

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 | nils | |
|---------------------------------------|-------------------------|-----------------|-------------------|
| Program Name | Program Number | | Program Type |
| Feaster-Brown Star Quality Child Care | 2230028022 | | Child Care Center |
| Center | | | |
| Address | | | County |
| 7310 fleet ave. Cleveland | | | CUYAHOGA |
| OH 44105 | | | |
| | | | |
| | | | |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ |
| 04/25/2023 | E | 150 | |
| Fire Inspection Approval Date | Food Service Risk Level | | |
| 04/25/2023 | Level III | | |

| Inspection Information | | | | |
|---|--------------------------------|-------------------|-------------------|--------------|
| Inspection Type | Inspection So | оре | Inspection Notice | |
| Provisional | Full | | Unannounced | |
| Inspection Date Begin Time 9:33 AM 10/05/2023 | | End Time 12:20 PM | End Time 12:20 PM | |
| Reviewer: REBECCA KOTEWICZ | | | | |
| Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58 | 1 | 0 | 0 | 1 |

| 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) | | 7 | 0 | 7 | |
| Young Toddler | | 6 | 0 | 6 | |
| Total Under 2 ½ Years | 24 | 13 | 0 | 13 | |
| Older Toddler | | 0 | 0 | 0 | |
| Preschool | | 16 | 0 | 16 | |
| School Age | | 0 | 18 | 18 | |
| Total Capacity/Enrollment | 58 | 16 | 18 | 47 | |

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

| Infant | 0 to < 12 months | 3 to 6 | Arrival |
|---------|--------------------------|---------|--------------------|
| Infant | 0 to < 12 months | 3 to 7 | Programming |
| Toddler | 18 months to < 30 months | 1 to 4 | Arrival |
| Toddler | 18 months to < 30 months | 2 to 4 | Playground |
| PS | 3 years to < 4 years | 2 to 11 | |
| PS | 3 years to < 4 years | 1 to 4 | arrival, classroom |
| PS | 3 years to < 4 years | 1 to 7 | arrival, restroom |

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 |
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| Madarata Bisk Non Compliances |
| Moderate Risk Non-Compliances |
| No Moderate Risk Non-Compliances were observed during this inspection |
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Low Risk Non-Compliances

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

<u>Code</u>: 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.

<u>Finding</u>: During the inspection, it was determined that children were not protected from item(s) or condition(s) which may threaten their health, safety, or well-being as noted in number(s) 1, 4, 10, 13, 22 below:

- 1. Surge protectors/outlets did not have childproof receptacle covers. taped
- 2. Open pull cords that are not closed loop.
- 3. Toys or other items small enough to be swallowed were present in the space where infants and/or toddlers were in care.
- 4. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
- 5. Stacked chairs.
- 6. Employee(s) purse(s).
- 7. Diaper bags.
- 8. Television not securely anchored.
- 9. Small or lightweight pieces of shelving units are not securely anchored to the wall.
- 10. Smoke detector needing batteries replaced.
- 11. An area rug did not have a nonskid backing.
- 12. An area rug presented a tripping hazard.
- 13. A floor surface that was unsafe in that the sink sprayed water onto the floor.
- 14. No platform was provided for the sink or toilet in the [] classroom.
- 15. The platform provided for the sink or toilet in the [] classroom was not sturdy.
- 16. The platform provided for the sink or toilet in the [] classroom posed a safety hazard in that [].
- 17. Telephone cords.
- 18. Staff member stepped over a barrier/gate while holding a child.
- 19. Emergency exits were blocked by the following classroom furniture: [].
- 20. A mercury thermometer was being used to take a child's temperature.
- 21. Methods of ventilation used did not provide protection from rodents, insects, or other hazards.
- 22. Other; toddler door handle was broken and had a sharp metal edge.

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: 11/04/2023

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 |
| Rule: 5101:2-12-04 Building | Compliant | Documenting Statement: A copy of the |
| Department Inspection | | certificate of occupancy was available on- |
| | | site for review. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 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 4/25/24. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Food Service | Compliant | Documenting Statement: The food service |
| Requirements | | license was observed posted. Following is |
| | | the audit number and date of expiration: |
| | | AANS CRHSV9, MARCH 1, 2024, LEVEL III . |
| | | |
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| 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 | | |
| | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Medical Statement | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Orientation Training & | Compliant | Documenting Statement(s), it applicable |
| Whistle Blower Protection | Compilant | |
| Windle Blower Froteodien | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-09 Background Check | Compliant | Documenting Statement: During the |
| Requirements | | inspection, the required documentation |
| | | regarding background checks was on file |
| | | for all employees listed. |
| | | |
| Rule | Status | Documenting Statement/s) If applicable |
| 5101:2-12-10 Health Training | Compliant | Documenting Statement(s), If applicable |
| Requirements | Compilant | |
| 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 Separation of Children | Compliant | Documenting Statement(s), it applicable |
| Under 2 1/2 Years | Compilarie | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Space | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Play | Compliant | Documenting Statement: Outdoor |
| Equipment | | equipment was viewed to be safe and free of rust, sharp points, and other |
| | | hazards. |
| | | nazaras. |
| | l | |
| Rule | Status | Documenting Statement(s), If applicable |

| Rule: 5101:2-12-11 Outdoor Play Fall | Compliant | Documenting Statement: The protective |
|---|---------------------|--|
| Zones | - Compilario | material used under outdoor equipment |
| | | was wood chips. |
| | | The state of the s |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Equipment | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Sanitary Equipment and | Compliant | bocumenting statement(s), if applicable |
| Environment | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Handwashing | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Smoke Free | Compliant | |
| Environment | | |
| Dula | Chahua | Decumenting Chateres ant/a) If annice his |
| Rule 5101:2-12-14 Transportation and Field | Status Compliant | Documenting Statement(s), If applicable |
| Trip Procedures | Compliant | |
| The Frocedures | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-14 Transportation - | Compliant | Documenting Statement: The driver(s) |
| Driver Requirements | , | had completed the required ODJFS driver |
| · | | training. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-14 Transportation - | Compliant | Documenting Statement: An annual |
| Vehicle Requirements | | safety check of the vehicle(s), using the |
| | | JFS 01230 "Vehicle Inspection Report For |
| | | Child Care Centers" form, was verified |
| | | and dated 8/07/23. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-15 Child Medical and | Compliant | Documenting Statement: At the time of |
| Enrollment Records | | the inspection, 25% of the children's |
| | | records were reviewed, and the records |
| | | were complete, as required by the rule. |
| | 1 | ,,,, |
| | | |
| Rule: 5101:2-12-15 Child Medical and | Compliant | Documenting Statement: In review of |
| Rule: 5101:2-12-15 Child Medical and Enrollment Records | Compliant | Documenting Statement: In review of 25% of the records, at the time of the |

| | | were complete and on file, as required by the rule. |
|---|-----------|---|
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-15 Medical/Physical | Compliant | Documenting Statement: The program |
| Care Plans | Compliant | had current information on the medical |
| | | status and the required treatment plan |
| | | for the children with health conditions. |
| | | |
| Rule | Chatus | Desumenting Statement(s) If applicable |
| | 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 | (7) |
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| Pula | Chahua | Decrease or thing Chater and the life and the late |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 First Aid/Standard Precautions | Compliant | |
| Precautions | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Management of | Compliant | 0 (" 11 |
| Communicable Disease | ' | |
| | - | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Incident/Injury | Compliant | |
| Reporting | | |
| Pula | Ctatus | Decumenting Statement(s) If applicable |
| Rule 5101:2-12-16 Written Disaster Plan | Status | Documenting Statement(s), If applicable |
| 3101.2-12-16 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 | Compliant | |
| Equipment | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Outdoor Play | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 License Capacity | Compliant | |

| DESILIZING. | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 Ratio | Compliant | Documenting Statement: Staff/child |
| | | ratios observed during the inspection |
| | | were in compliance. |
| | | were in compnance. |
| | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 Group Size | Compliant | |
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| | | |
| 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 | Bootimenting statement(s), it approaches |
| 3101.2-12-13 Supervision | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Child Guidance | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-20 Cots and Napping | Compliant | |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-20 Cribs | Compliant | 3 (" 11 |
| 3101.2 12 20 61103 | Compliant | |
| | | |
| Rule | Ctatus | Documenting Statement(s), If applicable |
| | Status | |
| Rule: 5101:2-12-22 Meal and Snack | Compliant | Documenting Statement: Posted menus |
| Requirements | | were current and dated. |
| | | |
| Rule: 5101:2-12-22 Meal and Snack | Compliant | Documenting Statement: Meals served at |
| Requirements | | the program included foods from the four |
| | | food groups in sufficient amounts. |
| | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| | | Documenting statement(s), if applicable |
| 5101:2-12-22 Fluid Milk Requirements | Compliant | |
| | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Safe Food | Compliant | |
| Handling/Storage | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| | | 2008 |

| 5101:2-12-23 Infant Daily Care | Compliant | |
|--------------------------------------|-----------|---|
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Infant Bottle and Food | Compliant | |
| Preparation | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-23 Diapering and | Compliant | Documenting Statement: Appropriate |
| Toilet Training | | diaper changing procedures were |
| | | observed during the inspection in the |
| | | infant room(s). |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-25 Medication | Compliant | |
| Administration | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Child Care Staff Member | Compliant | |
| Educational Requirements | | |
| | | |