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 STEPHENS, RAYLETTE	Program Number 000000926213245	Program Type FCC - Type B Home
Address 141 Valley Forge Cir Elyria OH 44035		County LORAIN

Inspection Information		
Inspection Type Compliance	Inspection Scope Full	Inspection Notice Announced
Inspection Date 11/16/2023	Begin Time 7:15 PM	End Time 9:55 PM
Reviewer: Jennifer Verda		

Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
68	5	0	1	4

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

Staff-Child Ratios at the Time of Inspection			
Group	**Age Group/Range**	**Ratio Observed**	**Comment**
R. Stephens		1 to 0	

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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

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: 12/16/2023

Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5101:2-13-03 Inspection Requirements

Code: The program is required to respond to all non-compliances by the date noted in the inspection report.

Findings: During the inspection, it was determined the program had not responded to the non-compliances addressed in the inspection report dated 4/20/23 . The rule requires the program complete and submit a corrective action plan in OCLQS to address non-compliances detailed in written inspection reports within the timeframe outlined in the report. Submit the program's corrective action plan, which includes a statement that current and future corrective action plans will be submitted timely, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/16/2023

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, 2, 3 below:

1. Fire alert plan, including a diagram indicating evacuation routes.
2. Weather alert plan was missing details for tornado sheltering, storm w/ loss of power.
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: 12/16/2023

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 as required, that included all items listed in the appendix A of the rule. The kit was missing the item listed in number 8 below:

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: 12/16/2023

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 2, 9 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: 12/16/2023

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
5101:2-13-02 Provider Medical	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 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
5101:2-13-10 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 Equipment	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 Clean environment and 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 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 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
5101:2-13-17 Programming	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	