

## 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://ifs.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<br>Kiddie Zone                             | Program Number<br>2250031686 | Program Type<br>FCC - Type B Home |
| Address<br>766 Froome Ave<br><br>Cincinnati<br>OH 45232 |                              | County<br>HAMILTON                |

| Inspection Information         |                                     |                          |                       |                                  |
|--------------------------------|-------------------------------------|--------------------------|-----------------------|----------------------------------|
| Inspection Type<br>Provisional |                                     | Inspection Scope<br>Full |                       | Inspection Notice<br>Unannounced |
| Inspection Date<br>11/21/2025  |                                     | Begin Time<br>10:48 AM   |                       | End Time<br>12:21 PM             |
| Reviewer:<br>Gina McDevitt     |                                     |                          |                       |                                  |
| Summary of Findings            |                                     |                          |                       |                                  |
| No. Rules Verified<br>68       | No. Rules with Non-compliances<br>6 |                          | No. Serious Risk<br>0 | No. Moderate Risk<br>1           |
|                                |                                     |                          | No. Low Risk<br>5     |                                  |

| 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                                             |                  | 1          | 0         | 1     |
| <b>Total Under 2 Years</b>                                | 3                | 1          | 0         | 1     |
| Older Toddler                                             |                  | 0          | 0         | 0     |
| Preschool                                                 |                  | 1          | 0         | 1     |
| School Age                                                |                  | 1          | 0         | 1     |
| <b>Total Capacity/Enrollment</b>                          | 7                | 2          | 0         | 3     |

| Staff-Child Ratios at the Time of Inspection |                 |                |         |
|----------------------------------------------|-----------------|----------------|---------|
| Group                                        | Age Group/Range | Ratio Observed | Comment |
| 11/21/2025                                   | Mixed Age Group | 1 to 1         |         |

### 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: 01 Ratio & Supervision

Rule: 5180:2-13-19 Supervision

Code: The program is required to supervise children.

Findings: During the inspection, it was determined that children were left unattended and not supervised in that the child came to the door 3 times when HCJFS was knocking on the door and provider did not notice for 10 minutes. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/21/2025

#### Low Risk Non-Compliances

##### Domain: 00 License & Approvals

Rule: 5180:2-13-04 Heaters in a Type B Home

Code: The program is required to protect children in care from open flames.

Findings: During the inspection, it was determined an unprotected open flame was used while care was being provided. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 12/21/2025

**Domain: 01 Ratio & Supervision**

Rule: 5180:2-13-18 Attendance

Code: The program is required to maintain a record of the arrival and departure of each child. The program is also required to retain the original attendance record at the program for a period of one year.

Findings: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number 6 below:

1. No attendance record was being maintained.
2. The attendance record was not being consistently completed.
3. The record did not include the name of at least one child.
4. The record did not include the birth date of at least one child.
5. The record did not include the assigned group.
6. The record did not include the child's weekly schedule.
7. The record did not include the time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.
8. The original attendance record was not kept at the program for a period of one year.

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

Corrective Action Plan Due: 12/21/2025

**Domain: 03 Postings & Equipment**

Rule: 5180:2-13-16 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. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 12/21/2025

**Domain: 05 Health & Safety**

Rule: 5180:2-13-22 Meals and Snacks

Code: The program is required to post the current menu in a noticeable location that is accessible to parents and note any substitutions at the time of the change.

Findings: During the inspection, it was determined that the program's weekly menu did not meet the requirement as noted in number 3 below.

1. The menu was not posted.
2. The posted menu was not in a visible place readily accessible to parents.
3. The menu was not currently dated.
4. The entire menu was substituted.
5. At least one item on menu did not match what was served.
6. The meal or snack served did not match the posted menu.

Submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 12/21/2025

**Domain: 09 Children's Files**

Rule: 5180:2-13-15 Child Medical and Enrollment Records

Code: The program is required to have a completed JFS 01234 "Child Enrollment and Health Information for Child Care" on file on the premises for each child.

Findings: In review of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in numbers 4 & 6 below:

1. No enrollment form was completed for at least one child
2. The current JFS 01234 was not completed for at least one child
3. Complete child information
4. Complete parent information
5. Complete emergency contact information
6. Complete physician information
7. Information regarding the parent list
8. Health information
9. Additional information for all boxes checked "yes"
10. Emergency transportation information
11. Parent/guardian's signature
12. Diapering Statement
13. Acknowledgement of Policies and Procedures
14. Enrollment form for at least one child was not updated by either the parent or the administrator
15. Enrollment form for at least one child was not signed by the administrator
16. Other [ ]

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

Corrective Action Plan Due: 12/21/2025

### Rules In-Compliance/Not Verified

| 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 Fire Safety for Type B Homes                         | Compliant     |                                                |
| <b>Rule</b>                                                       | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-04 Flammable and Combustible Materials in a Type B Home | Compliant     |                                                |
| <b>Rule</b>                                                       | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-07 Staff Records                                        | Compliant     |                                                |
| <b>Rule</b>                                                       | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-07 Provider Responsibilities                            | Compliant     |                                                |
| <b>Rule</b>                                                       | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13 Written Policies and Procedures                         | Compliant     |                                                |
| <b>Rule</b>                                                       | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-07 Type B Provider - Foster Parent                      | Compliant     |                                                |
| <b>Rule</b>                                                       | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-08 Child Care Staff Requirements                        | Compliant     |                                                |
| <b>Rule</b>                                                       | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-08 Employee Requirements                                | Compliant     |                                                |
| <b>Rule</b>                                                       | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-08 Whistle Blower                                       | Compliant     |                                                |
| <b>Rule</b>                                                       | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-09 Background Checks                                    | Compliant     |                                                |
| <b>Rule</b>                                                       | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-10 Health Training                                      | 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 Equipment                       | 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 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 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 |
|-------------------------|-----------|-----------------------------------------|
| 5180:2-13-13 Smoke Free | Compliant |                                         |

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

|                                                 |               |                                                |
|-------------------------------------------------|---------------|------------------------------------------------|
|                                                 |               |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-20 Sleep and Nap Requirements         | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-20 Crib and Playpen Requirements      | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-21 Evening and Overnight Care         | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-22 Fluid Milk                         | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-22 Food Handling                      | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-23 Infant Daily Care                  | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-23 Infant Bottle and Food Preparation | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-23 Diapering                          | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-24 On-site Pools                      | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 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 |                                         |