Department of Education
Department of Job and Family Services

Center Complaint Inspection Summary 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 Heritage Christian Childcare Center	Program Number 2210023960	Program Type Child Care Center
Address 52329 National Rd. SAINT CLAIRSVILLE OH 43950		County BELMONT

Inspection Information			
Inspection Type Complaint		Inspection Scope Partial	Inspection Notice Unannounced
Reviewer(s) JENNIFER COPE	Inspection Day 10/04/2023	Begin Time 1:45 PM	End Time 2:15 PM

Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
3	2	0	1	1

Staff-Child Ratios at the Time of Inspection			
Group	**Age Group/Range**	**Ratio Observed**	**Comment**
PreK	4 years to < 5 years	1 to 9	nap
Infants	0 to < 12 months	1 to 5	nap
Toddler 1	18 months to < 30 months	2 to 6	nap
Toddler 2	30 months to < 36 months	1 to 6	nap
Preschool	3 years to < 4 years	1 to 7	nap

Complaint Allegations

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.

No Complaints were observed during this inspection.

Summary of Additional Non-Compliances

Serious Risk Non-Compliances

No Additional Serious Risk Non-Compliances were observed during this inspection

Moderate Risk Non-Compliances

Domain:07 Diapering & Infant Care

Rule: 5101:2-12-20 Cribs
Code: The program staff is required to remove any items listed in rule that are a potential suffocation risk from cribs.

Findings: During the inspection, it was determined that a child had been placed in a crib with an object that created a potential strangulation or suffocation risk, as indicated in number(s) 4 below:

1. Bib
2. Pacifier clip/ribbon
3. Teething jewelry

4. Blanket for infant under twelve months old
5. Pillow
6. Boppie
7. Bumper pad
8. Clothing stored in the crib
9. Diaper bag
10. Object or toy strung over the crib in which a child can pull himself up
11. Stuffed animal that is large/soft enough to conform to the shape of the child's face
12. Other [ ]

The rule prohibits any item which obstructs child-care staff's visibility or poses a risk of strangulation or suffocation from being placed on or in a crib. Remove the item(s) immediately. Provide staff training. Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/05/2023

Low Risk Non-Compliances

Domain:07 Diapering & Infant Care

Rule: 5101:2-12-23 Infant Daily Care
Code: The program staff is required to hold infants or have the infant sitting up while feeding. The program staff may not place an infant in a crib with a bottle.

Findings: During the inspection, it was determined that the program did not meet the requirements for bottle feeding as noted in number(s) 2 below:

1. A bottle was propped for an infant feeding.
2. An infant was placed in a crib with a bottle.
3. An infant was not held or fed sitting up for bottle feedings.

Provide staff training. Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/05/2023