

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
Rachel's Daycare	2220026201	FCC - Type B Home
Address		County
16093 Maple Street		HOCKING
Laurelville		
OH 43135		

		nspection Information		
Inspection Type	Inspecti	on Scope	Inspection Notice	
Provisional	Full		Unannounced	
Inspection Date	Begin Ti	ne	End Time	
08/31/2022	11:00 A	M	12:10 PM	
Reviewer:	2.			
Ashley Herring				
		Summary of Findings		
No. Rules Verified	No. Rules with Non-complianc	es No. Serious Risk	No. Moderate Risk	No. Low Risk
68	13	0	0	14

Lie	cense Capacity and	d Enrollment a	at the Time of I	nspection
Age Group	License Capacity	Enrollment		
	Totals	Full Time	Part Time	Total
Infant (Birth to < 18 m)		1	0	1
Young Toddler		0	0	0
Total Under 2 Years	3	1	0	1
Older Toddler		1	0	1
Preschool		1	0	1
School Age		2	0	2
Total Capacity/Enrollment	6	4	0	5

Si Si	taff-Child Ratios at the Time of I	nspection	
Group	Age Group/Range	Ratio Observed	Comment
Rachel	Mixed Age Group	1 to 3	



Summary of Non-Compliances

If the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited. Ohio Administrative Code 5101: 2-13-03 details the process for submitting a request for a review if a program disagrees with a licensing finding. The request for review must be submitted within seven days from the receipt of the licensing report.

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 have attendance records with the required information.

Findings: During the inspection, it was determined that the attendance records did not include the required information listed in number(s) attendance form not being used below:



- 1. The name of the child;
- 2. The birth date of the child;
- 3. The assigned group for the child;
- 4. The child's weekly schedule;

5. The time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.

The missing information must be added to the form used to maintain attendance records. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/01/2022

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-13 Clean environment and equipment Code: The program is required to have all required items in the restroom(s) and keep them sanitary.

Findings: During the inspection, it was determined that unsanitary conditions, as noted in the following number(s) 5 below, were in the restroom:

- 1. There was no liquid soap.
- 2. There was no toilet tissue.
- 3. There were no individually assigned towels or disposable towels.
- 4. The toilet cleaning brush was accessible to the children.
- 5. The plunger was accessible to the children.
- 6. The toilet was not flushed.
- 7. The trash was not emptied from the day before.
- 8. There was a strong urine odor.
- 9. Other [].

The restroom(s) must be kept sanitary at all times. Submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 10/01/2022

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to have all outlets and surge protectors covered.

Findings: During the inspection, it was determined that surge protectors or outlets did not have childproof receptacle covers. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.



Corrective Action Plan Due: 10/01/2022

Domain: 05 Health & Safety

Rule: 5101:2-13-22 Fluid Milk

Code: The program is to ensure that children are served age-appropriate fluid milk.

Findings: During the inspection, it was determined that the program did not have the type of milk on-site to ensure that all children were served age-appropriate fluid milk requirements. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/01/2022

Domain: 05 Health & Safety

Rule: 5101:2-13-16 First Aid Kit/Standard Precautions Code: The program is required to meet the requirements for first aid kits.

Findings: During the inspection, it was determined that the program did not have a first aid kit [onsite/ on the vehicle/ on a field trip] as required, that included all items listed in the appendix A of the rule. The kit(s) were missing the item(s) or the item(s) were not replaced after use and/or expired listed in number(s) 8,10 below:

1. One roll of first-aid tape;

2. Individually wrapped sterile gauze;

squares in assorted sizes;

- 3. Sterile adhesive bandages in assorted sizes;
- 4.Tweezers;
- 5. Gauze rolled bandage;
- 6. Triangular bandage;
- 7. Rounded end scissors;

8. Tooth preservation system or fresh chilled liquid milk in which to transport a lost permanent tooth, including a written reference indicating location of the refrigerator/freezer where milk is stored if a tooth preservation system is not part of the first aid kit (for programs serving school age children only);

9. A working digital thermometer;

- 10. Disposable non-latex gloves;
- 11. A working flashlight;

12. An instant cold pack that has not been activated or ice, including a written reference indicating location of the refrigerator/freezer where the ice is stored if an instant cold pack is not part of the first aid kit;

13. Sealable leak-proof plastic bags in assorted sizes or double bagged plastic bags that can be securely tied for materials soiled with blood or bodily fluids;

14. Pocket mask or face shield, appropriate; for all ages of children in care, for cardiopulmonary resuscitation (CPR) administration;

15. Soap or waterless sanitizer (field trip or transporting away from the program only);



16. Bottled water (field trip or transporting away from the program only).

Correct the violation and submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/01/2022

Domain: 05 Health & Safety

Rule: 5101:2-13-16 Emergency Drills

Code: The program is required to complete and document the required drills.

Findings: During the inspection, it was determined that the required drills were not completed for item number(s) [] below:

- 1. Monthly fire drills
- 2. Monthly weather emergency drills (March through September)
- 3. Emergency/lockdown drills in each quarter of the calendar year

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

Corrective Action Plan Due: 10/01/2022

Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-23 Infant Bottle and Food Preparation

Code: The program is required to safely store, prepare, and serve formula, breast milk, and food.

Findings: During the inspection, it was determined that open containers of ready to serve food and concentrated formula was not stored appropriately as noted in number(s) 10 below:

- 1. The food/formula was not covered;
- 2. The food/formula was not dated;
- 3. The food/formula was not refrigerated according to the manufacturer's instructions;
- 4. The food/formula was not discarded or sent home daily if not used;
- 5. The food/formula was not refrigerated upon arrival;
- 6. The food/formula was not refrigerated immediately after preparation;
- 7. The food/formula was served beyond the expiration date;
- 8. The food/formula was not prepared prior to the manufacturer's instructions;

9. The food/formula was not prepared according to the instructions from the infant's physician, physician's assistant or certified nurse practitioner;

10. Other child's name was not labeled on the formula .

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



Corrective Action Plan Due: 10/01/2022

Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-23 Infant Daily Care

Code: The program staff is required to provide a daily written record for each infant in care.

Findings: During the inspection, it was determined that there was no daily written record for each infant provided to the parent or person picking up the infant on a daily basis. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/01/2022

Domain: 08 Staff Files

Rule: 5101:2-13-09 Background Checks

Code: Individuals are required to completed the background check process and obtain complete results.

Findings: In review of the staff records, it was determined that background check requirements were incomplete for the individuals listed on the Employee Record Chart, as noted in number(s) 3 below:

1. The JFS 01176 "Program Notification of Background check Review for Child Care" was not on file at the program, but was on file at the county agency and the individual is eligible.

2. The JFS 01176 was not on file at the program, but the BCI and FBI results were on file at the program and the individual had no prohibitive offenses which did not meet the rehabilitation criteria.

3. The JFS 01176 was not on file at the program, but the BCI and FBI results were on file at the county agency and the individual had no prohibitive offenses which did not meet the rehabilitation criteria.

Submit the program's corrective action plan, which includes a statement that the correct form is now on file, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/01/2022

Domain: 08 Staff Files

Rule: 5101:2-13-08 Child Care Staff Requirements Code: The program staff is required to have verification of a high school education in the OPR or on file at the program.

Findings: In review of the staff records, it was determined that verification of a high school education was not on file at the program nor verified in the Ohio Professional Registry for the child care staff member(s) listed on the Employee Record Chart, as required. Submit the program's corrective action plan, which includes a copy of the



verification of a high school education, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/01/2022

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 training(s) listed in number(s) 2,5,11,15below:

- 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: 10/01/2022

Domain: 08 Staff Files

Rule: 5101:2-13-08 Employee Requirements



Code: The program is required to obtain completed medical statements for all program staff.

Findings: During the inspection, it was determined that 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 medical statement with all required information, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/01/2022

Domain: 09 Children's Files

Rule: 5101:2-13-15 Child Medical and Enrollment Records Code: The program is required to have a completed medical on file for each child.

Findings: In review of of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in number(s) 1 below

- 1. No medical was on file for at least one child
- 2. Medical(s) on file was not updated every 13 months
- 3. Medical(s) were missing child's name and date of birth
- 4. Medical(s) were missing the date of the medical examination
- 5. The date of the exam was more than 13 months prior to the date the form was signed

6. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care

7. Medical(s) were missing the signature, business address and telephone number of the physician, physician's assistant(PA), advance practice nurse (APN) or certified

nurse practitioner (CNP) who examined the child

8. Medical(s) were missing a record of immunizations the child has had specifying month, day and year

9. Medical(s) were missing a statement from the physician, PA, APN, or CNP that the child has been immunized or is in the process of being immunized against the diseases

required by division 5104.014 of the Revised Code and found in appendix A to this rule

10. Medical(s) were missing a statement from the child's parent or guardian that he or she has declined to have the child immunized against the disease for reasons of

conscience, including religious convictions

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: 10/01/2022



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 that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in number(s) 16 below:

1. No enrollment form was completed for at least one child

- 2. The current JFS 01234 was not completed for at least one child
- 3. Complete child information
- 4. Complete parent information
- 5. Complete emergency contact information
- 6. Complete physician information
- 7. Information regarding the parent list
- 8. Health information
- 9. Additional information for all boxes checked "yes"
- 10. Emergency transportation information
- 11. Parent/guardian's signature
- 12. Diapering Statement
- 13. Acknowledgement of Policies and Procedures
- 14. Enrollment form for at least one child was not updated by either the parent or the administrator
- 15. Enrollment form for at least one child was not signed by the administrator
- 16. Other outdated form

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

Corrective Action Plan Due: 10/01/2022

Rules In-Compliance/Not Verified

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	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Information in OCLQS	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Provider Medical	Compliant	
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Rule	Status	Decumenting Statement(a) If any lice his
	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	Documenting statement(s), if applicable
10 TO	Compliant	
for Type B Homes		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Fire Safety for Type B	Compliant	
Homes		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Flammable and	Compliant	
Combustible Materials in a Type B		
Home		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Heaters in a Type B	Compliant	
Home		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-05 Denial, Revocation, and	Compliant	
Suspension		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-07 Staff Records	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-13-07 Type B Provider - Foster	Compliant	
Parent	2	
2.1		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Whistle Blower	Compliant	
	7	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-10 Professional	Compliant	
Development		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Outdoor Space	Compliant	
opuoo		
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	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Safe Equipment	Compliant	
	- 100 - 120	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Handwashing	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule 5101:2-13-13 Smoke Free	Status Compliant	Documenting Statement(s), If applicable
		Documenting Statement(s), If applicable
		Documenting Statement(s), If applicable
5101:2-13-13 Smoke Free	Compliant	
5101:2-13-13 Smoke Free Rule	Compliant Status	Documenting Statement(s), If applicable Documenting Statement(s), If applicable
5101:2-13-13 Smoke Free	Compliant	
5101:2-13-13 Smoke Free Rule	Compliant Status	



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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Requirements for Field	Compliant	
and Routine Trips		
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	Status	Documenting Statement(s), If applicable
5101:2-13-14 Driver Requirements	Compliant	
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	
85		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Health Conditions	Compliant	
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Child Records Retention	Compliant	bocumenting statement(s), it applicable
reactions descent contractions	Compliant	
and Confidentiality		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Medical, Dental, and	Compliant	
General Emergency Plan		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Communicable Diseases	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Disaster Plan	Compliant	
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Rule	Statuc	Documenting Statement(a) If applicable
Nule	Status	Documenting Statement(s), If applicable



5101:2-13-16 Incident/Injury	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 Supervision	Compliant	
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Rule 5101:2-13-19 School Age Supervision	Status Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 Child Guidance	Compliant	Documenting statement(s), if applicable
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Rule 5101:2-13-20 Sleep and Nap Requirements	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-13-20 Crib and Playpen Requirements	Status Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-21 Evening and Overnight Care	Compliant	
Rule 5101:2-13-21 Sanitary Environment and Hygiene	Status Compliant	Documenting Statement(s), If applicable
Rule 5101:2-13-22 Meals and Snacks	Status Compliant	Documenting Statement(s), If applicable
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Rule	Status Compliant	Documenting Statement(s), If applicable
5101:2-13-22 Food Handling	Compliant	
Dul	Chatra	
Rule 5101:2-13-23 Diapering	Status Compliant	Documenting Statement(s), If applicable



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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-24 Parent Permission for	Compliant	
Swimming		
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
5101:2-13-07 Provider Responsibilities	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-18 Group Size and Ratios	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13 Written Policies and	Compliant	bootinenting statement(3), it appreade
Procedures		
Construction with delay opposite full relation		
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	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-17 Programming	Compliant	bootamenting statement(s), if applicable
	compliant	
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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ule	Status	Documenting Statement(s), If applicable
101:2-13-24 Swimming Sites	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule 5101:2-13-17 Materials and	Status Compliant	Documenting Statement(s), If applicable