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
Early Childhood Development Center	2230028380	FCC - Type B Home
Address		County
4616 282nd street		LUCAS
Toledo		
OH 43611		

	Insp	ection Information		
Inspection Type	Inspection So	cope	Inspection Notice	
Pre-license	Full		Announced	
Inspection Date	Begin Time		End Time	
08/03/2023	9:25 AM		12:59 PM	
Reviewer:	2/		<u>w</u>	
Gehan Kamel				
	Sui	mmary of Findings		
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
68	11	0	2	15

Li	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)		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

St	taff-Child Ratios at the Time of I	nspection	
Group	Age Group/Range	Ratio Observed	Comment
One		1 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
No Serious Risk Non-Compliances were observed during this inspection

Moderate Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5101:2-13-04 Flammable and Combustible Materials in a Type B Home

Code: The program is required to properly store flammable and combustible materials and substances.

Findings: During the inspection, it was determined flammable and combustible materials and substances were stored near number(s) 2 and 3 below:

- 1. Heater;
- 2. Furnace;
- 3. Water Heater;
- 4. Gas Appliance.

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

Corrective Action Plan Due: 09/03/2023

Domain: 08 Staff Files

Rule: 5101:2-13-09 Background Checks

Code: The program is required to receive a preliminary approval from ODJFS prior to allowing an individual to engage in assigned duties or be near children.

Findings: In review of the staff records, it was determined that background checks did not meet the requirements of the rule for the person(s) listed on the Employee Record Chart as noted in number(s) 1below:

- 1. The request for a background check for child care was not submitted in the OPR The request for a background check for child care was not submitted in the OPR timely to allow for results prior to inspection.
- 2. The fingerprints were not submitted electronically according to the process established by BCI.
- 3. The individual(s) had engaged in assigned duties or were near children and preliminary approval from ODJFS was not on file.
- 4. Background checks were not updated every five years.

Submit the program's corrective action plan, which includes a copy of the JFS 01176, or a copy of the preliminary approval or a statement that the individual(s) are no longer engaged in assigned duties and are not near children until the preliminary approval has been received, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/03/2023

Low Risk Non-Compliances

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) 3 below, were in the children's 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: 09/03/2023

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to have running water below the temperature of 120 degrees Fahrenheit.

Findings: During the inspection, it was determined the water temperature was 140 degrees in the children's restroom and kitchen. This temperature exceeds the requirement of remaining below 120 degrees Fahrenheit. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 09/03/2023

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 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.

Findings: 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 the following number(s) 14 and 15 below:

- 1. Surge protectors/outlets did not have childproof receptacle covers;
- 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. Telephone cords;
- 7. Stacked chairs;
- 8. Employee(s) purse(s);
- 9. Diaper bags;
- 10. Television not securely anchored;
- 11. Small or lightweight pieces of shelving units are not securely anchored to the wall;
- 12. Staff member stepped over a barrier/gate while holding a child;
- 13. Chipping or peeling paint;
- 14. An area rug did not have a nonskid backing;
- 15. An area rug presented a tripping hazard;
- 16. A floor surface was unsafe in that [];
- 17. No platform was provided for the sink or toilet;

- 18. The platform provided for the sink or toilet was not sturdy;
- 19. The platform provided for the sink or toilet posed a safety hazard in that [];
- 20. Emergency exits were blocked by the following furniture in that [];
- 21. A mercury thermometer was being used to take a child's temperature.
- 22. Methods of ventilation used did not provide protection from rodents, insects, or other hazards.
- 23. Other [].

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

Corrective Action Plan Due: 09/03/2023

Domain: 03 Postings & Equipment

Rule: 5101:2-13-16 Medical, Dental, and General Emergency Plan

Code: The program is required to post the completed JFS 01242 "Medical, Dental, and General Emergency Plan for Child Care" and implement as required by rule.

Findings: During the inspection, it was determined the requirements for the JFS 01242 "Medical, Dental and General Emergency Plan" were not followed as noted in number(s) 1 below:

- 1. The plan was not posted with all pages visible on each level of the home used for child care.
- 2. The name, address and telephone number of the program were not complete.
- 3. The location of the first aid kit, fire extinguisher and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.
- 4. The telephone number for emergency squad, fire department hospital, poison control program, public children services agency, local health department, local emergency management agency and police department were not complete.
- 5. Location of children's records was not complete.
- 6. Emergency information including any medications or supplies needed i the event of an evacuation was not complete.
- 7. The current version of the prescribed form was not used.
- 8. The plan was not implemented when necessary in that [].

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

Corrective Action Plan Due: 09/03/2023

Domain: 03 Postings & Equipment

Rule: 5101:2-13-16 Medical, Dental, and General Emergency Plan

Code: The program is required to post the fire and weather alert plan with a diagram.

Findings: During the inspection, it was determined the following information was not posted for item number(s) 1 and 2 below:

- 1. Fire alert plan, including a diagram indicating evacuation routes.
- 2. Weather alert plan was missing details for [].
- 3. Weather alert plan was missing a diagram indicating evacuation routes.

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

Corrective Action Plan Due: 09/03/2023

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-13-11 Outdoor Space

Code: The program staff is required to protect the children from hazardous conditions in the outdoor play area.

Findings: During the inspection, it was determined that the following hazardous conditions existed in the outdoor play area, as noted in number(s) [] 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. The sandbox was contaminated.
- 7. There were thistles with prickers.
- 8. There were bird droppings.
- 9. The outdoor area was littered with trash.
- 10. The trash can was missing a lid.
- 11. The trash was not emptied from the day(s) before.
- 12. The trash can was overflowing with trash.
- 13. The trash can was infested with insects.
- 14. The trash can was visibly dirty.
- 15. Other: small plastic pool, uncovered fire pit, chicken wire fencing, metal ladder, and uncovered grill. In garage, hazardous material included lighter fluid, pesticide spray, rock salt, broom/mop, wood planks, snow blower, and snow shovel.

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

Corrective Action Plan Due: 09/03/2023

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-13-11 Outdoor Space

Code: The program is required to have an outdoor play space free from immediate risk.

Findings: During the inspection, it was determined that an outdoor play area was used which was not protected from traffic and other hazards by a fence in good repair, or other barrier. Although the fence or natural barrier was not meeting the rule requirements, it was determined to not present an immediate risk for a child to be able to leave the playground. The fence or gate was not in good repair and/or being used inappropriately as noted in number(s) 8 below:

- 1. The fencing had missing slat boards.
- 2. The fencing was broken.
- 3. The fencing was loose.
- 4. The fencing was rotting.
- 5. The gate was broken and did not close.
- 6. The gate was locked.
- 7. The latch on the gate was broken.
- 8. The latch was easily opened by children on the playground.
- 9. The latch was not engaged to prevent children from opening the gate.
- 10. The gate had no latch.
- 11. There were bolts with more than two threads exposed along a fence line or gate on a playground.
- 12. Other [].

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

Corrective Action Plan Due: 09/03/2023

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-13-11 Outdoor Space

Code: The program is required to have a shaded area in the outdoor play area.

Findings: During this inspection, it was determined that children were not provided access to a shaded area during outdoor play, as required by this rule. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/03/2023

Domain: 05 Health & Safety

Rule: 5101:2-13-22 Meals and Snacks

Code: The program is required to post the current menu in a noticeable location that is accessible to parents and note any substitutions at the time of the change.

Findings: During the inspection, it was determined that the program's weekly menu did not meet the requirement as noted in number(s) 3 below.

- 1. The menu was not posted.
- 2. The posted menu was not in a visible place readily accessible to parents.
- 3. The menu was not currently dated.
- 4. The entire menu was substituted.
- 5. At least one item on menu did not match what was served.
- 6. The meal or snack served did not match the posted menu.

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

Corrective Action Plan Due: 09/03/2023

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: 09/03/2023

Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-20 Crib and Playpen Requirements

Code: The program is required to use a crib/playpen according to manufacturer's guidelines.

Findings: During the inspection, it was determined that a crib/playpen was not being used according to manufacturer's instructions. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 09/03/2023

Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-20 Crib and Playpen Requirements

Code: The program is required to provide mattresses in good condition and sheets that are not too large or too small for cribs and playpens.

Findings: During the inspection, it was determined that sheets, mattresses and/or mattress covers did not meet the rule requirement as noted in number(s) 1 below:

- 1. At least one crib or playpen 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. The mattress was not at least one and one-half inches thick.
- 6. The mattress was not firm.
- 7. There was space between the mattress and the sides and end panels of the crib or playpen which exceeded one and one-half inches.
- 8. The mattress cover was not waterproof.
- 9. The mattress cover was torn.
- 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: 09/03/2023

Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-23 Diapering

Code: The program staff is required to have adequate supplies for diapering available.

Findings: During the inspection, it was determined the required supplies were not available for diaper changing as noted in the following number(s) 1 below:

- 1. There was no disposable separation material;
- 2. There was no germicidal solution for sanitizing;
- 3. There were no plastic containers or bags for the storage of soiled clothing;
- 4. There was no clean supply of diapers;
- 5. There was no extra change of clothing;
- 6. Other [].

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

Corrective Action Plan Due: 09/03/2023

Findings: During the inspection, it was determined the required supplies were not available for diaper changing as noted in the following number(s) 1 below:

- 1. There was no disposable separation material;
- 2. There was no germicidal solution for sanitizing;
- 3. There were no plastic containers or bags for the storage of soiled clothing;
- 4. There was no clean supply of diapers;
- 5. There was no extra change of clothing;



6. Other [].

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

Corrective Action Plan Due: 09/03/2023

Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-23 Diapering

Code: The program staff is required to appropriately store cloth diapers and clothing that were wet or soiled.

Findings: During the inspection, it was determined that the program was not storing or laundering soiled diapers or clothing according to the rule, in that the program did not meet the condition indicated in numbers(s) 6 below:

- 1. Store for no longer than one day
- 2. Store in an individual covered container or plastic bag away from children's belongings
- 3. Kept out of reach of children
- 4. Store soiled diapers and diapering washcloths laundered by the program in a covered container with sanitizing solution
- 5. Hold soiled diapers to be commercially laundered for no more than seven days
- 6. Store soiled disposable diapers in a plastic-lined covered container not easily accessible to children
- 7. Discard disposable diapers daily or more frequently as needed to eliminate odor
- 8. Launder diapers according to manufacturer's guidelines
- 9. Other []

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

Corrective Action Plan Due: 09/03/2023

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 provider did not have current valid documentation for training(s) listed in number(s) 15 below:

- 1. First Aid expired training
- 2. First Aid did not have verification of the 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 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 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 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: 09/03/2023

Rules In-Compliance/Not Verified

Status	Documenting Statement(s), If applicable
Compliant	
Status	Documenting Statement(s), If applicable
Compliant	
Status	Documenting Statement(s), If applicable
Compliant	
	Status Compliant Status Status



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	
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Rule	Status	Documenting Statement(s), If applicable
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5101:2-13-03 Inspection	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Building Requirements	Compliant	(a)) appaa.
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for Type B Homes		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Fire Safety for Type B	Compliant	
Homes	55p	
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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
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5101:2-13-07 Staff Records	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-07 Type B Provider - Foster	Compliant	
Parent		
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Employee Requirements	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Child Care Staff	Compliant	
Requirements		
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Rule	Status	Documenting Statement(s), If applicable
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5101:2-13-08 Whistle Blower	Compliant	
Rule 5101:2-13-10 Professional Development	Status Compliant	Documenting Statement(s), If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Outdoor Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Fall Zone	Compliant	bocumenting statement(s), if applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Safe Equipment	Compliant	Bootine Mary States Mental of the Application
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Handwashing	Compliant	bocumenting statement(s), if applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Smoke Free	Compliant	Documenting statesment(o), it approaches
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Toothbrushing	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Requirements for Field and Routine Trips	Compliant	boomening statement(s), it approaches
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5101:2-13-14 Ratio and Supervision	Status Compliant	Documenting Statement(s), If applicable
for Field and Routine Trips	Compilant	
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5101:2-13-14 Driver Requirements	Compliant	bocumenting statement(s), if applicable
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Rule 5101:2-13-14 Vehicle Requirements Compliant Rule 5101:2-13-15 Child Medical and Enrollment Records Status Documenting Statement(s), If applicable Compliant Documenting Statement(s), If applicable Documenting Statement(s), If applicable
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5101.2-15-15 Realth Conditions Compliant
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5101:2-13-15 Child Records Retention Compliant
and Confidentiality
Rule Status Documenting Statement(s), If applicable
5101:2-13-16 Emergency Drills Compliant
Rule Status Documenting Statement(s), If applicable
5101:2-13-16 First Aid Kit/Standard Compliant
Precautions
Rule Status Documenting Statement(s), If applicable
5101:2-13-16 Communicable Diseases Compliant
Rule Status Documenting Statement(s), If applicable
Rule Status Documenting Statement(s), If applicable 5101:2-13-16 Incident/Injury Compliant
5101:2-13-16 Incident/Injury Compliant

Designating:		
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5101:2-13-18 Attendance	Compliant	
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5101:2-13-19 Supervision	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
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5101:2-13-19 School Age Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 Child Guidance	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-20 Sleep and Nap	Compliant	
Requirements		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-21 Evening and Overnight	Compliant	0
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Care		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-13-21 Sanitary Environment	Compliant	
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5101:2-13-22 Food Handling	Compliant	
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
5101:2-13-24 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	
Procedures	300 Transport	
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Carbon Monoxide	Compliant	
Detectors - Type B Only	•	
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	
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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
Rule 5101:2-13-12 Pets		Documenting Statement(s), If applicable
	Status Compliant	Documenting Statement(s), If applicable
		Documenting Statement(s), If applicable
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