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 COLES, FELICIA	Program Number 000000976263056	Program Type FCC - Type B Home
Address 3598 WEST BLVD CLEVELAND OH 44111		County CUYAHOGA

Inspection Information		
Inspection Type Compliance	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 10/13/2023	Begin Time 10:30 AM	End Time 1:42 PM
Reviewer: Melissa Vega		

Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
68	5	0	0	7

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 Years	3	0	0	0
Older Toddler		0	0	0
Preschool		0	0	0
School Age		5	0	5
Total Capacity/Enrollment	6	5	0	5

Staff-Child Ratios at the Time of Inspection			
Group	**Age Group/Range**	**Ratio Observed**	**Comment**
Felicia Coles		1 to 0	No children were present today due to all children being in school.

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Summary of Non-Compliances

If a program disagrees with a licensing finding, the program may request a review of the finding(s). Ohio Administrative Code 5101:2-12-03 and 5101:2-13-03 detail the process for submitting a request for review. The request for review must be submitted within seven business days from the receipt of the licensing report. In addition, if the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited.

Serious Risk Non-Compliances

No Serious Risk Non-Compliances were observed during this inspection

Moderate Risk Non-Compliances

No Moderate Risk Non-Compliances were observed during this inspection

Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5101:2-13-02 Provider Medical
Code: The provider is required to submit a complete and valid medical statement.

Findings: In review of the staff records, it was determined that the medical statement for the provider did not include the required information listed below in number(s) 1-3c:

1. Date of examination;
2. Signature, business address, and telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination;
3. A statement that verifies that the employee is:
a. Physically fit for employment as a provider caring for children;
b. Immunized against Measles, Mumps, and Rubella (MMR).
c. Immunized against tetanus, diphtheria and pertussis (Tdap).

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

Corrective Action Plan Due: 11/16/2023

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-13 Clean environment and equipment
Code: The program is required to have all required items in the restroom(s) and keep them sanitary.

Findings: During the inspection, it was determined that unsanitary conditions, as noted in the following number(s) #4 and #5 below, were in the basement level main restroom:

1. There was no liquid soap.
2. There was no toilet tissue.
3. There were no individually assigned towels or disposable towels.
4. The toilet cleaning brush was accessible to the children.
5. The plunger was accessible to the children.
6. The toilet was not flushed.
7. The trash was not emptied from the day before.
8. There was a strong urine odor.
9. Other [ ].

The restroom(s) must be kept sanitary at all times. Submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 11/16/2023

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) 1-3 below:

1. Fire alert plan, including a diagram indicating evacuation routes.
2. Weather alert plan was missing details for evacuations route.
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: 11/16/2023

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 posted/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: 11/16/2023

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) #1 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: 11/16/2023

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.

Corrective Action Plan Due: 11/16/2023

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-13-12 Safe Equipment
Code: The program is required to use equipment that is safe and hazard free according to the manufacturer's guidelines. Fans, air conditioners, heat pumps, and space heaters must be inaccessible to children. The program is required to refrain from using trampolines, ball pits and inflatable equipment intended for climbing and bouncing, including but not limited to slides and bounce houses.

Findings: During the inspection, equipment was determined to be unsafe, hazardous to children, or in need of repair as noted in number(s) #17 below:

1. Manufacturer's guidelines for the [ ] were not followed in that [ ].
2. The straps were missing on the [ ].
3. The straps were attached, but were not used on the [ ].
4. The straps were attached and were used, but were not used in a safe manner.
5. The equipment had sharp points or corners.
6. The equipment had splinters.
7. The equipment had protruding nails.
8. The equipment had loose or rusty parts.
9. The equipment had paint which contains lead or other poisonous materials.
10. The equipment had hazardous features.
11. A fan was unstable and could easily tip over.
12. A fan had openings a finger could enter.
13. The pipes from the heat pump felt hot to the touch
14. A space heater felt hot to the touch
15. The position of a space heater was a tripping hazard

16. The air conditioning unit was not enclosed and was accessible to children on the playground.
17. A ball pit, trampoline, inflatable bounce house, inflatable slide, inflatable equipment used for climbing and bouncing was used.
18. Other [ ].

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

Corrective Action Plan Due: 11/16/2023

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 Information in OCLQS	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 Fire Safety 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
5101:2-13-07 Staff Records	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 Employee Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Child Care Staff Requirements	Compliant	

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

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-09 Background Checks	Compliant	

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

Rule	Status	Documenting Statement(s), If applicable

5101:2-13-10 Professional Development	Compliant	

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

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

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 Environment	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 Smoke Free	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 Requirements for Field and Routine Trips	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 Child Medical and Enrollment Records	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 Emergency Drills	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-16 First Aid Kit/Standard Precautions	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
5101:2-13-16 Disaster Plan	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-18 Attendance	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 Fluid Milk	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 Infant Daily Care	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-23 Infant Bottle and Food Preparation	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
5101:2-13-07 Provider Responsibilities	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 Written Policies and Procedures	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-13-12 Carbon Monoxide Detectors - Type B Only	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	