

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 |
| Mother's Academy | 2220026765 | | FCC - Type A Home |
| Address | | | County |
| 350 Grand Ave | | | SUMMIT |
| | | | |
| Akron | | | |
| OH 44302 | | | |
| 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 |
| 12/08/2021 | | 12 | 6 |
| Fire Inspection Approval Date | | · | |
| 11/30/2021 | | | |

| Inspection Information | | | | |
|------------------------|---|------|-------------------|--------------|
| Inspection Type | Inspection So | cope | Inspection Notice | |
| Pre-license | Full | | Unannounced | |
| Inspection Date | Date Begin Time | | End Time | |
| 09/21/2022 | 10:00 AM 11:50 AM | | | |
| Reviewer: | | | | |
| Kathryn Carey | | | | |
| Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances No. Serious Risk N | | No. Moderate Risk | No. Low Risk |
| 66 | 1 | 0 | 0 | 1 |

| 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) | | 0 | 0 | 0 |
| Young Toddler | | 0 | 0 | 0 |
| Total Under 2 Years | | 0 | 0 | 0 |
| Older Toddler | | 0 | 0 | 0 |
| Preschool | | 0 | 0 | 0 |
| School Age | | 0 | 0 | 0 |
| Total Capacity/Enrollment | | 0 | 0 | 0 |

| Staff-Child Ratios at the Time of Inspection | | | |
|--|--|--------|---------|
| Group Age Group/Range Ratio Observed Comment | | | Comment |
| Mothers Academy | | 2 to 0 | |





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 |
| No Moderate Risk Non-Compliances were observed during this inspection |
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| Low Risk Non-Compliances |
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| Domain: 03 Postings & Equipment |

Rule: 5101:2-13-17 Materials and Equipment

Code: The program is required to have sufficient equipment and materials.

Findings: During the inspection, it was determined that equipment and materials in the following categories were not provided in sufficient quantities, as required by the rule: 1,2,4,5,6

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- 1. Art supplies (excludes infants);
- 2. Manipulative materials and equipment;
- 3. Blocks;
- 4. Science-nature equipment (excludes infants);
- 5. Language arts and auditory materials and equipment;
- 6. Pretend or dramatic play materials;
- 7. Music equipment;
- 8. Transportation materials and equipment;
- 9. Gross motor equipment;
- 10. Sensory motor equipment.

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

Corrective Action Plan Due: 10/22/2022

Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(s), If applicable |
|---|--|---|
| 5101:2-13-02 License Visible | Compliant | |
| 20104 - R. (1981 - 4000) - 18 - 200 - 10008 - | CONTROL OF THE PROPERTY OF THE | |
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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 | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Information in OCLQS | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |

| 5101:2-13-02 Provider Medical | Compliant | |
|--|---------------------|---|
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Type A Ownership | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-03 Inspection Requirements | Compliant | Documenting statement (e), in applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Building Inspections for Type A Homes | Compliant | Jesus Maria |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Fire Inspections for Type A Homes | Compliant | Bocumenting Statement(s), it applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-07 Staff Records | Compliant | Boodinements Statements (5), in applicable |
| | S: : | |
| Rule 5101:2-13-08 Employee Requirements | Status Compliant | Documenting Statement(s), If applicable |
| Rule | Status | Decumenting Statements If applicable |
| 5101:2-13-08 Child Care Staff Requirements | Compliant | Documenting Statement(s), If applicable |
| Dula | Chahua | Desume which a Chahama and a Vife and include |
| Rule 5101:2-13-08 Whistle Blower | Status Compliant | Documenting Statement(s), If applicable |
| Rule | Status | Documenting Statement(s) If applicable |
| 5101:2-13-09 Background Checks | Compliant | Documenting Statement(s), If applicable |
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| Rule 5101:2-13-10 Health Training | Status Compliant | Documenting Statement(s), If applicable |
| _ 5101.2 15 10 Health Halling | Compilant | |

| Designates: | | 1 |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-10 Professional | Compliant | |
| Development | Secretary and Control of Control | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-11 Outdoor Space | Compliant | |
| 3101.2 10 11 04(400) 56400 | Compilant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| | | Documenting Statement(3), if applicable |
| 5101:2-13-11 Outdoor Equipment | Compliant | |
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| Dula | Chahus | Designmenting Statement (-) If and I all |
| 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 | |
| September Septem | 2005 Trindedote ■ 2005 Tri 2005 Aut 117 | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Clean environment and | Compliant | (-), |
| equipment | Compilant | |
| equipment | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| | | Documenting Statement(s), it applicable |
| 5101:2-13-13 Handwashing | Compliant | |
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| D. I. | | B 6 |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Smoke Free | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Toothbrushing | Compliant | |
| Salar Vision School Strategy Control Str | Compilant | |

| Designating: | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Requirements for Field | Compliant | |
| and Routine Trips | | |
| and Rodine mps | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 500/500/500 | 100000000000000000000000000000000000000 | Bocumenting Statement(s), it applicable |
| 5101:2-13-14 Ratio and Supervision | Compliant | |
| for Field and Routine Trips | | |
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| 100 V | 2000 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Driver Requirements | Compliant | |
| 200 | 100 | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Vehicle Inspections | Compliant | 2 |
| 5101.2 15 14 Vehicle hispections | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Vehicle Requirements | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-15 Child Medical and | Compliant | |
| Enrollment Records | - Sampinante | |
| Linointent necords | | |
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| Rule | Chatria | Decimanting Statement (a) If applicable |
| | 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 | | |
| and commentantly | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| The control of the co | 110000000000000000000000000000000000000 | bocumenting 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 Emergency Drills | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-16 First Aid Kit/Standard | Compliant | |
| Precautions | and the second | |
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| 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 | |
| (100 94 000 | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Disaster Plan | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-18 Attendance | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-19 Supervision | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| | | Documenting Statement(s), if applicable |
| 5101:2-13-19 School Age Supervision | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-19 Child Guidance | Compliant | bocumenting statement(s), it applicable |
| J101.2-13-19 Clilla Galdance | Compilant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-20 Sleep and Nap | Compliant | 5 |
| Requirements | Compilation | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 2003004) | | 0 |
| 5101:2-13-20 Crib and Playnen | Lombilant | |
| 5101:2-13-20 Crib and Playpen | Compliant | |
| S101:2-13-20 Crib and Playpen Requirements | Compliant | |
| 100 | Compliant | |



| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-21 Evening and Overnight | Compliant | |
| Care | ' | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-21 Sanitary Environment | Compliant | |
| and Hygiene | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-22 Meals and Snacks | Compliant | Documenting Statement(s), if applicable |
| 3101,2-13-22 IVIEARS AND SHACKS | Compilant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-22 Fluid Milk | Compliant | |
| and the second s | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-22 Food Handling | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-23 Infant Daily Care | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-23 Infant Bottle and Food | Compliant | 3 (" |
| Preparation | | |
| The state of the s | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-23 Diapering | Compliant | |
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| Pule | Chatus | Decumenting Statement/s) If a williamly |
| Rule 5101:2-13-24 Parent Permission for | Status | Documenting Statement(s), If applicable |
| | Compliant | |
| Swimming | | |
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| 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 | Becamenting statement(s)) if approasie |
| Procedures | Compilant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-11 Indoor Space | Compliant | bocumenting statement(s), it applicable |
| 5101.2-13-11 muoor space | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-17 Programming | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-24 On-site Pools | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-08 Review Policies and | Compliant | |
| Procedures | Compilant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-12 Pets | Compliant | Decamenting statement(e), it approant |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-24 Swimming Sites | Compliant | |
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