Department of Children & Youth

Licensing Inspection Full Report

All licensed early care and education programs are inspected at least once each year. Non-compliances are documented and grouped by risk level. Documenting statements, technical assistance provided and supplemental information may be included in this report. Licensing inspection reports from the previous three years can be viewed on the Department of Children & Youth website at https://childcaresearch.ohio.gov/ . This includes complaint investigation reports with substantiated allegations. For any other early care and education records, please contact the Family and Customer Support Center at 1-844-234-5437.

Program Details		
Program Name SCHMIDT, CRYSTEL	Program Number 000000974155452	Program Type FCC - Type B Home
Address 4005 CORDUROY RD Oregon OH 43616		County LUCAS

Inspection Information			
Inspection Type Compliance	Inspection Scope Full	Inspection Method On-site Inspection	Inspection Notice Announced
Inspection Date 04/15/2026	Begin Time 10:39 AM	End Time 12:25 PM	Reviewer: Julie Tursic

Summary of Findings			
No. Requirements Verified 68	No. Requirements with Non-compliances 6		No. Requirements Compliant 61
No. Serious Risk 0	No. Moderate Risk Findings 1	No. Other Non-compliance Findings 5	No. Technical Assistance Provided 0

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 ½ Years		1	0	1
Older Toddler		0	0	0
Preschool		2	0	2
School Age		2	0	2
Total Capacity/Enrollment	7	4	0	5

Staff-Child Ratios at the Time of Inspection				
Group	**Age Group/Range**	**Ratio Observed**	**Compliance**	**Comment**
ONE	Mixed Age Group	1 to 3	In Compliance	Ratio: 3 at 10:41am

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 5180:2-12-03, 5180:2-13-03, 5180:2-19-10 and 5180:2-20-02 detail the process for submitting a request for review. The request for review must be submitted within ten business days from the receipt of the licensing report. In addition, if the program is Step Up To Quality rated, the rating may be impacted if a serious or moderate risk non-compliance is cited.

Serious Risk Non-Compliances

A serious risk non-compliance is a licensing rule violation that has the potential to lead to a great risk of harm to a child and is observable and/or based on facts.

No serious risk non-compliances were observed during this inspection

Moderate Risk Non-Compliances

A moderate risk non-compliance is a licensing rule violation that has the potential to lead to a great risk of harm to a child and is observable and/or based on facts.

Domain: **08 Staff Files**

Rule: 5180:2-13-09 Background Checks

Requirement: Individuals associated to the program are required to request background checks.

Finding: In review of the staff records, it was determined that a resident of the home 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: 05/15/2026

Other Non-Compliances

This section includes other rule violations that are observable and/or based on facts.

Domain: **00 License & Approvals**

Rule: 5180:2-13-04 Fire Safety for Type B Homes

Requirement: The program is required to maintain smoke alarms in the appropriate areas of the program building.

Finding: During the inspection, it was determined that the Type B Home did not have a working smoke alarm in the basement or smoke alarm(s) 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: 05/15/2026

Domain: **05 Health & Safety**

Rule: 5180:2-13-22 Fluid Milk

Requirement: The program is to ensure that children are served age-appropriate fluid milk.

Finding: 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: 05/15/2026

Domain: **07 Diapering & Infant Care**

Rule: 5180:2-13-20 Crib and Playpen Requirements

Requirement: The program is required to remove objects from cribs/playpens that could block the child.

Finding: During the inspection, it was determined that a child had been place in a crib or playpen with the following number(s) 4 below which could obstruct a provider or child care staff member's view of the infant:

1. Busy box or other toy attached to the side of the crib or playpen.

2. A blanket hanging over the side of the crib or playpen.

3. Stuffed animal that is not large/soft enough that it could conform to the shape of the child's face.

4. Other; pillow in blanket were in playpen, no child in the playpen

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

Corrective Action Plan Due: 05/15/2026

Domain: **08 Staff Files**

Rule: 5180:2-13-07 Staff Records

Requirement: The provider is required to maintain current employee, child care staff members and resident records in the Ohio Professional Registry.

Finding: 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) 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: 05/15/2026

Domain: 08 Staff Files

Rule: 5180:2-13-10 Health Training

Requirement: The program is required to meet the health training requirements.

Finding: In review of records, it was determined the provider did not have current valid documentation for training(s) listed in number(s) 14 below:

1. First Aid - expired training

2. First Aid - did not have verification of the 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 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 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 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: 05/15/2026

Department of Children & Youth

Technical Assistance Provided

This section documents technical assistance provided to the program when the program demonstrated an overall level of compliance with a rule requirement.

In Compliance/Not Verified/Previously Verified/Not Applicable

This section documents rule requirements that were assessed as fully compliant, previously verified, not verified during this inspection or not applicable to the program.

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Voluntary Temporary Closure	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 License Visible	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Change of Location	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Information in OCLQS	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Provider Medical	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-03 Inspection Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable

5180:2-13-04 Building Requirements for Type B Homes	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Flammable and Combustible Materials in a Type B Home	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Heaters in a Type B Home	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-05 Denial, Revocation, and Suspension	Not Applicable	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-07 Provider Responsibilities	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13 Written Policies and Procedures	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-07 Type B Provider - Foster Parent	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Employee Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Child Care Staff Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Whistle Blower	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-10 Professional Development	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Indoor Space	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Outdoor Space	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Outdoor Equipment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Fall Zone	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Safe Equipment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Safe Environment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Carbon Monoxide Detectors - Type B Only	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Pets	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Clean environment and equipment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Smoke Free	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-15 Child Medical and Enrollment Records	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Handwashing	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Toothbrushing	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Requirements for Field and Routine Trips	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Ratio and Supervision for Field and Routine Trips	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Driver Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Vehicle Inspections	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Vehicle Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-15 Health Conditions	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-15 Child Records Retention and Confidentiality	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Medical, Dental, and General Emergency Plan	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Emergency Drills	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 First Aid Kit/Standard Precautions	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Communicable Diseases	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Incident/Injury	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Emergency Preparedness and Response Plan	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-17 Programming	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-17 Materials and Equipment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-18 Group Size and Ratios	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-18 Attendance	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 Supervision	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 School Age Supervision	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-21 Evening and Overnight Care	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-20 Sleep and Nap Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 Child Guidance	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-21 Sanitary Environment and Hygiene	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-22 Meals and Snacks	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-22 Food Handling	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Infant Daily Care	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Infant Bottle and Food Preparation	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Diapering	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 On-site Pools	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 Swimming Sites	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 Parent Permission for Swimming	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-25 Medication Requirements	Compliant	