

## **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            | ils             |                   |
|-------------------------------|-------------------------|-----------------|-------------------|
| Program Name                  | Program Number          |                 | Program Type      |
| YMCA Child Care at Fort Miami | 2240030007              |                 | Child Care Center |
|                               |                         |                 |                   |
| Address                       |                         |                 | County            |
| 2501 River Road Maumee        |                         |                 | LUCAS             |
| ОН                            |                         |                 |                   |
| 43537                         |                         |                 |                   |
|                               |                         | ^               |                   |
| Building Approval Date        | Use Group/Code          | Occupancy Limit | Maximum Under 2 ½ |
|                               |                         |                 |                   |
| Fire Inspection Approval Date | Food Service Risk Level |                 |                   |
|                               | Level III               |                 |                   |

| Inspection Information |                       |               |                  |                   |              |
|------------------------|-----------------------|---------------|------------------|-------------------|--------------|
| Inspection Type        |                       | Inspection Sc | ope              | Inspection Notice |              |
| Pre-license            |                       | Full          |                  | Announced         |              |
| Inspection Date        |                       | Begin Time    |                  | End Time          |              |
| 08/07/2024 3:00 PM     |                       |               | 4:00 PM          |                   |              |
| Reviewer:              |                       |               |                  |                   |              |
| ELLEN WOODRUFF         |                       |               |                  |                   |              |
|                        | C                     |               |                  |                   |              |
| Summary of Findings    |                       |               |                  |                   |              |
| No. Rules Verified     | No. Rules with Non-co | mpliances     | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 57                     | 0                     |               | 0                | 0                 | 0            |

| 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     |
| Older Toddler   |                  | 0          | 0         | 0     |
| Preschool   |                  | 0          | 0         | 0     |
| School Age  |                  | 0          | 0         | 0     |
| Total Capacity/Enrollment                                 |                  | 0          | 0         | 0     |

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

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



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## Rules In-Compliance/Not Verified

| Rule                              | Status    | Documenting Statement(s), If applicable     |
|-----------------------------------|-----------|---|
| Rule: 5101:2-12-02 License Posted | Compliant | Documenting Statement: During the           |
|                                   | '         | inspection, the requirements of the rule    |
|                                   |           | regarding posting the program's license     |
|                                   |           | were discussed.                             |
|                                   |           |   |
|                                   |           |   |
| Rule                              | Status    | Documenting Statement(s), If applicable     |
| Rule: 5101:2-12-02 Current        | Compliant | Documenting Statement: During the           |
| Information                       |           | inspection, the requirements of the rule    |
|                                   |           | regarding maintaining current               |
|                                   |           | information in the Ohio Child Licensing     |
|                                   |           | and Quality System were discussed.          |
|                                   |           |   |
| Rule                              | Status    | Documenting Statement(s), If applicable     |
| 5101:2-12-03 Inspection           | Compliant | getterming etatement(e); it approach        |
| Requirements                      | Compilant |   |
|                                   |           |   |
| Rule                              | Status    | Documenting Statement(s), If applicable     |
| Rule: 5101:2-12-04 Building       | Compliant | Documenting Statement: This program         |
| Department Inspection             |           | serves only school age children in a public |
|                                   |           | or chartered non-public school building.    |
|                                   |           |   |
|                                   |           |   |
| Rule                              | Status    | Documenting Statement(s), If applicable     |

| Rule: 5101:2-12-04 Fire Inspection   | Compliant | Documenting Statement: This program  |
|--------------------------------------|-----------|--|
| Ruic. 9101.2 12 04 The hispection    | Compilant | serves only school age children in a public                                |
|                                      |           | or chartered non-public school building.                                   |
|                                      |           | or chartered non-public school building.                                   |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable                                    |
| Rule: 5101:2-12-04 Food Service      | Compliant | Documenting Statement: Written   |
| Requirements                         |           | permission to operate under the food                                       |
|                                      |           | service license of another entity at the                                   |
|                                      |           | same location was observed.  |
|                                      |           |  |
| 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                                    |
| Rule: 5101:2-12-07 Written Program   | Compliant | Documenting Statement: The written   |
| Policies and Procedures              | Compilant | policies and procedures reviewed on the                                    |
| 1 Officies and 1 rocedures           |           | day of the inspection were verified as                                     |
|                                      |           | complete.  |
|                                      |           | complete.  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable                                    |
| Rule: 5101:2-12-08 Medical Statement | Compliant | Documenting Statement: All employees                                       |
|                                      |           | had current medical statements on file.                                    |
|                                      |           |  |
| 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(s), If applicable  Documenting Statement: During the |
| Requirements                         | Compilant | inspection, the required documentation                                     |
| Nequiletticits                       |           | regarding background checks was on file                                    |
|                                      |           | for all employees listed.  |
|                                      |           | ioi ali empioyees listeu.  |
|                                      |           |  |
| 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.  |
|--|--------------|--|
| Rule   | Status       | Documenting Statement(s), If applicable  |
| 5101:2-12-10 Professional Development Requirements | Not Verified | bocumenting statement(s), if applicable  |
| Rule   | Status       | Documenting Statement(s), If applicable  |
| 5101:2-12-11 Indoor Space<br>Requirements          | Compliant    | Decame management of the second of the secon |
| Rule   | Status       | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-11 Outdoor Space<br>Requirements   | Compliant    | Documenting Statement: The outdoor play area is separated from traffic and other hazards by a fence.   |
| Rule: 5101:2-12-11 Outdoor Space<br>Requirements   | Compliant    | Documenting Statement: During the inspection, the requirements of the rule regarding outdoor space were discussed.   |
| Rule: 5101:2-12-11 Outdoor Space<br>Requirements   | Compliant    | Documenting Statement: Shade is provided by means of trees.  |
| Rule   | Status       | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-11 Outdoor Play<br>Equipment       | Compliant    | Documenting Statement: All equipment was observed to be properly placed out of the path of the main traffic pattern.   |
| Rule   | Status       | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-11 Outdoor Play Fall<br>Zones      | Compliant    | Documenting Statement: The protective material used under outdoor equipment was .  |
| Rule   | Status       | Documenting Statement(s), If applicable  |
| 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.  |

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| Rule: 5101:2-12-12 Safe Environment                        | Compliant | Documenting Statement: The program's plan was to use air conditioning to maintain a comfortable temperature in warm weather.  |
| 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   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-13 Sanitary Equipment and Environment      | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding sanitary equipment and environment were discussed.   |
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| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-13 Handwashing<br>Requirements             | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding handwashing were discussed.  |
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| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-13 Smoke Free<br>Environment               | Compliant | Documenting Statement: Written notice had been given to parents which stated smoking occurred at the program outside of the program's hours of operation.                           |
|  |           |   |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-15 Child Medical and<br>Enrollment Records | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding children's medical statements and enrollments forms were discussed.                            |
| Rule   | Status    | Decumenting Statemental If and inchi-   |
| Rule: 5101:2-12-15 Medical/Physical                        | Compliant | Documenting Statement(s), If applicable  Documenting Statement: During the  |
| Care Plans   | Соттриали | inspection, the requirements of the rule regarding caring for children with a specific health condition were discussed.   |
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| Rule   | Status    | Documenting Statement(s), If applicable   |

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| Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan | Compliant | Documenting Statement: On the day of<br>the inspection, the complete prescribed<br>JFS 01242 "Medical, Dental, and General<br>Emergency Plan For Child Care" were<br>posted in the program as required.  |
| ~ .  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-16 Emergency Drills                            | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding emergency drills were discussed.  |
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| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-16 First Aid/Standard Precautions              | Compliant | Documenting Statement: During the 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 Communicable Disease          | Compliant | Documenting Statement: The JFS 08087 "Communicable Disease Chart" was posted and was readily available to staff and parents.   |
| Rule: 5101:2-12-16 Management of Communicable Disease          | Compliant | Documenting Statement: The program staff stated parents were informed when their child had any exposure to a contagious illness by numbers 1, 5 below:  1. A posted notice; 2. Verbal communication; 3. A written notice sent home; 4. A note posted on the classroom door; 5. Other: Bight Wheel app. |
| Pula   | Chatus    | Decumenting Statement(s) If applicable   |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-16 Incident/Injury Reporting                   | Compliant | Documenting Statement: The requirements for completing JFS 01299 "Incident/Injury Report For Child Care" reports were discussed during the inspection.   |
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| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-17 Daily Schedule                              | Compliant | Documenting Statement: Daily schedules were observed posted.   |

| Beginning!                            |   |   |
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| Rule                                  | Status  | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-17 Materials and      | Compliant   | Documenting Statement: During the   |
| Equipment                             |   | inspection, the requirements of the rule  |
|                                       |   | regarding materials and equipment were  |
|                                       |   | discussed.  |
|                                       |   | 30899 10 M 2010 de A 17080990   |
| 1                                     | 1   |   |
| Rule                                  | Status  | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-17 Daily Outdoor Play | Compliant   | Documenting Statement: During the   |
|                                       | Section of Production and Page 10 in Additional Control | inspection, the requirements of the rule  |
|                                       |   | regarding daily outdoor play were   |
|                                       |   | discussed.  |
|                                       |   |   |
|                                       |   |   |
| Rule                                  | Status  | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-18 License Capacity   | Compliant   | Documenting Statement: The program  |
| ,,                                    |   | was seeking initial licensure. The  |
|                                       |   | program requested to serve a total  |
|                                       |   | capacity of 54 children; of this, 0 children  |
|                                       |   | may be under two and one-half years of  |
|                                       |   | age.  |
|                                       |   | age.  |
|                                       |   |   |
| 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.   |
|                                       |   | required  |
| Rule: 5101:2-12-18 Ratio              | Compliant   | Documenting Statement: During the   |
| Naici 310112 12 10 Natio              | Compilant   | inspection, the requirements of the rule  |
|                                       |   | regarding staff/child ratios were   |
|                                       |   | discussed.  |
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| Rule                                  | Status  | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-18 Group Size         | Compliant   | Documenting Statement: During the   |
|                                       | Somphane  | inspection, the requirements of the rule  |
|                                       |   | regarding group size were discussed.  |
|                                       |   | regarding group size were discussed.  |
| <u> </u>                              |   |   |
| Rule                                  | Status  | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-18 Attendance         | - Maria A   | Documenting Statement(s), if applicable  Documenting Statement: Child Care Staff  |
| Records                               | Compliant   | 10 mm - 10 mm |
| Necords                               |   | Members were observed recording the   |
|                                       |   | attendance for each child upon arrival  |
|                                       |   | and documenting each child's departure.   |

| Designating:                        | T         |   |
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| 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.  |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable                                 |
| Rule: 5101:2-12-19 Child Guidance   | Compliant | Documenting Statement: During the                                       |
| rule. 3101.2-12-19 Ciliu Guidance   | Compliant | inspection, the requirements of the rule                                |
|                                     |           | regarding child guidance were discussed.                                |
|                                     |           | regarding crinic guidance were discussed.                               |
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| Rule                                | Status    | Documenting Statement(s), If applicable                                 |
| Rule: 5101:2-12-22 Meal and Snack   | Compliant | Documenting Statement: During the                                       |
| Requirements                        |           | inspection, the requirements of the rule                                |
|                                     |           | regarding meals and snacks were   |
|                                     |           | discussed.  |
|                                     |           |   |
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| Rule                                | Status    | Documenting Statement(s), If applicable                                 |
| Rule: 5101:2-12-22 Safe Food        | Compliant | Documenting Statement: During the                                       |
| Handling/Storage                    |           | inspection, the requirements of the rule                                |
|                                     |           | regarding safe food handling were                                       |
|                                     |           | discussed.  |
|                                     | 1         |   |
| Rule                                | Status    | Documenting Statement(s), If applicable                                 |
| Rule: 5101:2-12-25 Medication       | Compliant | Documenting Statement: During the                                       |
| Administration                      |           | inspection, the requirements of the rule                                |
|                                     |           | regarding administering medication, food                                |
|                                     |           | supplements and medical foods were                                      |
|                                     |           | discussed.  |
|                                     |           |   |
| Pula                                | Ctatus    | Decumenting Statement   If a willing                                    |
| Rule: 5101:2-12-08 Child Care Staff | Status    | Documenting Statement(s), If applicable                                 |
| Member Educational Requirements     | Compliant | Documenting Statement: All Child Care Staff Members had verification of |
| Member Educational Requirements     |           | educational requirements on file at the                                 |
|                                     |           | program.  |
|                                     |           | biogram.  |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable                                 |
| Rule: 5101:2-12-16 Written Disaster | Compliant | Documenting Statement: The program's                                    |
| Plan                                |           | written disaster plan was reviewed during                               |
|                                     |           | the inspection and met the requirements.                                |
|                                     |           | ar 5000   |