Department of Education
Department of Job and Family Services

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 MONTGOMERY, LINDA	Program Number 000000906026354	Program Type FCC - Type B Home
Address 10408 BELMEADOW DRIVE TWINSBURG OH 44087		County SUMMIT

Inspection Information		
Inspection Type Compliance	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 01/23/2024	Begin Time 10:30 AM	End Time 1:00 PM
Reviewer: Montia Jones		

Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
66	24	0	4	33

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)		1	0	1
Young Toddler		0	0	0
Total Under 2 Years	3	1	0	1
Older Toddler		0	0	0
Preschool		3	2	5
School Age		0	0	0
Total Capacity/Enrollment	6	3	2	6

Staff-Child Ratios at the Time of Inspection			
Group	**Age Group/Range**	**Ratio Observed**	**Comment**
Linda Montgomery	Mixed Age Group	2 to 4	

Department of Education
Department of Job and Family Services

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 Fire Safety for Type B Homes
Code: The program is required to refrain from blocking escape routes.

Findings: During the inspection, it was determined the program's primary escape route was blocked. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 03/01/2024

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Carbon Monoxide Detectors - Type B Only
Code: The program is required to meet all requirements for carbon monoxide detectors.

Findings: During the inspection, it was determined that the Type B Home did not have a working carbon monoxide detector The provider must replace batteries or purchase a new carbon monoxide detector as it is for the safety of the children in accordance with manufacturer's recommendations. A working carbon monoxide detector must be placed, installed, tested, and maintained in accordance with manufacturer's recommendations. The carbon monoxide detector in the garage where children were being cared for was not working the provider was informed that the detector needed to be replaced or new batteries needed to be installed. Submit the program’s corrective action plan to verify compliance with this rule.

Corrective Action Plan Due: 02/23/2024

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Environment
Code: The program is required to refrain from using and storing potentially hazardous items, toxic substances, and outdoor machinery around children.

Findings: During the inspection, a potentially hazardous item or toxic substance was used or stored where children present had access to it as noted in number(s) 4,11 below. The potentially hazardous substance or item that posed a risk to children was determined to be accessible to children in

1. Bleach.
2. Cleaning agent.
3. Fish tank chemicals.
4. Gasoline.
5. Pesticide.
6. Poison, including insect/rodent poison.
7. Flammable substance.
8. Windshield washer fluid.
9. Aerosol cans.
10. A lawn mower.
11. A weed trimmer.
12. Hedge trimmers.
13. A snow blower.
14. Other potentially hazardous substance, equipment or machinery: [ ].

Provide staff training. Submit the program's corrective action plan, which includes a statement that the potentially hazardous substance or item is no longer accessible to children and/or children will not be outside when machinery is in use and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/23/2024

Domain: 08 Staff Files

Rule: 5101:2-13-09 Background Checks
Code: Individuals associated to the program are required to request background checks.

Findings: In review of the staff records, it was determined that a resident of the home turned 18 years of age moved into the home and background checks were not requested within 10 business days. Submit the program's corrective action plan, which includes a copy of the resident's JFS 01176, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/23/2024

Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5101:2-13-04 Fire Safety for Type B Homes
Code: The program is required to follow all requirements in rule regarding emergency exits and operational conditions.

Findings: During the inspection, it was determined the following requirements regarding emergency exits and operational conditions were not met by the program [ ]. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 03/01/2024

Domain: 00 License & Approvals

Rule: 5101:2-13-04 Fire Safety for Type B Homes
Code: The program is required to meet all requirements for fire extinguishers.

Findings: During the inspection, it was determined the fire extinguisher was not meeting the requirements in the following number(s) 5 listed below:

1. There was no fire extinguisher.
2. The fire extinguisher was not working.
3. The fire extinguisher was not rated at the minimum rating.
4. The fire extinguisher had expired.
5. The fire extinguisher was not located in the kitchen where food is provided for child care or cooking area.

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

Corrective Action Plan Due: 02/23/2024

Domain: 00 License & Approvals

Rule: 5101:2-13-04 Fire Safety for Type B Homes
Code: The program is required to maintain smoke alarms in the appropriate areas of the program building.

Findings: During the inspection, it was determined that the Type B Home did not have a working smoke alarm in the basement/on each level of the home or smoke alarm(s) were not placed/installed/tested/maintained in accordance with manufacturer's recommendations. A working smoke alarm must be placed, installed, tested, and maintained in accordance with manufacturer's recommendations. Submit the program's corrective action plan to verify compliance with this rule.

Corrective Action Plan Due: 02/23/2024

Domain: 00 License & Approvals

Rule: 5101:2-13-02 Information in OCLQS
Code: The provider is required to keep their information current in OCLQS.

Findings: During the inspection, it was determined the information in number(s) 4 below was not up to date in the Ohio Child Care Licensing and Quality System:

1. Mailing Address;
2. Telephone Number;
3. Email Address;
4. Days and Hours of Operation;
5. Services Offered;
6. Name of Program, If applicable.
7. Private pay rates.

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

Corrective Action Plan Due: 02/23/2024

Domain: 01 Ratio & Supervision

Rule: 5101:2-13-18 Attendance
Code: The program is required to maintain a record of the arrival and departure of each child. The program is also required to retain the original attendance record at the program for a period of one year.

Findings: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number(s) 1,2,5 below:

1. No attendance record was being maintained.
2. The attendance record was not being consistently completed.

3. The record did not include the name of at least one child.
4. The record did not include the birth date of at least one child.
5. The record did not include the assigned group.
6. The record did not include the child's weekly schedule.
7. The record did not include the time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.
8. The original attendance record was not kept at the program for a period of one year.

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

Corrective Action Plan Due: 02/23/2024

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-13 Smoke Free
Code: The program is required to provide a smoke free environment during operating hours, ensure smoking is not seen by children, post a "No Smoking Sign" by the main entrance, provide notification to parents if smoking occurs on the premises outside of operating hours, and refrain from exposing children to smoking paraphernalia.

Findings: During the inspection, it was determined that the program was not maintaining a smoke free environment, as noted in the number(s) below: 3

1. The program did not provide a smoke free environment for children during the hours of child care in that [ ].
2. An individual left the home to smoke, however, this smoking occurred in an area within view of the children.
3. A "No Smoking" sign was not displayed in a conspicuous place at the main entrance.
4. Smoking had occurred in the program or vehicle during hours the program was not in operation; however, parents had not been given written notice of this.
5. Children had access and/or were exposed to smoking paraphernalia in that [cigarettes/cigars/pipe butts/ashes/chewing or smokeless tobacco/electronic cigarettes/vaporizers] was/were observed in view of children.
6. Other [ ].

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

Corrective Action Plan Due: 02/23/2024

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-13 Clean environment and equipment
Code: The program is required to follow the cleaning schedule for equipment.

Findings: During the inspection, it was determined that the program was not providing a clean and healthy environment, furniture, materials and equipment as required by Appendix A, as noted in number(s) 3 below:

1. Item(s) soiled with blood or bodily fluids were not cleaned/sanitized immediately.
2. Blankets/sheets were not cleaned weekly, when soiled, or before use by another child.
3. Children's individual blankets and belongings were stored in an unsanitary manner.
4. Bottles, bottle caps, nipples and other equipment used for bottle feeding were not cleaned and sanitized in a dishwasher or by washing, rinsing, and boiling for one minute.
5. Carpets were not vacuumed weekly or cleaned when soiled.
6. Changing table/pad was not sanitized after each use or cleaned when visibly soiled.
7. Reusable cloths were not being washed daily or when visibly soiled.
8. Cots/Pads/Mats were not cleaned and sanitized before assigning to a different child, when used by a sick child, when soiled or at least every three months.
9. Cribs were not cleaned and sanitized monthly, or when soiled, or before use by another child.
10. Diaper Receptacles were not cleaned and sanitized daily or more frequently as needed to eliminate odor.
11. Dishes/Cups/Silverware were not cleaned and sanitized after each use.
12. Water Containers were not labeled with the child's name, or were not cleaned and sanitized before use again on another day.
13. Dress up clothes and hats (dramatic play) were not cleaned monthly or when soiled.
14. Floors were not cleaned weekly or when soiled.
15. The food prep area, including sinks, were not cleaned before and after preparing food (including bottle preparation) or between preparing raw or cooked food.
16. Potty chairs were not cleaned after each use, rinsed with water, cleaned and sanitized or contents were not emptied into a toilet.
17. Food tables, highchair trays were not cleaned before and after each use.
18. Tables used for play were not cleaned when visibly soiled or sanitized daily.
19. Toilet bowls were not cleaned when visibly soiled or sanitized weekly.
20. Toilet seat(s), handle(s) and hand washing sink(s) were not cleaned when visibly soiled or sanitized daily.
21. Mouthed toys were not cleaned and sanitized after each child’s use.
22. Toys, other than those mouthed by children, were not cleaned monthly or when visibly soiled.
23. Washable furniture, including fabrics on infant equipment, were not cleaned weekly or when soiled.
24. Upholstered furniture was not steam cleaned when soiled.
25. Slip covers were not washed at least every six months or when soiled.
26. Wastebaskets/rinse buckets, including lids, were not being emptied daily or cleaned and sanitized when visibly soiled.
27. The manufacturer’s directions for the cleaning product were not followed.
28. The solution used for sanitizing was not a commercial product registered by the United States Environmental Protection Agency as a sanitizer.
29. Other [ ].

Furniture, materials and equipment must be maintained according to the cleaning and sanitizing schedule in Appendix A to this rule. Submit the program’s corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/23/2024

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Environment
Code: The program is required to store alcohol in a space not used by children.

Findings: During the inspection, it was observed that a sealed container of alcohol was observed in a space approved or used for child care as noted in the following number(s) below: 2
1. A sealed container was observed but children in care did not gain access to the alcohol.
2. A sealed container of alcohol was observed but children in care were not observed in the space at the time of the inspection.
These items must be removed or stored in space not approved or used for children as required. Submit the program's corrective action plan to verify compliance with this rule.

Corrective Action Plan Due: 02/23/2024

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Environment
Code: The program is required to store cleaning and sanitizing supplies in a place that is inaccessible to children. Cleaning agents, aerosol cans and chemical substances must be stored in their original container or clearly labeled. School-age children may use cleaning supplies and equipment with adult supervision.

Findings: During the inspection, cleaning and sanitizing equipment and supplies were not used or stored properly as noted in number(s) 2.Disinfecting wipes were accessible to children in the bathroom area on the sink.
11.Other potentially hazardous substances WD40, Bug Spray was accessible to children in the bathroom area.

1. Cosmetics were accessible to children in the [ ] area.
2. Disinfecting wipes were accessible to children in the [ ] area.
3. Fish food was accessible to children in the [ ] area.
4. Hand lotion was accessible to children in the [ ] area.
5. Hand sanitizer (for children under 24 months) was accessible to children in the [ ] area.
6. Laundry detergent was accessible to children in the [ ] area.
7. Powder dish washing soap was accessible to children in the [ ] area.
8. Paint cans were accessible to children in the [ ] area.
9. White out was accessible to children in the [ ] area.
10. Potting Soil was accessible to children in the [ ] area.
11. Other potentially hazardous substance [ ] was accessible to children in the [ ] area.
12. Cleaning/sanitizing supplies had not been clearly labeled.
13. School-age children were using cleaning supplies, agents and/or equipment without adult supervision.
14. A spray aerosol was used in the [ ] group while children were in attendance.
15. Other: [ ].

Provide staff training. Submit the program's corrective action plan, which includes a statement that the potentially hazardous substance is no longer accessible to children and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/23/2024

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) 2,3,4,5,6,7,8, below:

1. The plan was not posted 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: 02/23/2024

Domain: 03 Postings & Equipment

Rule: 5101:2-13-17 Programming
Code: The program is required to have a daily schedule posted in a visible place.

Findings: During the inspection, it was determined the daily schedule was not in a visible place in the program. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 02/23/2024

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 01201 "Dental First Aid" and implement as required by rule.

Findings: During the inspection, it was determined the JFS 01201 "Dental First Aid" was not [completed/posted]. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule. Not Completed

Corrective Action Plan Due: 02/23/2024

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) 1,2,3 below:

1. Fire alert plan, including a diagram indicating evacuation routes.
2. Weather alert plan was missing details for Location, How to contact parents,
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: 02/23/2024

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: 02/23/2024

Domain: 05 Health & Safety

Rule: 5101:2-13-16 Emergency Preparedness and Response Plan
Code: The program is required to train child care staff members and employees on the written disaster plan annually and keep written documentation of the training on-site.

Findings: During the inspection, it was determined the program's written disaster plan did not meet the requirement for training child care staff members and employees on the plan annually as noted in number(s) 2 below:

1. Child care staff members and employees were not trained annually.
2. Written documentation of the training was not kept on file.

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

Corrective Action Plan Due: 02/23/2024

Domain: 05 Health & Safety

Rule: 5101:2-13-16 Emergency Drills
Code: The program is required to complete and document the required drills.

Findings: During the inspection, it was determined that the required drills were not completed for item number(s) 1,2,3 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 verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/23/2024

Domain: 05 Health & Safety

Rule: 5101:2-13-16 First Aid Kit/Standard Precautions
Code: The program is required to meet the requirements for first aid kits.

Findings: During the inspection, it was determined that the program did not have a first aid kit [onsite/ on the vehicle/ on a field trip] as required, that included all items listed in the appendix A of the rule. The kit(s) were missing the item(s) or the item(s) were not replaced after use and/or expired listed in number(s) below: 7,8,9,11,13

1. One roll of first-aid tape;
2. Individually wrapped sterile gauze;
squares in assorted sizes;
3. Sterile adhesive bandages in assorted sizes;
4.Tweezers;
5. Gauze rolled bandage;

6. Triangular bandage;
7. Rounded end scissors;
8. Tooth preservation system or fresh chilled liquid milk in which to transport a lost permanent tooth, including a written reference indicating location of the refrigerator/freezer where milk is stored if a tooth preservation system is not part of the first aid kit (for programs serving school age children only);
9. A working digital thermometer;
10. Disposable non-latex gloves;
11. A working flashlight;
12. An instant cold pack that has not been activated or ice, including a written reference indicating location of the refrigerator/freezer where the ice is stored if an instant cold pack is not part of the first aid kit;
13. Sealable leak-proof plastic bags in assorted sizes or double bagged plastic bags that can be securely tied for materials soiled with blood or bodily fluids;
14. Pocket mask or face shield, appropriate; for all ages of children in care, for cardiopulmonary resuscitation (CPR) administration;
15. Soap or waterless sanitizer (field trip or transporting away from the program only);
16. Bottled water (field trip or transporting away from the program only).

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

Corrective Action Plan Due: 02/23/2024

Domain: 06 Program Information

Rule: 5101:2-13-14 Requirements for Field and Routine Trips
Code: The program is required to obtain written parental permission before leaving the premises and retain the forms for at least one year from the date of the trip. Routine trip permission forms must be updated annually.

Findings: In review of the program's records, it was determined that requirements for written permission from the parent/guardian for a field trip or routine trip were not met as listed in number(s) 11 below: Some of the permission slips were missing dates, some were missing completed phone numbers and some were not completely filled out.

1. Written parental permission was not secured for field trips and/or routine trips off the premises.
2. The written permission was missing the child's name.
3. The written permission was missing the date(s) of the trip(s) (field trips only).
4. The written permission was missing the destination(s) of the trip(s).
5. The written permission was missing the departure and return time(s) of the trip(s) (field trips only).
6. The written permission was missing the signature of the parent.
7. The written permission was missing the date on which the permission was signed.
8. The written permission was missing a statement notifying parents how their child will be transported.
9. Permission forms for routine trips were not being updated annually.
10. Written parental permission forms for field trips and/or routine trips were not being maintained on file for at least one year from the date of the trip.
11. Other: [ ].

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

Corrective Action Plan Due: 03/01/2024

Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-23 Infant Daily Care
Code: The program is required to provide a daily written record for each infant in care to the parents when picking up the infant each day.

Findings: During the inspection, it was determined that the written record used to document infant routines and activities did not meet the requirements as noted in number(s) 1,2,3,4,5 below:

1. A daily written record was not provided to the parent or person picking up the infant on a daily basis.
2. Food intake was missing.
3. Sleeping patterns was missing.
4. Times and results of diaper changes was missing.
5. Information about daily activities was missing.

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

Corrective Action Plan Due: 02/23/2024

Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-23 Infant Bottle and Food Preparation
Code: The program staff is required to have all bottles labeled.

Findings: During the inspection, it was determined that bottles containing milk for a particular infant were not labeled with the child's name and date of preparation. Submit the program's corrective action plan to verify compliance with the requirements of this rule. Cups were not labeled with children's name or date

Corrective Action Plan Due: 02/23/2024

Domain: 08 Staff Files

Rule: 5101:2-13-08 Employee Requirements
Code: The program is required to obtain completed medical statements for all program staff.

Findings: In review of the staff records, it was determined that the medical statements for those individuals listed on the Employee Record Chart did not include the required information listed below in number(s) 5a

1. A medical statement was not on file;
2. The medical statement(s) on file were not dated within 12 months of the individual'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 individual 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);

Submit the program's corrective action plan, which includes a copy of the completed medical statement, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/23/2024

Domain: 08 Staff Files

Rule: 5101:2-13-08 Child Care Staff Requirements
Code: The program is required to have staff complete the online staff orientation training. Additionally, the training must be completed before they are permitted to have sole responsibility of children.

Findings: In review of the staff records, it was determined that child care staff member(s) or substitute child care staff member(s) did not meet the requirements for completing the online orientation training as noted in number(s) 1 below:

1. The training was not completed within 30 days of starting employment at the program as a child care staff member.
2. No documentation of completing the training after December 31, 2016.
3. Completion of the training was not verified in the OPR.
4. A child care staff member had sole responsibility of children and had not completed the online orientation.

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

Corrective Action Plan Due: 02/23/2024

Domain: 08 Staff Files

Rule: 5101:2-13-08 Child Care Staff Requirements
Code: The program staff is required to obtain the required trainings to meet the requirements.

Findings: In review of the staff records, it was determined the training requirements were not met for the Child Care Staff Member(s) listed on the Employee Record Chart, as required. Submit the program's corrective action plan, which includes copies of verification of training, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/23/2024

Domain: 08 Staff Files

Rule: 5101:2-13-07 Provider Responsibilities
Code: The provider is required to reside at the licensed location, not have additional activities or employment during the program's operating hours, be on-site at the program for at least 75 percent of the program's operating hours, and have hours of availability posted in a noticeable place.

Findings: During the inspection, it was determined that the provider was not meeting the following requirements as noted in number(s) 4 below :

1. The provider no longer resides at the licensed location.
2. The licensed provider has additional activities/employment during operating hours, in that [ ].
3. The provider was not on-site for 75 percent of the program's operating hours as required by this rule.
4. The provider did not have hours of availability to meet with parents a noticeable location.

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

Corrective Action Plan Due: 02/23/2024

Domain: 08 Staff Files

Rule: 5101:2-13-07 Staff Records
Code: The provider is required to maintain current employee, child care staff members and resident records in the Ohio Professional Registry.

Findings: During the inspection, it was determined that employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 2,3,4,9,10, below:
1. The provider had not created or updated their individual profile in the OPR.
2. The provider had not created or updated the program's organizational dashboard in the OPR.
3. At least one employee, child care staff member, or substitute child care staff member had not created or updated their individual profile in the OPR.
4. At least one employee, child care staff member, or substitute child care staff member had not created an employment record in the OPR for the program on or before the first day of employment, including date of hire.
5. At least one employee, child care staff member, or substitute child care staff member had not updated changes to positions or roles in the OPR within five calendar days of the change.
6. The program's organizational dashboard in the OPR was not updated within five business days when at least one employee, child care staff member, or substitute child care staff member's scheduled days and hours changed.

7. The program's organizational dashboard in the OPR was not updated within five business days when at least one employee, child care staff member, or substitute child care staff member's group assignments changed, if applicable.
8. The program's organizational dashboard in the OPR was not updated with the employment end date within five business days when at least one employee, child care staff member, or substitute child care staff member ended employment.
9. At least one resident over the age of eighteen had not created a profile and employment record for the family child care provider within five days of becoming a resident or turning eighteen.
10. The program's organizational dashboard in the OPR was not updated within five calendar days of a change in residency for at least one resident over the age of eighteen.
11.Other: []
Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/23/2024

Domain: 08 Staff Files

Rule: 5101:2-13-07 Provider Responsibilities
Code: The program is required to notify the county agency of any change in the household composition.

Findings: During the inspection, it was determined the provider did not update OCLQS as noted in the following number 1,2 below:

1. A change in household composition including someone joining the household or leaving the household within five calendar days.
2. An individual staying in the home for more than ten consecutive calendar days.

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

Corrective Action Plan Due: 02/23/2024

Domain: 08 Staff Files

Rule: 5101:2-13-07 Provider Responsibilities
Code: The provider is required to maintain the required liability insurance or have a completed JFS 01933 "Liability Insurance Statement for Family Child Care Providers" on file for each child in care.

Findings: During the inspection, it was determined the provider did not [obtain or maintain the required liability insurance/have a completed JFS 01933 "Liability Insurance Statement for Family Child Care Providers" completed for each child in care]. Correct the violation and submit proof of insurance with the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 02/23/2024

Domain: 08 Staff Files

Rule: 5101:2-13-07 Staff Records
Code: The program is required to maintain a file for each staff member at the program.

Findings: During the inspection, it was determined that documentation was not on file at the program to meet the requirements of this rule for the employee(s) and/or child care staff members, as noted on the Employee Record Chart. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/01/2024

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 CCSM or Substitute CCSM was left alone with children and did not have current valid documentation for training(s) listed in number(s) 2,5,11 below:

1. First Aid - expired training
2. First Aid - did not have verification of 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 the program serves 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 by staff 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 the 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: 02/23/2024

Domain: 08 Staff Files

Rule: 5101:2-13-10 Health Training
Code: Child care staff members and substitute child care staff members are required to complete health trainings within the first ninety days of hire and prior to being left alone with children.

Findings: In review of records, it was determined the CCSM or Substitute CCSM did not meet health training requirements listed in number 2,3,2 below:
1. All health trainings were not completed prior to being left alone with children.
2. First Aid training was not completed within the first ninety days of hire.
3. CPR training was not completed within the first ninety days of hire.
2. Communicable Disease training was not completed within the first ninety days of hire.
3. Child Abuse training was not completed within the first ninety days of hire.
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: 02/23/2024

Domain: 09 Children's Files

Rule: 5101:2-13-15 Child Medical and Enrollment Records
Code: The program is required to have a completed medical on file for each child.

Findings: In review of of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in number(s) 2 below:

1. No medical was on file for at least one child
2. Medical(s) on file was not updated every 13 months
3. Medical(s) were missing child's name and date of birth
4. Medical(s) were missing the date of the medical examination
5. The date of the exam was more than 13 months prior to the date the form was signed
6. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care
7. Medical(s) were missing the signature, business address and telephone number of the physician, physician's assistant(PA), advance practice nurse (APN) or certified
nurse practitioner (CNP) who examined the child
8. Medical(s) were missing a record of immunizations the child has had specifying month, day and year

9. Medical(s) were missing a statement from the physician, PA, APN, or CNP that the child has been immunized or is in the process of being immunized against the diseases
required by division 5104.014 of the Revised Code and found in appendix A to this rule
10. Medical(s) were missing a statement from the child's parent or guardian that he or she has declined to have the child immunized against the disease for reasons of
conscience, including religious convictions
11. Other [ ]

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

Corrective Action Plan Due: 02/23/2024

Domain: 09 Children's Files

Rule: 5101:2-13-15 Child Medical and Enrollment Records
Code: The program is required to have a completed JFS 01234 "Child Enrollment and Health Information for Child Care" on file on the premises for each child.

Findings: In review of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in number(s) 2,3,5,7,9 below:

1. No enrollment form was completed for at least one child
2. The current JFS 01234 was not completed for at least one child
3. Complete child information
4. Complete parent information
5. Complete emergency contact information
6. Complete physician information
7. Information regarding the parent list
8. Health information
9. Additional information for all boxes checked "yes"
10. Emergency transportation information
11. Parent/guardian's signature
12. Diapering Statement
13. Acknowledgement of Policies and Procedures
14. Enrollment form for at least one child was not updated by either the parent or the administrator
15. Enrollment form for at least one child was not signed by the administrator
16. Other [ ]

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

Corrective Action Plan Due: 02/29/2024

Domain: 10 Written Policies & Procedures

Rule: 5101:2-13 Written Policies and Procedures
Code: The provider is required to create, maintain, and implement the policies and procedures outlined in appendix C and D of this rule.

Findings: It was determined, the provider was not responsible for creating, maintaining or implementing the policies and procedures detailed in appendix C and D of this rule. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 02/23/2024

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 License Visible	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Voluntary Temporary Closure	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Change of Location	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-02 Provider Medical	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-03 Inspection Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable

5101:2-13-04 Building Requirements for Type B Homes	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Flammable and Combustible Materials in a Type B Home	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-04 Heaters in a Type B Home	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-05 Denial, Revocation, and Suspension	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-07 Type B Provider - Foster Parent	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Whistle Blower	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-10 Professional Development	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-13-11 Outdoor Space	Not Verified	Documenting Statement: 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) [ ] 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.

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Outdoor Equipment	Not Verified	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Fall Zone	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Safe Equipment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Handwashing	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-13 Toothbrushing	Compliant	

Rule	Status	Documenting Statement(s), If applicable

5101:2-13-14 Ratio and Supervision for Field and Routine Trips	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Driver Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Vehicle Inspections	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-14 Vehicle Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Health Conditions	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-15 Child Records Retention and Confidentiality	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Communicable Diseases	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 Incident/Injury	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 Supervision	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 School Age Supervision	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-19 Child Guidance	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-20 Sleep and Nap Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-20 Crib and Playpen Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-21 Evening and Overnight Care	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-21 Sanitary Environment and Hygiene	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-22 Meals and Snacks	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-22 Food Handling	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Diapering	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-24 Parent Permission for Swimming	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-25 Medication Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-18 Group Size and Ratios	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-11 Indoor Space	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-24 On-site Pools	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Pets	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-24 Swimming Sites	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-17 Materials and Equipment	Compliant	