

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	Program Number	Program Type			
HELPFUL HANDS CHILDRENS CENTER, INC	00000400110	Child Care Center			
Address		County			
6833-6839 FLAGS CENTER DRIVE COLUMBUS OH 43229		FRANKLIN			

Inspection Information						
Inspection Type				Inspection Scope		Inspection Notice
Complaint			Partial		Unannounced	
Reviewer(s) BEVERLY JAMES Inspectio		n Day	Begin Time		End Time	
		06/30/2022		12:30 PM		3:20 PM
Summary of Findings						
No. Rules Verified	No. Rules with Non-cor	mpliances No. Serious Risl		<	No. Moderate Risk	No. Low Risk
6	2	0			0	3

Staff-Child Ratios at the Time of Inspection					
Group	Age Group/Range	Ratio Observed	Comment		
Pre K	3 years to < 4 years	2 to 12	Nap		
School Age	School-Age to < 11 years	2 to 20	nap		
Toddler	18 months to < 30 months	1 to 8	nap		
Preschool	3 years to < 4 years	2 to 13	nap		
Infant	0 to < 12 months	1 to 5			



Complaint Allegations

If the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited. Ohio Administrative Code 5101: 2-12-03 details the process for submitting a request for a review if a program disagrees with a licensing finding. The request for review must be submitted within seven days from the receipt of the licensing report.

(60) 1860 1860 1860 1860 1860 1860 1860 1860	
Domain: 08 Staff Files	
Rule: 5101:2-12-08 Medical Statement	
Code: The program staff medicals are required to be completed and on file at the program.	
Allegation: The program staff medicals are not completed and on file at the program.	
<u>Determination</u> : Substantiated	
Findings: In review of the staff records, it was determined a completed medical examination statement for the employee(s) listed on the Employee Record Chart was not on file, as required by this rule. Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, to verify compliance with the requirements of this rule. (Selamani S, Doris D, and Johanne A)	
Risk Level: Low	
Corrective Action Plan Due: 07/30/2022	
Summary of Additional Non-Compliances	
Serious Risk Non-Compliances	
No Additional Serious Risk Non-Compliances were observed during this inspection	
Moderate Risk Non-Compliances	
No Additional Moderate Risk Non-Compliances were observed during this inspection	



Low Risk Non-Compliances

Domain:01 Ratio & Supervision

Rule: 5101:2-12-20 Cots and Napping

Code: The program is required to not block pathways with materials while the children are resting, napping, and/or

sleeping.

Findings: During the inspection, it was determined that the placement of cots or mats in the SA nap room did not allow for a clear pathway to each cot. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is required at this time.

Corrective Action Plan Due: 07/30/2022

Domain:01 Ratio & Supervision

Rule: 5101:2-12-20 Cots and Napping

Code: The program is required to provide sufficient lighting when the children rest, nap, or sleep.

Findings: During the inspection, it was determined that the area used when children rest, nap or sleep was not lighted sufficiently to allow child care staff visual supervision of the children at all times. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is required at this time. (SA Classroom)

Corrective Action Plan Due: 07/30/2022