

# **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 <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. 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	Program Number	Program Type	
BLUE BOOK SCHOOLS INC	00000202956	Child Care Center	
Address	·	County	
2029 WYOMING ST DAYTON OH 45410		MONTGOMERY	

Inspection Information						
Inspection Type				Inspe	ection Scope	Inspection Notice
Complaint				Parti	al	Unannounced
Reviewer(s) MAR	GARET CONRAD	Inspection	n Day	Begii	n Time	End Time
		10/20/20	22	3:40	PM	4:10 PM
Summary of Findings						
No. Rules Verified	No. Rules with Non-cor	mpliances	No. Serious Risl	(	No. Moderate Risk	No. Low Risk
3	3		0		3	0

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Preschool & Toddler	Mixed Age Group	1 to 7	combined outside
Infant	Mixed Age Group	1 to 4	



# **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.

#### Domain:01 Ratio & Supervision

Rule: 5101:2-12-18 Ratio

Code: The program is required to maintain the appropriate staff to child ratio for each group served.

Allegation: It was reported that a staff member is over ratio with 12 kids total. This includes a toddler, 4 school age children and 7 preschoolers.

**Determination**: Substantiated

Findings: During the inspection, a ratio of 1 child care staff member for 12 children was determined to have occurred for the toddler-SA group when the situation in number 7 below occurred:

- 1. A child care staff member stepped out of the room.
- 2. A child care staff member had not arrived at work on time.
- 3. Children were present who were not scheduled to be there.
- 4. A child care staff member was unable to work.
- 5. A child was injured in that group.
- 6. A child arrived in the group before a second staff member was scheduled to arrive with the group.
- 7. Two groups were combined, and the program did not follow the ratio for the youngest child in the group.
- 8. A child was transitioning to the next older age group, and the program did not follow the ratio for the youngest child in the group.
- 9. Ratio was doubled for more than two hours while children were napping.
- 10. Ratio was doubled while children were napping for a group that included at least one infant.
- 11. Ratio was doubled while children were napping and there were not enough staff members in the building to meet staff/child ratio.
- 12. Ratio was doubled in the school age group to allow access to the program, however, the program does not serve only school age children.
- 13. Both child care staff members did not have a working communication device when one staff member left the group to allow access to the school age only program.
- 14. The child care staff member did not return to the group after allowing access to the school age only program.
- 15. Other [ ].

Additional child care staff members must be hired or current child care staff members must be rescheduled to maintain compliance. 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.

Risk Level: Moderate

Corrective Action Plan Due: 11/24/2022

### **Summary of Additional Non-Compliances**

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

#### **Moderate Risk Non-Compliances**

#### Domain:04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Play Fall Zones

Code: The program is required to provide adequate fall surface for the outdoor play space.

Findings: During the inspection, it was determined that the playground did not have adequate fall surface under and around equipment as noted in number 1 below:

- 1. No fall surface
- 2. Adequate fall surface to soften the impact of a fall
- 3. Adequate fall surface to soften the impact of a fall that extended the length of the required fall zone
- 4. Other [ ]

With any equipment designed for climbing, swinging, bouncing, or sliding, resilient material, as specified in Appendix A, needs to be added in order to protect children in the event of a fall. Submit the program's corrective action plan, which includes written verification of the discontinued use of this equipment until corrections are made along with a description of the resilient material added, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/24/2022

# Domain:07 Diapering & Infant Care

Rule: 5101:2-12-20 Cribs

Code: The program is required to place infants in cribs while sleeping.

Findings: During the inspection, it was determined that the equipment in number 8 below had been used for sleeping infants and did not allow the infant to sleep on a firm mattress:

- 1. Mesh cribs;
- 2. Play pens;
- 3. Bassinets;
- 4. Cots;
- 5. Car seats;
- 6. Infant swing;
- 7. The floor;
- 8. Infant seats;
- 9. An infant placed in a car seat in a crib;
- 10. Other [ ].



Infants must be provided with a crib, which meets requirements specified in this rule, for resting and sleeping. Provide staff training. Submit the program's corrective action plan, which includes a statement that staff training was provided, to the Department to verify compliance with the requirements of this rule.	
Corrective Action Plan Due: 11/24/2022	

Low Bisk Non Compliances	
Low Risk Non-Compliances	
No Low Additional Risk Non-Compliances were observed during this inspection	