

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 Deta	ails		
Program Name	Program Number		Pro	ogram Type
Tabor Ridge Christian School	2230028011		Ch	ild Care Center
Address			Со	unty
6727Tabor Ridge Road Stockport			M	ORGAN
OH 43787				
Building Approval Date	Use Group/Code	Occupancy Limit		Maximum Under 2 ½
Fire Inspection Approval Date	Food Service Risk L	evel		

	Insp	ection Information		
Inspection Type	Inspection Section Sec	соре	Inspection Notice	
Provisional	Full		Unannounced	
Inspection Date 10/03/2023	Begin Time 1	l0:01 AM	End Time 11:20 AM	
Reviewer: HEATHER STILLIO	Ν			
	Su	mmary of Findings		
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
58	4	0	0	5

Li	cense Capacity ar	nd Enrollme	ent at the Time of In	spection
Age Group	License Capacity		Enr	ollment
	Totals	Full Time	Part Time	Total
Infant (Birth to < 18 m)		0	0	0
Young Toddler		0	0	0
Total Under 2 ½ Years	24	0	0	0
Older Toddler		0	0	0
Preschool		15	0	15
School Age		0	0	0
Total Capacity/Enrollment	24	15	0	15

Si	taff-Child Ratios at the Time of Ins	pection	
Group	Age Group/Range	Ratio Observed	Comment



Preschool	2 to 10	
Preschool	2 to 10	

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: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

<u>Code</u>: The program staff's medical statements are required to be completed and on file at the program.

<u>Finding</u>: In review of the staff records, it was determined that the medical statements for the employees listed on the Employee Record Chart did not meet the requirements as listed in number(s) 1 below.

1. A medical statement was not on file for at least one employee;

2. The medical statement(s) on file did not have a date of examination within 12 months of the employee's first day of employment;

- 3. Date of examination was missing;
- 4. Signature, business address, or telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination was missing;
- 5. A statement was missing that verifies 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);
- 6. Tuberculosis (TB) screening/test information was missing:

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 6a.
- 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: 11/03/2023

Domain: 08 Staff Files

<u>Rule</u>: 5101:2-12-08 Orientation Training & Whistle Blower Protection <u>Code</u>: The program is required to have staff complete the online staff orientation training. Additionally, the training must be completed before they are permitted to have sole responsibility of children.

<u>Finding</u>: In review of the staff records, it was determined that child care staff member(s) did not meet the requirements for completing the online orientation training as noted in number(s) 1 below:

1. The training was not completed within 30 days of starting employment at the program as a child care staff member.

2. Documentation of completing the training after December 31, 2016 was not on file.



3. Completion of the training was not verified in the OPR.

4. A child care staff member had sole responsibility of children and had not completed the online orientation.

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

Corrective Action Plan Due: 11/03/2023

Domain: 08 Staff Files

Rule: 5101:2-12-10 Health Training Requirements

<u>Code</u>: The program is required to have all child care staff members complete training in child abuse and neglect recognition and prevention within sixty days of hire. Staff must complete training in first aid and CPR within the first ninety days of hire.

<u>Finding</u>: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in number(s) 1,4 below:

- 1. Child abuse and neglect recognition and prevention training was not completed within sixty days of hire.
- 2. First aid training was not completed within ninety days of hire.
- 3. Cardiopulmonary resuscitation (CPR) training was not completed within ninety days of hire.
- 4. The child abuse and neglect recognition and prevention training was expired.
- 5. The first aid training was expired.
- 6. The CPR training was expired.

Refer to the Employee Record Chart for the name(s) of the child care staff member(s) who must complete the required health and safety training(s). Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/03/2023

Domain: 08 Staff Files

<u>Rule</u>: 5101:2-12-10 Health Training Requirements <u>Code</u>: The program is required to maintain a staff schedule with coverage of the required health trainings.

<u>Finding</u>: In review of the staff records, it was determined the program did not have at least one child care staff member present/scheduled to be present during all hours of operation with currently valid documentation for the training(s) listed in number(s) 10 below:



1. First Aid – child care staff members scheduled during the hours of [] and [] had expired training 2. First Aid – child care staff members scheduled during the hours of [] and [] did not have verification of completion of First Aid 3. First Aid – trained child care staff member was not present in each building used by the program. 4. CPR – child care staff members scheduled during the hours of [] and [] had expired training 5. CPR – child care staff scheduled during the hours of [] and [] had did not have verification of completion of CPR 6. CPR – trained child care staff member was not present in each building used by children 7. CPR – training taken by staff was not appropriate for all ages and developmental levels of the children in care 8. CPR - audiovisual or electronic media training taken by staff did not include an in-person component of the training 9. Communicable Disease – child care staff members scheduled during the hours of [] and [] had expired training 10. Communicable Disease – child care staff scheduled during the hours of 9 am and 3:30 pm had not taken Communicable Disease training 11. Communicable Disease – trained child care staff member was not present in each building used by the program 12. Child Abuse – child care staff members scheduled during the hours of [] and [] had expired training 13. Child Abuse – child care staff scheduled during the hours of [] and [] had not taken Child Abuse training 14. Child Abuse – trained child care staff was not in each building used by the program

Refer to the Employee Record Chart for specific details. Submit the program's corrective action plan, which includes verification of complete coverage for any training listed, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/03/2023

Domain: 09 Children's Files

<u>Rule</u>: 5101:2-12-15 Child Medical and Enrollment Records <u>Code</u>: The program is required to use the updated JFS 01234 "Child Enrollment and Health Information For Child Care".

<u>Finding</u>: In review of 25% 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) 10 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



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- 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 []

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: 11/03/2023

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 Current Information	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-03 Inspection	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Building Department	Compliant	
Inspection		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Fire Inspection	Compliant	



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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Food Service	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-05 Denial, Revocation and	Compliant	
Suspension		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	
Qualifications		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	
Responsibilities/Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Written Program	Compliant	
Policies and Procedures		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-09 Background Check	Compliant	
Requirements		
•		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-10 Professional	Compliant	
Development Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Space	Compliant	
Requirements		
	1	I
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Fall Zones	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable



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5101:2-12-12 Safe Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Sanitary Equipment and	Compliant	
Environment		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Handwashing	Compliant	
Requirements	compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free	Compliant	
Environment		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Medical/Physical Care	Compliant	boothening statement(s), in applicable
Plans		
	•	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Medical, Dental, and	Compliant	
General Emergency Plan		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Emergency Drills	Compliant	
Dula	Chature	
Rule 5101:2-12-16 First Aid/Standard	Status Compliant	Documenting Statement(s), If applicable
Precautions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of	Compliant	
Communicable Disease		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury	Compliant	becamenting statement(s), if applicable
Reporting	••••••	
	·	
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	
Dula	Chatura	Describer Statement (a) If any limit
Rule	Status	Documenting Statement(s), If applicable



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F101.2 12 17 Materials and	Compliant	
5101:2-12-17 Materials and	Compliant	
Equipment		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	
Dula	Status	Decumenting Statement(a) If emplicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Ratio	Compliant	
5101.2 12 10 1000	compliant	
	1	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Group Size	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Attendance Records	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Supervision	Compliant	
	I	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cots and Napping	Compliant	
Dulo	Status	Documenting Statement(a) If a selicable
Rule 5101:2-12-22 Meal and Snack	Status Compliant	Documenting Statement(s), If applicable
	Compliant	
Requirements		
Dulo	Status	Decumenting Statement(s) If anylischle
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Fluid Milk Requirements	Compliant	
L		I
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food	Compliant	becamenting statement(s), it applicable
Handling/Storage		
Tananing/Storage		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-25 Medication		bocumenting statement(s), it applicable
	Compliant	
Administration		



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