



## 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 Details			
Program Name From Start to Finish Academy	Program Number 2220026382	Program Type Child Care Center	
Address 7600 St Clair Ave Cleveland OH 44103		County CUYAHOGA	
Building Approval Date 07/26/2011	Use Group/Code E	Occupancy Limit 52	Maximum Under 2 ½ 20
Fire Inspection Approval Date 06/03/2022	Food Service Risk Level Level III		

Inspection Information		
Inspection Type Provisional	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 09/07/2022	Begin Time 10:15 AM	End Time 1:55 PM
Reviewer: RENADA FITCH		

Summary of Findings				
No. Rules Verified 57	No. Rules with Non-compliances 12	No. Serious Risk 0	No. Moderate Risk 0	No. Low Risk 16

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		8	0	8
<b>Total Under 2 ½ Years</b>	20	17	0	17
Older Toddler		5	0	5
Preschool		11	0	11
School Age		0	15	15
<b>Total Capacity/Enrollment</b>	46	16	15	48

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



Infants	0 to < 12 months	2 to 5	am
Infants	0 to < 12 months	2 to 5	nap
Toddlers	18 months to < 30 months	2 to 11	am
Toddlers	18 months to < 30 months	2 to 10	nap
Preschool Room/ School Aged	3 years to < 4 years	1 to 8	am
Preschool Room/ School Aged	3 years to < 4 years	1 to 8	nap

**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: 2-12-03 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: 00 License & Approvals

Rule: 5101:2-12-03 Inspection Requirements

Code: The program staff is required to provide true and accurate information.

Finding: During the inspection, it was determined that the program provided false information, in that an employee medical was falsified. The rule requires the program to provide accurate and truthful information to the Department. 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: 10/07/2022

#### Domain: 01 Ratio & Supervision

Rule: 5101:2-12-20 Cots and Napping

Code: The program is required to not block pathways with materials while the children are resting, napping, and/or sleeping.

Finding: During the inspection, it was determined that the placement of cots or mats in the preschool nap room did not allow for a clear pathway to each cot. 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.

Corrective Action Plan Due: 10/07/2022

#### Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Sanitary Equipment and Environment

Code: The program is required to clean and sanitize dishes after each use.

Finding: During the inspection, it was determined that item(s) in the infant room were not being cleaned and sanitized after each use/prior to use the next day as noted in number(s) 10 below:

1. Cups.
2. Infant spoons.
3. Bowls.
4. Silverware.
5. Individual containers used for water.



6. Sippy cups.
7. Plates.
8. Dishes.
9. Containers.
10. Bottles
11. Other [ ].

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.

Corrective Action Plan Due: 10/07/2022

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to provide an environment that protects the children in care from any items and conditions that may threaten their health, safety, and well-being.

Finding: Children in care shall be protected from any items and conditions which threaten their health, safety, and well-being. During the inspection, it was determined that children were not protected from the following item(s) or condition(s) which may threaten their health, safety, or well-being as noted in number(s) 10 below:

1. Open pull cords that are not closed loop.
2. Telephone cords.
3. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
4. Stacked chairs.
5. Employee(s) purse(s).
6. Diaper bags.
7. Television not securely anchored.
8. Small or lightweight pieces of shelving units are not securely anchored to the wall.
9. Smoke detector needing batteries replaced.
10. Staff member stepped over a barrier/gate while holding a child.
11. Emergency exits were blocked by the following classroom furniture: [ ].
12. Other [ ].

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: 10/07/2022



**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-13 Handwashing Requirements

Code: The program is required to have all children wash their hands as outlined in rule.

Finding: During the inspection, it was determined that at least one child in the infant group did not wash his or her hands at the time listed in number(s) 3 below, as required in rule.

1. Upon arrival.
2. Prior to departure.
3. After toileting/diaper change.
4. After contact with bodily fluids.
5. After returning from outdoor play.
6. After handling pets, pet cages, or other pet objects that have come in contact with the pet, before moving on to another activity.
7. Before eating or assisting with food preparation.
8. After water activities.
9. When visibly soiled (must use soap and water)
10. Other [ ].

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

Corrective Action Plan Due: 10/07/2022

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to refrain from using spray aerosols while children are in attendance.

Finding: During the inspection, it was determined that a spray aerosol was used in the infant group while children were in attendance. Spray aerosols must not be used when children are in attendance. 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 not required at this time.

Corrective Action Plan Due: 10/07/2022

**Domain: 02 Safe & Sanitary Environment**



**Rule:** 5101:2-12-12 Safe Equipment

**Code:** The program is required to provide equipment that is safe and hazard free.

**Finding:** During the inspection, equipment was determined to be unsafe or hazardous to children and in need of repair as noted in number(s) 4 below:

1. The equipment had sharp points or corners;
2. The equipment had splinters;
3. The equipment had protruding nails;
4. The equipment had loose or rusty parts;
5. The equipment had paint which contains lead or other poisonous materials;
6. The equipment had hazardous features;
7. Other [ ].

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

Corrective Action Plan Due: 10/07/2022

**Domain: 02 Safe & Sanitary Environment**

**Rule:** 5101:2-12-12 Safe Environment

**Code:** The program is required to label all cleaning and sanitizing supplies.

**Finding:** During the inspection, it was determined that not all cleaning/sanitizing supplies had been clearly labeled. When cleaning or sanitizing supplies are not stored in their original containers, the container must be labeled with the contents. 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.

Corrective Action Plan Due: 10/07/2022

**Domain: 04 Indoor/Outdoor Space**

**Rule:** 5101:2-12-11 Outdoor Space Requirements

**Code:** The program is required to have an outdoor play space free from general hazards.

**Finding:** During the inspection, it was determined that hazardous conditions existed in the outdoor play area, as noted in number(s) 10 below:

1. There was broken glass.



2. There were tall weeds.
3. There was poison ivy.
4. There were tree branches.
5. There was mold visible.
6. There were thistles with pricklers.
7. There were bird droppings.
8. There were bolts with more than two threads exposed along a fence line or gate on a playground.
9. The sandbox was contaminated.
10. Other : the fence was rusty.

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

Corrective Action Plan Due: 10/07/2022

**Domain: 05 Health & Safety**

Rule: 5101:2-12-22 Fluid Milk Requirements

Code: The program is required to serve age-appropriate fluid milk or obtain written documentation when serving substitutions for fluid milk.

Finding: During the inspection, it was determined that required documentation for substitutions for fluid milk was not on file as noted in number(s) 3 below:

1. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when infants up to 12 months of age are served anything other than formula or breast milk.
2. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when infants and toddlers 12 months of age up to 24 months of age are served anything other than unflavored whole homogenized vitamin D fortified cow's milk, breast milk, or non-cow milk substitution that is nutritionally equivalent to milk.
3. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when toddlers and children 24 months of age and older are served anything other than unflavored one per cent milk that is vitamin A and D fortified, unflavored fat free or skim milk that is vitamin A and D fortified, or non-cow milk substitutions that are nutritionally equivalent to milk.
4. Written parental consent for non-cow milk substitutions that are nutritionally equivalent to milk for children 12 months of age and older.
5. The program did not have the type of milk on-site to ensure that all children were served age-appropriate fluid milk.

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 not required at this time.

Corrective Action Plan Due: 10/07/2022



**Domain: 07 Diapering & Infant Care**

**Rule:** 5101:2-12-20 Cribs

**Code:** The program is required to provide clean sheets for all cribs that are not too large or too small for the crib.

**Finding:** During the inspection, it was determined that sheets did not meet the rule requirement as noted in number(s) 3 below:

1. At least one crib did not have a sheet.
2. At least one sheet was too large.
3. At least one sheet was too small.
4. At least one sheet was torn.
5. Crib sheets were not clean.

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 not required at this time.

Corrective Action Plan Due: 10/07/2022

**Domain: 07 Diapering & Infant Care**

**Rule:** 5101:2-12-20 Cribs

**Code:** The program is required to put all crib mattresses in their lowest position.

**Finding:** During the inspection, it was determined the mattress support was not maintained at the lowest position for all cribs when in use, as required. Except when infants are being placed in cribs, removed from cribs, or being soothed, the sides should remain in the highest position. 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.

Corrective Action Plan Due: 10/07/2022

**Domain: 08 Staff Files**

**Rule:** 5101:2-12-08 Medical Statement

**Code:** The program staff medicals are required to include all information.





Finding: In review of the staff records, it was determined that the medical statements for those employees listed on the Employee Record Chart did not include the required information listed below in number(s) 4.

1. Date of examination;
2. Signature, business address, and telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination;
3. A statement that verifies that the employee is:
  - a. Physically fit for employment in a program caring for children;
  - b. Immunized against Tetanus, Diphtheria, Pertussis (Tdap);
  - c. Immunized against Measles, Mumps, and Rubella (MMR);
4. Tuberculosis (TB) screening/test
  - a. Documentation of the screening process to determine if the employee resided in a country identified by the World Health Organization as having a high burden of TB and arrived in the United States within the five years preceding the date of application for employment;
  - b. Results of a TB test for employees meeting both criteria in 4a;
  - c. Results of additional testing for employees with a positive TB test;
  - d. Written statement, signed by a representative of the TB control unit, that the employee's TB is no longer infectious or the individual is receiving a TB treatment regimen for employees with a positive TB test.

Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, or TB results/documentation, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/07/2022

**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.

Finding: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s)5&6 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: 10/07/2022

**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.

Finding: 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: 10/07/2022

**Domain: 08 Staff Files**

Rule: 5101:2-12-08 Orientation Training & Whistle Blower Protection

Code: The program is required to have staff complete the online staff orientation training.

Finding: In review of the staff records, it was determined that child care staff member(s) had not completed the online orientation training as noted in number(s) 1 below:

1. Within 30 days of starting employment at the program as a child care staff member.
2. No documentation of completing the training after December 31, 2016.
3. Completion of the training was not verified in the OPR.

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

Corrective Action Plan Due: 10/07/2022



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**Rules In-Compliance/Not Verified**

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	
5101:2-12-02 Current Information	Compliant	
5101:2-12-04 Building Department Inspection	Compliant	
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 6-3-23.
5101:2-12-04 Food Service Requirements	Compliant	
5101:2-12-05 Denial, Revocation and Suspension	Compliant	
5101:2-12-07 Administrator Qualifications	Compliant	
5101:2-12-07 Written Program Policies and Procedures	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Child Care Staff Member Educational Requirements	Compliant	
5101:2-12-09 Background Check Requirements	Compliant	
5101:2-12-10 Health Training Requirements	Compliant	
5101:2-12-10 Professional Development Requirements	Not Verified	
5101:2-12-11 Indoor Space Requirements	Compliant	
5101:2-12-11 Separation of Children Under 2 1/2 Years	Compliant	
5101:2-12-11 Outdoor Play Equipment	Compliant	
5101:2-12-13 Smoke Free Environment	Compliant	
5101:2-12-15 Child Medical and Enrollment Records	Compliant	
5101:2-12-15 Medical/Physical Care Plans	Compliant	
Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	Documenting Statement: On the day of the inspection, the complete prescribed JFS 01242 "Medical, Dental, and General Emergency Plan For Child Care" were posted in the program as required.



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
5101:2-12-16 First Aid/Standard Precautions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of Communicable Disease	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Incident/Injury Reporting	Compliant	Documenting Statement: The requirements for completing JFS 01299 "Incident/Injury Report For Child Care" reports were discussed during the inspection.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Written Disaster Plan	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Schedule	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Materials and Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 License Capacity	Compliant	Documenting Statement: The program was operating within their license capacity limits.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child ratios observed during the inspection surpassed those required by the rule.



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.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-18 Group Size	Compliant	Documenting Statement: The group sizes observed on the day of the inspection were in compliance.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-18 Attendance Records	Compliant	Documenting Statement: Child Care Staff Members were observed recording the attendance for each child upon arrival and documenting each child's departure.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-19 Supervision	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-19 Child Guidance	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-22 Meal and Snack Requirements	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-22 Safe Food Handling/Storage	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-23 Infant Daily Care	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-23 Infant Bottle and Food Preparation	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-23 Diapering and Toilet Training	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-25 Medication Administration	Compliant	