



Family Child Care 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 Christine Gaiter's Child Care Center	Program Number 2210025539	Program Type FCC - Type B Home
Address 810 Fess Ave Akron OH 44307		County SUMMIT

Inspection Information			
Inspection Type Complaint		Inspection Scope Partial	Inspection Notice Unannounced
Reviewer(s) Kathryn Carey	Inspection Day 05/17/2023	Begin Time 9:51 AM	End Time 10:55 AM

Summary of Findings				
No. Rules Verified 7	No. Rules with Non-compliances 7	No. Serious Risk 1	No. Moderate Risk 1	No. Low Risk 7

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Christine Gaiter		1 to 1	



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: 00 License & Approvals

Rule: 5101:2-13-03 Inspection Requirements

Code: The provider is required to refrain from falsifying information.

Allegation: Providers adult sons were residing in the home and back ground checks were not requested, guns and drugs were found in the home and the provider did not disclose the information during the interview

Determination: Substantiated

Findings: During the inspection, it was determined that the provider provided false information, in that The providers adult sons were residing in the home,no background checks were requested and guns and drugs were found in the home and the provider did not disclose this information during the interivew.. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Risk Level: Serious

Corrective Action Plan Due: 06/07/2023

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to prohibit illegal drugs on the premises.

Allegation: It was reported by the Akron Police department that the provider had guns and drugs in her home.

Determination: Substantiated

Findings: During the inspection, illegal drugs were determined to be on the premises during hours of operation of the home when no children were present. These items must be removed as required.

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

Risk Level: Low

Corrective Action Plan Due: 07/02/2023

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to have firearms and ammunition secured.

Allegation: It was reported by the Akron Police department that the provider had guns and drugs in her home.



Determination: Substantiated

Findings: During the inspection, it was determined there were weapons/firearms/ammunition on the premises during the hours of operation of the program, but no children were present, as noted in number(s) 1, 2 below:

1. Weapons/firearms/ammunition were on the premises of the program and were accessible to children and not secured as required.
2. Concealed handgun was not secured by the individual owning the concealed carry permit;
3. Individual owning a concealed carry permit had possession of a concealed handgun that was accessible to children;
4. Individual did not have concealed carry permit;
5. Individual did not have valid military identification and documentation of successful completion of firearms training;
6. Law Enforcement.

These items must be removed from the program. Submit the program's corrective action plan, which includes a statement that the [weapons/firearms/ammunition] have been removed or secured to the Department to verify compliance with the requirements of this rule.

Risk Level: Low

Corrective Action Plan Due: 07/02/2023

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to have firearms and ammunition secured.

Allegation: Provider had fire arms in her home that were not secure and no children were present.

Determination: Substantiated

Findings: During the inspection, it was determined there were [weapons/firearms/ammunition] on the premises during the hours of operation of the program, but no children were present, as noted in number(s) 1, 2 below:

1. Weapons/firearms/ammunition were on the premises of the program and were accessible to children and not secured as required.
2. Concealed handgun was not secured by the individual owning the concealed carry permit;
3. Individual owning a concealed carry permit had possession of a concealed handgun that was accessible to children;
4. Individual did not have concealed carry permit;
5. Individual did not have valid military identification and documentation of successful completion of firearms training;
6. Law Enforcement.

These items must be removed from the program. Submit the program's corrective action plan, which includes a statement that the [weapons/firearms/ammunition] have been removed or secured to the Department to verify compliance with the requirements of this rule.

Risk Level: Low

Corrective Action Plan Due: 07/02/2023



Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to prohibit illegal drugs on the premises.

Allegation: Provider had fire arms in her home that were not secure and no children were present.

Determination: Substantiated

Findings: During the inspection, illegal drugs were determined to be on the premises during hours of operation of the home when no children were present. These items must be removed as required.

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

Risk Level: Low

Corrective Action Plan Due: 07/02/2023

Domain: 05 Health & Safety

Rule: 5101:2-13-16 Incident/Injury

Code: The program is required to report serious incidents to the department.

Allegation: The Provider did not complete an incident report as required by rule by the next business day

Determination: Substantiated

Findings: During the inspection, it was determined that a Serious Incident was not reported in the Ohio Child Licensing and Quality System (OCLQS), as required, by the provider for an incident(s) as listed in number(s) 4. below:

1. An incident, injury or illness that required professional medical consultation or treatment.
2. An unusual or unexpected incident which jeopardizes the safety of a child, resident, child care staff member or employee of the program.
3. An incident defined as a serious risk non-compliance in appendix A to rule 5101:2-12-03 of the Administrative Code.
4. The program did not submit the report in OCLQS by the next business day as required by rule.

Submit the program's corrective action plan, which includes a statement that the program administrator or designee has completed the Serious Incident Report in OCLQS, to the Department to verify compliance with the requirements of this rule.

Risk Level: Low

Corrective Action Plan Due: 07/02/2023

Domain: 08 Staff Files

Rule: 5101:2-13-07 Provider Responsibilities

Code: The program is required to notify the county agency of any change in the household composition.

Allegation: It was reported by the Akron Police Department that by surveillance that the providers adult sons were residing in the home and supporting documentation was provided with the providers address verifying their residency.



Determination: Substantiated

Findings: During the inspection, it was determined the provider did not update OCLQS as noted in the following number 1, 2 below:

1. A change in household composition including someone joining the household or leaving the household within five calendar days.
2. An individual staying in the home for more than ten consecutive calendar days.

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

Risk Level: Low

Corrective Action Plan Due: 07/02/2023

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.

Allegation: The providers adult sons were residing in the home and the dash board in the OPR was not updated within five calendar days of a change in residency for a resident over the age of eighteen

Determination: Substantiated

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) 9, 10 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.

Risk Level: Low

Corrective Action Plan Due: 07/02/2023



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Domain: 08 Staff Files

Rule: 5101:2-13-09 Background Checks

Code: Individuals associated to the program are required to request background checks.

Allegation:

Determination: Substantiated

Findings: In review of the staff records, it was determined that a resident of the home turned 18 years of age moved into the home and background checks were not requested within 10 business days. Submit the program's corrective action plan, which includes a copy of the resident's JFS 01176, to verify compliance with the requirements of this rule.

Risk Level: Moderate

Corrective Action Plan Due: 07/02/2023

Summary of Additional Non-Compliances

Serious Risk Non-Compliances

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

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Moderate Risk Non-Compliances

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

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Low Risk Non-Compliances

No Additional Low Risk Non-Compliances were observed during this inspection

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