

# **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      |
| iCare Connect Campus 2            | 2240030640              |                 | Child Care Center |
|                                   |                         |                 |                   |
| Address                           |                         |                 | County            |
| 5826 Lee Road south Maple Heights |                         |                 | CUYAHOGA          |
| ОН                                |                         |                 |                   |
| 44137                             |                         |                 |                   |
|                                   |                         |                 |                   |
| Building Approval Date            | Use Group/Code          | Occupancy Limit | Maximum Under 2 ½ |
| 08/14/2024                        | E                       |                 |                   |
| Fire Inspection Approval Date     | Food Service Risk Level |                 |                   |
| 08/06/2024                        | Exempt                  |                 |                   |

|                     | Insp                           | ection Information |                   |              |
|---------------------|--------------------------------|--------------------|-------------------|--------------|
| Inspection Type     | Inspection Sc                  | cope               | Inspection Notice |              |
| Pre-license         | Full                           |                    | Announced         |              |
| Inspection Date     | Begin Time                     |                    | End Time          |              |
| 09/19/2024          | 1:43 PM                        |                    | 3:30 PM           |              |
| Reviewer:           |                                |                    |                   |              |
| Tamela Green        |                                |                    |                   |              |
| Summary of Findings |                                |                    |                   |              |
| No. Rules Verified  | No. Rules with Non-compliances | No. Serious Risk   | No. Moderate Risk | No. Low Risk |
| 58                  | 0                              | 0                  | 0                 | 0            |

| Li                        | cense Capacity ar | nd Enrollme | ent at the Time of Ir | spection |
|---------------------------|-------------------|-------------|-----------------------|----------|
| Age Group                 | License Capacity  |             | Enr                   | ollment  |
|                           | 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        |

| S     | taff-Child Ratios at the Time of I | 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

#### **Moderate Risk Non-Compliances**

No Moderate Risk Non-Compliances were observed during this inspection

Low Risk Non-Compliances

No Low Risk Non-Compliances were observed during this inspection





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

| Rule   | Status              | Documenting Statement(s), If applicable   |
|--|---------------------|---|
| Rule: 5101:2-12-02 License Posted                    | Compliant           | Documenting Statement: During the<br>inspection, the requirements of the rule<br>regarding posting the program's license<br>were discussed.   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-04 Building<br>Department Inspection | Compliant           | Documenting Statement: The following<br>rooms were approved for children less<br>than two and one-half years of age: all<br>rooms.  |
| Rule: 5101:2-12-04 Building<br>Department Inspection | Compliant           | Documenting Statement: A copy of the certificate of occupancy was available on-site for review.   |
| Rule: 5101:2-12-04 Building<br>Department Inspection | Compliant           | Documenting Statement: On the day of<br>the inspection, the program was<br>operating in compliance with the current<br>building approval(s).  |
|  | C                   |   |
| Rule: 5101:2-12-04 Fire Inspection                   | Status<br>Compliant | Documenting Statement(s), If applicableDocumenting Statement: Please Note:Documentation of a fire inspectionwithout any uncorrected violations mustbe secured for the program. Secure anew fire inspection by 8/4/2024. |



| Rule                                 | Status                                      | Documenting Statement(s), If applicable  |
|--------------------------------------|---|--|
| Rule: 5101:2-12-04 Food Service      | Compliant                                   | Documenting Statement: The program       |
| equirements                          |   | has obtained a food service exemption    |
|                                      |   | status from the local health department. |
|                                      |   |  |
| Rule: 5101:2-12-04 Food Service      | Compliant                                   | Documenting Statement: The off-site      |
| Requirements                         | •   | food processing establishment's current  |
|                                      |   | Ohio Department of Agriculture           |
|                                      |   | registration information was observed    |
|                                      |   | during the inspection.                   |
|                                      |   |  |
|                                      |   |  |
| Rule                                 | Status                                      | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-07 Administrator     | Compliant                                   | Documenting Statement: Employment        |
| Responsibilities/Requirements        |   | records for current as well as past      |
|                                      |   | employees were being maintained on file  |
|                                      |   | as required.                             |
|                                      |   |  |
| Rule                                 | Status                                      | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-07 Written Program   | Compliant                                   | Documenting Statement(s), if applicable  |
| Policies and Procedures              |   | policies and procedures reviewed on the  |
| oncies and Procedures                |   | day of the inspection were verified as   |
|                                      |   | complete.                                |
|                                      |   | complete.                                |
|                                      | 1   |  |
| 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: During the        |
| Requirements                         | un un finanziaria provinci vital Malanziala | inspection, the required documentation   |
| E.                                   |   | regarding background checks was on file  |
|                                      |   | for all employees listed.                |
|                                      |   |  |
|                                      |   | · · · · · · · · · · · · · · · · · · ·    |
| Rule                                 | Status                                      | Documenting Statement(s), If applicable  |



| Pulo E101.2.12.10 Usetth Testate   | Compliant | Desumenting Statements The surgery          |
|--|-----------|---|
| 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     |
| Rule: 5101:2-12-11 Indoor Space  | Compliant | Documenting Statement: The restrooms        |
| Requirements   |           | are used exclusively by the program.        |
|  |           |   |
| Rule   | Status    | Documenting Statement(s), If applicable     |
| Rule: 5101:2-12-11 Separation of   | Compliant | Documenting Statement: During the           |
| Children Under 2 1/2 Years   | 12        | inspection, the requirements of the rule    |
| newsourcemander gewingen to obtain derengenden in zur ein Additionalisertigen Bergelands |           | regarding separation of children under      |
|  |           | two and one half years of age were          |
|  |           | discussed.                                  |
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|  |           |   |
| Rule   | Status    | Documenting Statement(s), If applicable     |
| Rule: 5101:2-12-11 Outdoor Space   | Compliant | Documenting Statement: The outdoor          |
| Requirements   |           | play space provided 754 square feet and,    |
|  |           | therefore, could accommodate 13             |
|  |           | children using the space at one time.       |
| Rule: 5101:2-12-11 Outdoor Space   | Compliant | Documenting Statement: The outdoor          |
| Requirements   | Compliant | play area is separated from traffic and     |
| Requirements   |           | other hazards by a fence.                   |
|  |           | other hazards by a fence.                   |
|  |           |   |
| Rule   | Status    | Documenting Statement(s), If applicable     |
| Rule: 5101:2-12-11 Outdoor Play  | Compliant | Documenting Statement: All equipment in     |
| Equipment  |           | the outdoor play space was observed to      |
|  |           | be anchored and stable.                     |
| 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: The playground       |
| Equipment  |           | safety kit was used to verify the outdoor   |
|  |           | play equipment was free from                |
|  |           | entrapment hazards and unsafe and           |
|  |           | protruding bolts.                           |
|  |           |   |
|  | 1         |   |



| Rule                                 | Status    | Documenting Statement(s), If applicable  |
|--------------------------------------|-----------|--|
| Rule: 5101:2-12-11 Outdoor Play Fall | Compliant | Documenting Statement: The protective    |
| Zones                                |           | material used under outdoor equipment    |
|                                      |           | was mulch.                               |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-12 Safe Environment  | Compliant | Documenting Statement: During the        |
|                                      |           | inspection, the requirements of the rule |
|                                      |           | regarding safe environment were          |
|                                      |           | discussed.                               |
| Rule: 5101:2-12-12 Safe Environment  | Compliant | Documenting Statement: Cleaning          |
|                                      |           | supplies were viewed stored out of the   |
|                                      |           | reach of children.                       |

| Rule   | Status    | Documenting Statement(s), If applicable  |
|--|-----------|--|
| Rule: 5101:2-12-13 Sanitary<br>Equipment and Environment | Compliant | Documenting Statement: During the<br>inspection, the equipment was observed<br>clean and in good repair.   |
| Rule: 5101:2-12-13 Sanitary<br>Equipment and Environment | Compliant | Documenting Statement: During the<br>inspection, the cleaning and sanitation of<br>items and toys mouthed by children were<br>discussed.         |
| Rule: 5101:2-12-13 Sanitary<br>Equipment and Environment | Compliant | Documenting Statement: During the<br>inspection, the requirements of the rule<br>regarding sanitary equipment and<br>environment were discussed. |

| Status    | Documenting Statement(s), If applicable |
|-----------|---|
| Compliant | Documenting Statement: A notice was     |
| 12        | observed posted stating that smoking is |
|           | prohibited at the program.              |
|           |   |

| Rule  | Status    | Documenting Statement(s), If applicable  |
|---|-----------|--|
| Rule: 5101:2-12-15 Medical/Physical<br>Care Plans | Compliant | Documenting Statement: During the<br>inspection, the requirements of the rule<br>regarding caring for children with a<br>specific health condition were discussed. |
| Rule  | Status    | Documenting Statement(s), If applicable  |



| ~~   |                     |   |
|--|---------------------|---|
| Rule: 5101:2-12-16 Medical, Dental,<br>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 First Aid/Standard<br>Precautions   | Compliant           | Documenting Statement: During the<br>inspection, the program had complete<br>first aid kits available as required.  |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Management of   |                     | Documenting Statement: During the   |
| Communicable Disease   | Compliant           | inspection the requirement: During the<br>inspection the requirements regarding<br>the isolation of a child suspected of<br>having a communicable disease were<br>discussed, but not observed.          |
| Rule: 5101:2-12-16 Management of   | Compliant           | Documenting Statement: The JFS 08087  |
| Communicable Disease   |                     | "Communicable Disease Chart" was  |
| See which is particularly and the second |                     | posted and was readily available to staff   |
|  |                     | and parents.  |
|  |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-17 Daily Schedule  | Compliant           | Documenting Statement: Daily schedules  |
|  |                     | were observed posted.   |
|  |                     |   |
| 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   |
| 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 17 children; of this, 17  |
|  |                     | children may be under two and one-half  |
|  |                     | years of age.   |
|  |                     |   |
|  |                     | ,   |
|  |                     |   |
| Rule   | Status              | Documenting Statement(s), If applicable   |
| Rule<br>Rule: 5101:2-12-18 Ratio   | Status<br>Compliant | Documenting Statement(s), If applicable<br>Documenting Statement: The Appendix A  |
|  |                     | Documenting Statement(s), If applicable   |



|                                   |   | noticeable area at the program as required.  |
|-----------------------------------|---|--|
| Rule: 5101:2-12-18 Ratio          | Compliant                                 | Documenting Statement: During the<br>inspection, the requirements of the rule<br>regarding staff/child ratios were<br>discussed. |
|                                   |   |  |
| Rule                              | Status                                    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-18 Group Size     | Compliant                                 | Documenting Statement: During the  |
|                                   |   | inspection, the requirements of the rule   |
|                                   |   | regarding group size were discussed. no more than 12 if all infants  |
|                                   |   |  |
| Rule                              | Status                                    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-19 Child Guidance | Compliant                                 | Documenting Statement: During the  |
|                                   |   | inspection, the requirements of the rule   |
|                                   |   | regarding child guidance were discussed.   |
|                                   |   |  |
| Rule                              | Status                                    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-23 Diapering and  | Compliant                                 | Documenting Statement: During the  |
| Toilet Training                   |   | inspection, there was discussion   |
|                                   |   | concerning diapering routines. Child-care  |
|                                   |   | staff indicated diapers were changed at  |
|                                   |   | appropriate intervals throughout the day.  |
| Rule: 5101:2-12-23 Diapering and  | Compliant                                 | Documenting Statement: No children in  |
| Toilet Training                   | Landon Frieddyn yw Eurodd yw awyd rafor i | diapers were present during the  |
|                                   |   | inspection. Child care staff described   |
|                                   |   | proper diapering procedures which they   |
|                                   |   | stated were followed.  |
|                                   |   |  |
| Rule                              | Status                                    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-25 Medication     | Compliant                                 | Documenting Statement: There were no   |
| Administration                    |   | children on medication at the time of the  |
|                                   |   | inspection; however, the method of   |
|                                   |   | storage and practices for the  |
|                                   |   | administration were reviewed.  |
| 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.   |
|                                   |   |  |



| Rule   | Status    | Documenting Statement(s), If applicable   |
|--|-----------|---|
| Rule: 5101:2-12-08 Child Care Staff<br>Member Educational Requirements | Compliant | Documenting Statement: All Child Care<br>Staff Members had verification of<br>educational requirements on file at the<br>program. |
| Rule   | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Written Disaster<br>Plan                            | Compliant | Documenting Statement: The program's<br>written disaster plan was reviewed during<br>the inspection and met the requirements.     |
|  |           |   |