

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	gram Type
Home Base	2230028974		Chi	ld Care Center
Address			Co	unty
8329 Ridge Rd Cincinnati			HA	MILTON
ОН				
45236				
			10.	
Building Approval Date	Use Group/Code	Occupancy Limit		Maximum Under 2 ½
08/14/2024	E	50		0
Fire Inspection Approval Date	Food Service Risk L	Food Service Risk Level		
08/14/2024	Exempt	Exempt		

Inspection Information				
Inspection Type	Inspection So	cope	Inspection Notice	
Provisional	Full		Unannounced	
Inspection Date	Begin Time		End Time	
09/25/2024	2:30 PM		4:02 PM	
Reviewer:				
KIM SUERMANN				
	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)		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	4	4
Total Capacity/Enrollment	50	0	4	4

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



After school	School-Age to < 11 years	2 to 3	
After school	School-Age to < 11 years	2 to 2	

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

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(s) 2 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: 10/25/2024

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.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 Current Information	Compliant	bocumenting statement(s), ii applicable
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	3 (" 11
Inspection		
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 8/14/25.
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 from the local health department.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-05 Denial, Revocation and Suspension	Compliant	
Dula	Chatria	Decimandia Chabarra Maria II and II a
Rule 5101:2-12-07 Administrator	Status	Documenting Statement(s), If applicable
Qualifications	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	
Responsibilities/Requirements		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-07 Written Program	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.



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Orientation Training &	Compliant	
Whistle Blower Protection		
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-09 Background Check	Compliant	Documenting Statement: During the
Requirements	Compilant	inspection, the required documentation
Kequirements		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
		regarding background checks was on file
		for all employees listed.
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Dula	Chahua	Decreasing Statement(s) If applicable
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.
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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		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Play	Compliant	Documenting Statement: The outdoor
Equipment	Source Market Control of Control	play space and equipment were not
1-1-1		viewed during this inspection due to
		inclement weather conditions; however,
		the requirements were discussed.
		the requirements were discussed.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Fall Zones	Compliant	Documenting Statement(s), it applicable
5101.2-12-11 Outdoor Flay Fall Zolles	Compliant	
	þ.	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Equipment	Compliant	Documenting Statement(s), it applicable
3101.2-12-12 Sale Equipment	Compliant	



Rule	Status	Documenting Statement(s), If applicable
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.
		nearth, safety and wen being.
Rule	Chahua	Decumenting State was and a life and include
	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-13 Sanitary	Compliant	Documenting Statement: During the
Equipment and Environment		inspection, the equipment was observed
		clean and in good repair.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-13 Handwashing	Compliant	Documenting Statement: Children were
Requirements		viewed washing their hands, as required
		by the rule.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free	Compliant	bocamenting statement(s), it approase
Environment	Compilant	
Environment	L	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-14 Transportation and	Compliant	Documenting Statement: During the
Field Trip Procedures	Compilant	inspection, the requirements of the rule
Tield Tip Frocedures		regarding transportation and field trip
		procedures were discussed.
		The program contracts a transportation
		company to pick children up from school
		with a staff member on the vehicle.
		with a staff member on the vehicle.
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.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Medical/Physical	Compliant	Documenting Statement: The program
Care Plans		had current information on the medical
		status and the required treatment plan
		for the children with health conditions.
		ar und between Humanisage substitutionages appropriately T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-
	 	



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.
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Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Emergency Drills	Compliant	Documenting Statement: Documentation
		for completed fire, weather, and
		emergency/lockdown drills was verified during this inspection.
		during this inspection.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard	Compliant	
Precautions		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Management of	Compliant	Documenting Statement: The JFS 08087
Communicable Disease	Compilant	"Communicable Disease Chart" was
Communicable Disease		posted and was readily available to staff
		and parents.
		and parents.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Incident/Injury	Compliant	
Reporting		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Schedule	Compliant	bocumenting statement(s), if applicable
S101.2 12 17 Bully Schedule	Compilant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-17 Materials and	Compliant	Documenting Statement: Sufficient
Equipment		equipment was observed in all categories.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	bocamenting statement(s), it applicable
510112 12 10 License Capacity	Compliant	
Rule	Status	Documenting Statement(s), If applicable



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Rule: 5101:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child
		ratios observed during the inspection
		were in compliance.
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	
D. L.		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-19 Supervision	Compliant	Documenting Statement: During the
		inspection, the requirements of the rule
		regarding supervision of children were
		discussed.
		Drop off procedures were discussed.
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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
Rule: 5101:2-12-22 Meal and Snack	Compliant	Documenting Statement: Snacks served at
Requirements		the program included foods from two of
		the four food groups and provided
		nutritional value in addition to calories.
		The program serves prepackaged snacks.
		The children has a choice of fruit cup and
		a grain.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Fluid Milk Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food	Compliant	
Handling/Storage		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-25 Medication	Compliant	
Administration	152	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-08 Child Care Staff	Compliant	Documenting Statement: All Child Care
Member Educational Requirements		Staff Members had verification of
		and the state of t



	educational requirements on file at the program.
Status	Documenting Statement(s), If applicable
Compliant	