

Center 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://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 | |
| COLUMBUS EARLY LEARNING CENTERS - | 000000400598 | | Child Care Center | |
| EASTSIDE | | | | |
| Address | | | County | |
| 240 N. CHAMPION AVE. COLUMBUS | | | FRANKLIN | |
| OH 43203 | | | | |
| | | | | |
| | | | | |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ | |
| | E | | | |
| Fire Inspection Approval Date | Food Service Risk Level | | | |
| 07/20/2021 | Level III | | | |

| Inspection Information | | | | |
|---|--------------------------------|------------------|----------------------------------|--------------|
| Inspection Type | Inspection So Full | cope | Inspection Notice | |
| Annual Inspection Date 09/08/2021 | Begin Time S | :30 AM | Unannounced End Time 12:46 PM | |
| Reviewer: AMY HILLARD | | | | |
| Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 57 | 3 | 0 | 1 | 2 |

| 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) | | 5 | 0 | 5 |
| Young Toddler | | 8 | 0 | 8 |
| Total Under 2 ½ Years | 45 | 13 | 0 | 13 |
| Older Toddler | | 3 | 0 | 3 |
| Preschool | | 17 | 0 | 17 |
| School Age | | 0 | 0 | 0 |
| Total Capacity/Enrollment | 75 | 20 | 0 | 33 |

| Staff-Child Ratios at the Time of Inspection | | | |
|--|------------------|--------|--|
| Group Age Group/Range Ratio Observed Comment | | | |
| Ducks | 0 to < 12 months | 2 to 6 | |



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| Ducks | 0 to < 12 months | 2 to 6 | |
|---------|----------------------|--------|--|
| Frogs | 0 to < 12 months | 2 to 7 | |
| Frogs | 0 to < 12 months | 2 to 7 | |
| Gators | 3 years to < 4 years | 2 to 7 | |
| Gators | 3 years to < 4 years | 2 to 7 | |
| Turtles | 3 years to < 4 years | 1 to 5 | |
| Turtles | 3 years to < 4 years | 1 to 5 | |

Summary of Non-Compliances

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.

Serious Risk Non-Compliances

No Serious Risk Non-Compliances were observed during this inspection

Moderate Risk Non-Compliances

Domain: 09 Children's Files

Rule: 5101:2-12-25 Medication Administration and Food Supplements

<u>Code</u>: The program is required to use the appropriate form and retain current documentation to administer medications. The program is also required to obtain separate documentation for each medication and child, and retain on file each JFS 01217 "Request for Administration of Medication for Child Care" for at least one year. The program is required to administer medication only if it has the prescription label attached or had written instructions from a licensed physician. The program is also required to have each medication to be administered stored in its original container.

<u>Finding</u>: During the inspection, it was determined the program did not meet the requirement(s) for administering a medication, food supplement or medical food to a child as noted in number(s) 19, 12, 13, 14, (no RX label, no box 2 on 1217) below:

1. No JFS 01217 "Request for Administration of Medication for Child Care" was on file.

- 2. The child's name was missing on the JFS 01217.
- 3. The child's date of birth was missing on the JFS 01217.



- 4. The child's weight was missing on the JFS 01217.
- 5. The name of the medication was missing on the JFS 01217.
- 6. The exact dose was missing on the JFS 01217.
- 7. The time to administer was missing on the JFS 01217.
- 8. The time period to administer was missing on the JFS 01217.
- 9. The Parent/Guardian's dated signature was missing on the JFS 01217.
- 10. Possible side effects were missing on the JFS 01217.
- 11. Expiration date was missing on the JFS 01217.
- 12. Physician instructions were missing on the JFS 01217.
- 13. Physician's dated signature was missing on the JFS 01217.
- 14. Physician's phone number was missing on the JFS 01217.
- 15. Date medication was administered was missing on the JFS 01217.
- 16. Time medication was administered was missing on the JFS 01217.
- 17. Dosage administered was missing on the JFS 01217.
- 18. Staff member's signature was missing on the JFS 01217.
- 19. A prescription label was not attached to the prescription medication.
- 20. The medication or product, [], was not brought to the program in its original container.
- 21. Parent instructions conflict with either the manufacturer or physician instructions.

Submit the program's corrective action plan, which includes the completed JFS 01217 for each child needed, verification that the prescription label is now attached, and/or verification that the medication or product is now in its original container, and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/08/2021

Low Risk Non-Compliances

Domain: 07 Diapering & Infant Care

<u>Rule</u>: 5101:2-12-20 Cribs

<u>Code</u>: The program staff is required to remove any items listed in rule that obstruct the staff's view of the infant from cribs.

<u>Finding</u>: During the inspection, it was determined that a child had been placed in a crib with an object which could obstruct a child care staff member's view of the infant, but is not likely to create a potential suffocation risk, as indicated in number(s) 2 (Duck room) below:

- 1. Busy box or other toy attached to the side of the crib.
- 2. A blanket hanging over the side of the crib.
- 3. Stuffed animal that is not large/soft enough that it could conform to the shape of the child's face.



Pacifier which is attached to a ribbon or string, but the ribbon or string is not around the child's neck.
Other [].

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: 10/08/2021

Domain: 08 Staff Files

<u>Rule</u>: 5101:2-12-10 Professional Development Requirements <u>Code</u>: The program staff is required to obtain at least 6 hours of professional development annually.

<u>Finding</u>: In review of the staff records, it was determined that at least one child care staff member did not meet the annual professional development requirement as noted in number(s) 1, 5 below:

- 1. The child care staff member(s) had not completed at least 6 hours of professional development.
- 2. Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.
- 3. Training topic did not meet the requirements listed in appendix A of this rule.
- 4. Documentation of training did not meet the requirements of this rule.
- 5. Other: documentation of 6hrs of professional development training was not on file.

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

Corrective Action Plan Due: 10/08/2021

Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(s), If applicable |
|-----------------------------------|-----------|---|
| Rule: 5101:2-12-22 Meal and Snack | Compliant | Documenting Statement: The menu was |
| Requirements | | posted on the parent board. |



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|--|-----------|---|
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-13 Handwashing | Compliant | Documenting Statement: Staff and |
| Requirements | | children were observed washing hands as |
| • | | required by the rule. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Fire Approval | Compliant | Documenting Statements: Please Note: An |
| Rule. 5101.2-12-04 File Apploval | Compliant | annual fire inspection approval must be |
| | | |
| | | secured for the program. Secure a new |
| | | approval by 7/2021. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Management of | Compliant | |
| Communicable Disease | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-13 Smoke Free | Compliant | Documenting Statement: No smoking was |
| Environment | | allowed on the premises, and the notice |
| | | stating that smoking is prohibited was |
| | | observed posted in a conspicuous place. |
| | | · · · · · · · · · · · · · · · · · · · |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator | Compliant | |
| Qualifications | compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Child Care Staff Member Educational Requirements | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Written Disaster Plan | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Food License | Compliant | Documenting Statement: The food service |
| | | license was observed posted. Following is |
| | | the audit number and date of expiration: |
| | | 9911951; 3/22/22. |
| | | I |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Sanitary Equipment and | Compliant | |
| Environment | | |
| Rule | Status | Documenting Statement(s), If applicable |
| nuic | Status | bocumenting statement(s), it applicable |



| 5101:2-12-19 Child Guidance | Compliant | |
|---|---------------------|---|
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Fluid Milk Requirements | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 First Aid/Standard Precautions | Compliant | Documenting Statement: During the inspection, 1 first aid kit was reviewed and available as required. |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Fall Zones | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 License Capacity | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Safe Food Handling/Storage | Compliant | |
| Rule | Status | Descusses the state of set (a) If she like her |
| 5101:2-12-07 Written Program Policies and Procedures | Compliant | Documenting Statement(s), If applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Indoor Space Requirements | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Emergency Drills | Compliant | Documenting Statement: Documentation |
| | | for completed fire, weather, and |
| | | emergency/lockdown drills was verified during this inspection. |
| | | |
| Rule 5101:2-12-17 Materials and | Status Compliant | Documenting Statement(s), If applicable |
| Equipment | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Equipment | Compliant | |
| Bulo | Status | Decumenting Statement(a) If applicable |
| Rule 5101:2-12-17 Daily Outdoor Play | Status Compliant | Documenting Statement(s), If applicable |
| | | |



| Rule | Status | Documenting Statement(s), If applicable |
|--------------------------------------|-----------|---|
| 5101:2-12-04 Building Approval | Compliant | |
| | compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-02 License Posted | Compliant | |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Space | Compliant | Documenting Statement: The quarterly |
| | Compliant | |
| Requirements | | playground inspection(s) were completed |
| | | and documented, as required. The most |
| | | recent inspection report form was dated |
| | | 7/2/21. |
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| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-19 Supervision | Compliant | Documenting Statement: Child Care Staff |
| | | Members were supervising the children |
| | | and were able to intervene as needed. |
| | | and were usic to intervence as needed. |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-02 Current Information | Compliant | |
| | - | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-23 Infant Bottle and | | |
| | Compliant | Documenting Statement: All bottles were |
| Food Preparation | | labeled as required. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-17 Daily Schedule | Compliant | Documenting Statement: Daily schedules |
| Rule. 5101.2 12 17 Daily Schedule | compliant | |
| | | were observed posted. |
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| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-20 Cots and Napping | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Infant Daily Care | Compliant | |
| | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-15 Child Medical and | | |
| | Compliant | |
| Enrollment Records | | |
| | | |



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|---------------------------------------|-----------|---|
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Equipment | Compliant | |
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| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-15 Medical/Physical Care | Compliant | |
| Plans | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Separation of Children | Compliant | |
| - | Compliant | |
| Under 2 1/2 Years | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Orientation and Staff | Compliant | |
| Records | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-10 Health Training | Compliant | |
| Requirements | | |
| | 1 | I |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Environment | Compliant | |
| S101.2-12-12 Sale Environment | Compliant | |
| | | |
| Rule | Status | Decumenting Statement(s) If applicable |
| | | Documenting Statement(s), If applicable |
| 5101:2-12-14 Transportation and Field | Compliant | |
| Trip Procedures | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Incident/Injury | Compliant | |
| Reporting | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Medical, Dental, and | Compliant | |
| General Emergency Plan | | |
| | I | |
| Rule | Status | Documenting Statement(s), If applicable |
| | | bocumenting statement(s), if applicable |
| 5101:2-12-18 Attendance Records | Compliant | |
| | | |
| Dula | Chatura | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 Group Size | Compliant | |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 Ratio | Compliant | Documenting Statement: Staff/child |
| | | ratios observed during the inspection |
| | | surpassed those required by the rule. |
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| Rule | Status | Documenting Statement(s), If applicable |
|-----------------------------------|-----------|---|
| 5101:2-12-23 Diapering and Toilet | Compliant | |
| Training | | |
| | · | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-09 Background Check | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-03 Inspection | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator | Compliant | |
| Responsibilities/Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Medical Statement | Compliant | |
| | | |
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