Department of Education
Department of Job and Family Services

Center Licensing Inspection Full Report

All licensed child care programs are inspected at least once each year. Non-compliances are documented and grouped as Serious, Moderate or Low risk violations. Documenting statements and supplemental information may be included in this report. Licensing inspection reports from the previous three years can be viewed on the child care website at http://jfs.ohio.gov/CDC/childcare.stm. This includes complaint investigation reports with substantiated allegations. For any other child care records, please contact the Child Care Help Desk at 1-877-302-2347, option 4.

Program Details		
Program Name BUTTONS & BOWS	Program Number 000000106269	Program Type Child Care Center
Address 916 STATE STREET NE MASSILLON OH 44646		County STARK

Building Approval Date 07/27/2021	Use Group/Code	Occupancy Limit 45	Maximum Under 2 ½ 7
Fire Inspection Approval Date 06/07/2023	Food Service Risk Level Exempt		

Inspection Information		
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 02/07/2024	Begin Time 11:51 AM	End Time 2:45 PM
Reviewer: MICHELE FAKAN		

Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
58	1	0	0	1

License Capacity and Enrollment at the Time of Inspection				
Age Group	License Capacity	Enrollment		
	Totals	Full Time	Part Time	Total
Infant (Birth to < 18 m)		0	0	0
Young Toddler		5	0	5
Total Under 2 ½ Years	7	5	0	5
Older Toddler		1	0	1
Preschool		19	0	19
School Age		0	0	0
Total Capacity/Enrollment	30	20	0	25

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

Preschool B	5 years to < Kindergarten	1 to 8	
Preschool B	Mixed Age Group	2 to 13	nap
Preschool A	3 years to < 4 years	1 to 5	
Preschool A	Mixed Age Group	2 to 13	nap
Toddlers	Mixed Age Group	1 to 6	
Toddlers	Mixed Age Group	1 to 6	

Summary of Non-Compliances

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

Serious Risk Non-Compliances

No Serious Risk Non-Compliances were observed during this inspection

Moderate Risk Non-Compliances

No Moderate Risk Non-Compliances were observed during this inspection

Low Risk Non-Compliances

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement
Code: The program staff's medical statements are required to be completed and on file at the program.

Finding: In review of the staff records, it was determined that the medical statements for the employees listed on the Employee Record Chart did not meet the requirements as listed in number 6 below.

1. A medical statement was not on file for at least one employee;
2. The medical statement(s) on file did not have a date of examination within 12 months of the employee's first day of employment;
3. Date of examination was missing;
4. Signature, business address, or telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination was missing;
5. A statement was missing that verifies the employee is:
a. Physically fit for employment in a program caring for children;
b. Immunized against Tetanus, Diphtheria, Pertussis (Tdap);
c. Immunized against Measles, Mumps, and Rubella (MMR);
6. Tuberculosis (TB) screening/test information was missing:
a. Documentation of the screening process to determine if the employee resided in a country identified by the world health organization as having a high burden of TB and arrived in the United States within the five years preceding the date of application for employment.
b. Results of a TB test for employees meeting both criteria in 6a.
c. Results of additional testing for employees with a positive TB test.
d. Written statement, signed by a representative of the TB control unit, that the employee's TB is no longer infectious or the individual is receiving a TB treatment regimen for employees with a positive TB test.

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

Corrective Action Plan Due: 03/08/2024

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 Current Information	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-03 Inspection Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Building Department Inspection	Compliant	Documenting Statement: A copy of the certificate of occupancy was available on-site for review.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Fire Inspection	Compliant	Documenting Statement: Please Note: Documentation of a fire inspection without any uncorrected violations must be secured for the program. Secure a new fire inspection by 6/7/2024.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Food Service Requirements	Compliant	Documenting Statement: The program has obtained a food service exemption status from the local health department.

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator Qualifications	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator Responsibilities/Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-07 Written Program Policies and Procedures	Compliant	Documenting Statement: The written policies and procedures reviewed on the day of the inspection were verified as complete.

Rule	Status	Documenting Statement(s), If applicable

5101:2-12-08 Child Care Staff Member Educational Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Orientation Training & Whistle Blower Protection	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-09 Background Check Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-10 Health Training Requirements	Compliant	Documenting Statement: The program 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	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Separation of Children Under 2 1/2 Years	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Space 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 Requirements	Compliant	Documenting Statement: The quarterly playground inspections were completed and documented, as required. The most recent inspection report form was dated 1/6/2024.

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Equipment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Fall Zones	Compliant	

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

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

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

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

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

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-14 Transportation and Field Trip Procedures	Compliant	Documenting Statement: The program uses the ODJFS sample trip permission form for routine and field trips to secure written permission from parents or guardians.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Child Medical and Enrollment Records	Compliant	Documenting Statement: At the time of the inspection, 25% of the children's records were reviewed, and the records were complete, as required by the rule.
Rule: 5101:2-12-15 Child Medical and Enrollment Records	Compliant	Documenting Statement: In review of 25% of the records, at the time of the inspection, children's medical statements were complete and on file, as required by the rule.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Medical/Physical Care Plans	Compliant	Documenting Statement: At the time of the inspection, there were no children

		currently enrolled who had health conditions.

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Emergency Drills	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard Precautions	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of Communicable Disease	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Incident/Injury Reporting	Compliant	Documenting Statement: The JFS 01299 "Incident/Injury Report For Child Care" forms reviewed during this inspection were complete as required.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Written Disaster Plan	Compliant	Documenting Statement: Annual training of the written disaster plan was completed by staff.
Rule: 5101:2-12-16 Written Disaster Plan	Compliant	Documenting Statement: The program's written disaster plan was reviewed during the inspection and met the requirements.

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Schedule	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Materials and Equipment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Ratio	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Group Size	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Attendance Records	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Supervision	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cots and Napping	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Meal and Snack Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Fluid Milk Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food Handling/Storage	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-23 Diapering and Toilet Training	Compliant	Documenting Statement: During the inspection, there was discussion concerning diapering routines. Child-care staff indicated diapers were changed at appropriate intervals throughout the day.

Rule	Status	Documenting Statement(s), If applicable

5101:2-12-25 Medication Administration	Compliant	