

## **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 <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. 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      |
| YMCA Child Care @ Alliance Elementary School | 2230028506          |                 | Child Care Center |
| Address                                      |                     |                 | County            |
| 2400 S Rockhill Ave. Alliance                |                     |                 | STARK             |
| OH 44601                                     |                     |                 |                   |
| Building Approval Date                       | Use Group/Code      | Occupancy Limit | Maximum Under 2 ½ |
| Fire Inspection Approval Date                | Food Service Risk L | evel            |                   |

| Inspection Information     |                                |                  |                   |              |
|----------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type            | Inspection So                  | cope             | Inspection Notice |              |
| Provisional                | Full                           |                  | Unannounced       |              |
| Inspection Date 11/20/2023 | Begin Time 4                   | :45 PM           | End Time 6:00 PM  |              |
| Reviewer:<br>TONYA JOHNSON |                                |                  |                   |              |
| Summary of Findings        |                                |                  |                   |              |
| No. Rules Verified         | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58                         | 3                              | 0                | 0                 | 3            |

| 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)                                  |                  | 0          | 0         | 0     |
| Young Toddler   |                  | 0          | 0         | 0     |
| Total Under 2 ½ Years                                     | 0                | 0          | 0         | 0     |
| Older Toddler   |                  | 0          | 0         | 0     |
| Preschool   |                  | 0          | 0         | 0     |
| School Age  |                  | 0          | 23        | 23    |
| Total Capacity/Enrollment                                 | 210              | 0          | 23        | 23    |

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



| school age | School-Age to < 11 years | 1 to 2 | free play |
|------------|--------------------------|--------|-----------|
| school age | School-Age to < 11 years | 1 to 3 | gym       |

## **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 |
|--|
|  |
| No Serious Risk Non-Compliances were observed during this inspection                               |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
| Moderate Risk Non-Compliances  |
| Wioderate Kisk Non-Compliances   |
| No Moderate Risk Non-Compliances were observed during this inspection                              |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
| Low Risk Non-Compliances   |

Domain: 05 Health & Safety

Rule: 5101:2-12-16 Emergency Drills

Code: The program is required to complete fire drills, weather drills, and emergency/lockdown drills

appropriately.

<u>Finding</u>: During the inspection, it was determined that the required drills were not completed for item number 3 below:

- 1. Monthly fire drills.
- 2. Monthly weather emergency drills (March through September).
- 3. Emergency/lockdown drills in each quarter of the calendar year.

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

Corrective Action Plan Due: 12/21/2023

**Domain: 08 Staff Files** 

Rule: 5101:2-12-07 Administrator Responsibilities/Requirements

<u>Code</u>: The program is required to maintain documentation onsite at the program for each employee.

<u>Finding</u>: During the inspection, it was determined that required staff record documentation was not on file at the program, and was not verified in the OPR, for the employee listed on the Employee Record Chart. The documentation was able to be verified as noted in number 1 below:

- 1. The information will be provided for compliance materials.
- 2. The information was provided from another location during the inspection.

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

Corrective Action Plan Due: 12/21/2023

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: 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 1,2 below.

- 1. A medical statement was not on file for at least one employee;
- 2. The medical statement 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: 12/21/2023

## **Rules In-Compliance/Not Verified**

| Rule                              | Status    | Documenting Statement(s), If applicable  |
|-----------------------------------|-----------|--|
| Rule: 5101:2-12-02 License Posted | Compliant | Documenting Statement: The license was in a location visible to parents as required. |
|                                   |           |  |

| Beginning!   |           |   |
|--|-----------|---|
| 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 Food Service                            | Compliant | Documenting Statement: The program          |
| Requirements   | ·         | has obtained a food service exemption       |
| ·  |           | status dated 8.19.23 from the local health  |
|  |           | department.                                 |
|  |           |   |
|  | -L        |   |
| Rule   | Status    | Documenting Statement(s), If applicable     |
| Rule: 5101:2-12-07 Administrator                           | Compliant | Documenting Statement: The                  |
| Qualifications   | Complaint | administrator has completed the rules       |
| Qualifications   |           | review course on 6.28.22.                   |
|  |           | TEVIEW COUISE OIT 0.20.22.                  |
|  |           |   |
| Rule   | Status    | Documenting Statement(s), If applicable     |
|  |           |   |
| Rule: 5101:2-12-07 Written Program Policies and Procedures | Compliant | Documenting Statement: No changes           |
| Policies and Procedures                                    |           | have been made to the written policies      |
|  |           | and procedures since it was last approved   |
|  |           | by this Department.                         |
|  |           |   |
| - 1  | 1         |   |
| Rule   | Status    | Documenting Statement(s), If applicable     |
| Rule: 5101:2-12-08 Orientation                             | Compliant | Documenting Statement: On the day of        |
| Training & Whistle Blower Protection                       |           | the inspection, all child care staff        |
|  |           | members had met orientation training        |
|  |           | requirements.                               |
|  |           |   |
|  |           |   |
| 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     |
| Rule: 5101:2-12-10 Health Training                         | Compliant | Documenting Statement: The program          |
| Requirements   |           | had at least one Child Care Staff Member    |
|  |           | with currently valid training in First Aid, |
|  |           | Management of Communicable Disease,         |
|  |           | CPR, and Child Abuse Prevention present     |
|  |           | and readily accessible during all hours of  |
|  |           | operation.                                  |
|  |           | υμεταιίση.                                  |

|  |           | I   |
|--|-----------|---|
| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-10 Professional Development Requirements | Compliant | Documenting Statement: At the time of the inspection, all child care staff      |
|  |           | members had completed the required amount of professional development training. |
|  |           | training.   |
|  |           |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-11 Indoor Space                                | Compliant |   |
| Requirements   |           |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-11 Outdoor Space                         | Compliant | Documenting Statement: The outdoor  |
| Requirements   |           | play area is separated from traffic and   |
| '  |           | other hazards by a fence.   |
|  |           |   |
| Rule: 5101:2-12-11 Outdoor Space                         | Compliant | Documenting Statement: Outdoor play   |
| Requirements   |           | was not observed due to no daylight   |
|  |           | during the inspection however, the  |
|  |           | quarterly playground inspections were   |
|  |           | discussed and documentation was on file,  |
|  |           | as required.  |
| Rule: 5101:2-12-11 Outdoor Space                         | Compliant | Documenting Statement: The quarterly  |
| Requirements   |           | playground inspections were completed   |
| •  |           | and documented, as required. The most   |
|  |           | recent inspection report form was dated   |
|  |           | 9.20.23.  |
|  |           |   |
| 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.  |
|  |           |   |
| Rule: 5101:2-12-11 Outdoor Play                          | Compliant | Documenting Statement: All equipment  |
| Equipment  |           | was observed to be properly placed out of                                       |
|  |           | the path of the main traffic pattern.   |
|  |           | I   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-11 Outdoor Play Fall Zones                     | Compliant |   |
|  |           |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
|  |           | 3 ( ) 11  |

| Rule: 5101:2-12-12 Safe Equipment                        | Compliant           | Documenting Statement: Equipment was observed to be in good condition.   |
|--|---------------------|--|
| Rule   | Status              | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-12 Safe Environment                      | Compliant           | Documenting Statement: Cleaning supplies were viewed stored out of the reach of children.  |
| Rule: 5101:2-12-12 Safe Environment                      | Compliant           | Documenting Statement: A safe environment was observed during the inspection. Children were protected from items and conditions which threaten their health, safety and well-being.              |
| Rule: 5101:2-12-12 Safe Environment                      | Compliant           | Documenting Statement: The indoor temperature of the program during the inspection was comfortable and met rule compliance.  |
| Rule   | Status              | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-13 Sanitary Equipment and Environment    | Compliant           | Documenting Statement: On the day of the inspection, the program provided a clean environment in accordance with Appendix A of this rule, which included the furniture, materials and equipment. |
| Rule: 5101:2-12-13 Sanitary<br>Equipment and Environment | Compliant           | Documenting Statement: During the inspection, the equipment was observed clean and in good repair.   |
|  |                     |  |
| Rule: 5101:2-12-13 Handwashing<br>Requirements           | Status  Compliant   | Documenting Statement(s), If applicable  Documenting Statement: Staff and children were observed washing hands as required by the rule.  |
|  | 1 -                 |  |
| Rule: 5101:2-12-13 Smoke Free<br>Environment             | Status Compliant    | Documenting Statement(s), If applicable  Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program.  |
| Dula   | Chatus              | Decumentias Chatasa author (formalisation  |
| Rule: 5101:2-12-15 Child Medical and Enrollment Records  | Status<br>Compliant | Documenting Statement(s), If applicable  Documenting Statement: At the time of the inspection, 25% of the children's   |

| Designation.  |           |   |
|---|-----------|---|
|   |           | records were reviewed, and the records were complete, as required by the rule.  |
| Rule: 5101:2-12-15 Child Medical and Enrollment Records | Compliant | Documenting Statement: At the time of the inspection, medical statements for the children were not needed as all children enrolled attended a grade of kindergarten or above in an elementary school. |
|   |           |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-15 Medical/Physical<br>Care Plans       | Compliant | Documenting Statement: The program had current information on the medical status and the required treatment plan for the children with health conditions.   |
|   | 1 -       |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Medical, Dental,                     | Compliant | Documenting Statement: On the day of  |
| and General Emergency Plan                              |           | the inspection, the complete prescribed   |
|   |           | JFS 01242 "Medical, Dental, and General   |
|   |           | Emergency Plan For Child Care" were   |
|   |           | posted in the program as required.  |
| Dula  | Chat      | December 5 Statement (s) 16 and inches  |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 First Aid/Standard                   | Compliant | Documenting Statement: During the   |
| Precautions   |           | inspection, the program had complete  |
|   |           | first aid kits available as required.   |
|   |           |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Management of                        | Compliant | Documenting Statement: The JFS 08087  |
| Communicable Disease                                    |           | "Communicable Disease Chart" was  |
|   |           | posted and was readily available to staff   |
|   |           | and parents.  |
|   |           |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Incident/Injury                      | Compliant | Documenting Statement: The  |
| Reporting   |           | requirements for completing JFS 01299   |
|   |           | "Incident/Injury Report For Child Care"   |
|   |           | reports were discussed during the   |
|   |           | inspection.   |
|   |           |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |

| Rule: 5101:2-12-16 Written Disaster<br>Plan | Compliant           | Documenting Statement: The program's written disaster plan was reviewed during the inspection and met the requirements.                                     |
|---|---------------------|---|
| Pula  | Chahua              | Decrease which the transmitted of the continue by   |
| Rule: 5101:2-12-17 Daily Schedule           | Status<br>Compliant | Documenting Statement(s), If applicable  Documenting Statement: Daily schedules were observed posted.   |
| Rule  | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-17 Materials and Equipment  | Compliant           | Documenting Statement: Sufficient equipment was observed in all categories.   |
| 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: The Appendix A "Staff/Child Ratios, Age Grouping and Maximum Group Size" was posted in a noticeable area at the program as required. |
| Rule: 5101:2-12-18 Ratio                    | Compliant           | Documenting Statement: Staff/child ratios observed during the inspection were in compliance.  |
|   | 1                   |   |
| Rule: 5101:2-12-18 Group Size               | Status<br>Compliant | Documenting Statement(s), If applicable  Documenting Statement: The group sizes observed on the day of the inspection were in compliance.                   |
| Rule  | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-18 Attendance<br>Records    | Compliant           | Documenting Statement: Child Care Staff Members were observed recording the attendance for each child upon arrival and documenting each child's departure.  |

| Rule: 5101:2-12-18 Attendance<br>Records          | Compliant           | Documenting Statement: During the inspection, attendance records were reviewed. Child Care Staff Members were viewed recording the attendance for each child upon arrival and departure. All attendance records met the requirements |
|---|---------------------|--|
|   |                     | of the rule and were kept with the group at all times.   |
| Rule  | Status              | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-19 Supervision                    | Compliant           | Documenting Statement: Child Care Staff  |
| Nule. 3101.2-12-19 Supervision                    | Сотрианс            | Members were supervising the children and were able to intervene as needed.  |
| Rule: 5101:2-12-19 Supervision                    | Compliant           | Documenting Statement: During the inspection, child care staff were observed meeting the basic needs of all children assigned to the group.  |
| Rule: 5101:2-12-19 Supervision                    | Compliant           | Documenting Statement: During the inspection, child care staff were observed assisting children throughout the day.  |
| Rule  | Status              | Documenting Statement(s), If applicable  |
| 5101:2-12-19 Child Guidance                       | Compliant           | bootimenting otatement(o)) in applicable   |
| Rule  | Status              | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-22 Meal and Snack<br>Requirements | Compliant           | Documenting Statement: The menu was posted.  |
| Rule: 5101:2-12-22 Meal and Snack<br>Requirements | Compliant           | Documenting Statement: Snacks served at<br>the program included foods from two of<br>the four food groups and provided<br>nutritional value in addition to calories.   |
| Dulo  | Ctatus              | Decumenting Statement(s) If applicable   |
| Rule 5101:2-12-22 Fluid Milk Requirements         | Status<br>Compliant | Documenting Statement(s), If applicable  |
| Rule  | Status              | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-22 Safe Food<br>Handling/Storage  | Compliant           | Documenting Statement: Food was stored in a safe and sanitary manner.  |
| Rule  | Status              | Documenting Statement(s), If applicable  |



| Rule: 5101:2-12-25 Medication<br>Administration                     | Compliant           | Documenting Statement: The program had complete written documentation for administering medication or food supplements.   |
|---|---------------------|---|
| Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements | Status<br>Compliant | Documenting Statement(s), If applicable  Documenting Statement: All Child Care Staff Members had verification of educational requirements on file at the program. |