Sleep and Nap	Status	Documenting Statement(s), If applicable Documenting Statement(s), If applicable

5101:2-13-20 Crib and Playpen Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-21 Evening and Overnight	Compliant	Documenting Statement(S), it applicable
Care	Compilant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-21 Sanitary Environment and Hygiene	Compliant	
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	
Dula	Chabina	Decumenting Chatemanda) If annihable
Rule 5101:2-13-22 Food Handling	Status Compliant	Documenting Statement(s), If applicable
3101,2-13-22 1 000 Handling	Compliant	
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 Infant Bottle and Food Preparation	Compliant	
Pula	Chatus	Decumenties Statement (a) If a well-a-life
Rule	Status Compliant	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 Swimming	Compliant	
Rule	Status	Documenting Statement(s), If applicable

5101:2-13-25 Medication Requirements	Compliant	
Dula	Chatana	
Rule 5101:2-13-07 Provider Responsibilities	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-13-18 Group Size and Ratios	Status Compliant	Documenting Statement(s), If applicable
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Rule 5101:2-13 Written Policies and Procedures	Status Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Child Care Staff Requirements	Compliant	
Rule	Status	Decumenting Statements If applicable
5101:2-13-11 Indoor Space	Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-17 Programming	Compliant	Boothering Statement(3), it applicable
Rule 5101:2-13-24 On-site Pools	Status Compliant	Documenting Statement(s), If applicable
	[C) .	
Rule 5101:2-13-08 Review Policies and Procedures	Status Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Pets	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-24 Swimming Sites	Compliant	Documenting Statement(s), it applicable



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-17 Materials and Equipment	Compliant	Documenting Statement(s), it applicable