

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 Deta	ails	
Program Name	Program Number		Program Type
CDCFC - King Arts Complex	000000400774		Child Care Center
Address 867 Mount Vernon Avenue Columbus OH 43203			County FRANKLIN
Building Approval Date	Use Group/Code E	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date	Food Service Risk Level		
12/08/2021	Level II		

Inspection Information				
Inspection Type	Inspection So	cope	Inspection Notice	
Annual	Full		Unannounced	
Inspection Date Begin Time 9:00 AM 03/17/2022		End Time 12:04 PM		
Reviewer: ANNE BLANKESTY	Reviewer: ANNE BLANKESTYN			
	Summary of Findings			
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
58	3	0	0	3

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		0	0	0
Total Under 2 ½ Years	0	0	0	0
Older Toddler		0	0	0
Preschool		16	0	16
School Age		17	0	17
Total Capacity/Enrollment	66	33	0	33

Staff-Child Ratios at the Time of Inspection			
Group Age Group/Range Ratio Observed Comment			Comment
Room 210	3 years to < 4 years	3 to 5	

Room 210	3 years to < 4 years	1 to 2	hallway
Room 210	3 years to < 4 years	3 to 9	classroom
Room 217	3 years to < 4 years	3 to 6	
Room 217	3 years to < 4 years	1 to 3	boys restroom
Room 217	3 years to < 4 years	1 to 6	girl's restroom

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			
No Moderate Risk Non-Compliances were observed during this inspection			
Low Risk Non-Compliances			

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to include all information.

<u>Finding</u>: In review of the staff records, it was determined that the medical statements for those employees listed on the Employee Record Chart did not include the required information listed below in number(s) 4(a).

- 1. Date of examination;
- 2. Signature, business address, and telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination;
- 3. A statement that verifies that the employee is:
- a. Physically fit for employment in a program caring for children;
- b. Immunized against Tetanus, Diphtheria, Pertussis (Tdap);
- c. Immunized against Measles, Mumps, and Rubella (MMR);
- 4. Tuberculosis (TB) screening/test
- a. Documentation of the screening process to determine if the employee resided in a country identified by the World Health Organization as having a high burden of TB and arrived in the United States within the five years preceding the date of application for employment;
- b. Results of a TB test for employees meeting both criteria in 4a;
- c. Results of additional testing for employees with a positive TB test;
- d. Written statement, signed by a representative of the TB control unit, that the employee's TB is no longer infectious or the individual is receiving a TB treatment regimen for employees with a positive TB test.

Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, or TB results/documentation, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 04/16/2022

Domain: 08 Staff Files

Rule: 5101:2-12-10 Professional Development Requirements

<u>Code</u>: The program is required to ensure child care staff members, including substitutes used more than ninety days annually, obtain at least 6 hours of professional development each state fiscal year.

<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 below:

- 1. The child care staff member(s) had not completed at least six 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. The substitute(s) had been used more than ninety days annually between July first and June thirtieth and had not completed at least six hours of professional development 6. Other [].

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

Corrective Action Plan Due: 04/16/2022

Domain: 08 Staff Files

Rule: 5101:2-12-08 Orientation Training & Whistle Blower Protection

Code: The program is required to have staff complete the online staff orientation training.

<u>Finding</u>: In review of the staff records, it was determined that child care staff member(s) had not completed the online orientation training as noted in number(s) 1 below:

- 1. Within 30 days of starting employment at the program as a child care staff member.
- 2. No documentation of completing the training after December 31, 2016.
- 3. Completion of the training was not verified in the OPR.

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

Corrective Action Plan Due: 04/16/2022

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	

Rule	Status	Documenting Statement(s), If applicable

5101:2-12-02 Current Information	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-03 Inspection	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Building Department Inspection	Compliant	
Inspection		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Fire Inspection	Compliant	0 (" 11
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Food Service	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	
Qualifications	,	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	
Responsibilities/Requirements		
Rule	Status	Documenting Statement(s) If applicable
5101:2-12-07 Written Program	Compliant	Documenting Statement(s), If applicable
Policies and Procedures	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Child Care Staff Member	Compliant	
Educational Requirements		
	1 -	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-09 Background Check	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-10 Health Training	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space	Compliant	
Requirements		
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Rule	Status	Documenting Statement(s), If applicable

Degirians.		
5101:2-12-11 Outdoor Space	Compliant	
Requirements		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Equipment	Compliant	
Dute	Chabus	Desumenting Statement/s) If applicable
Rule 5101:2-12-11 Outdoor Play Fall Zones	Status Compliant	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Flay Fair Zones	Compliant	
	1	I
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Environment	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Sanitary Equipment and	Compliant	
Environment		
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Handwashing	Compliant	
Requirements		
		Simulation and (a) If applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free	Compliant	
Environment		
Dula	Chatus	Decumenting Statement(s) If applicable
Rule 5101:2-12-14 Transportation and Field	Status	Documenting Statement(s), If applicable
5101:2-12-14 Transportation and Field	Status Compliant	Documenting Statement(s), If applicable
		Documenting Statement(s), If applicable
5101:2-12-14 Transportation and Field Trip Procedures	Compliant	
5101:2-12-14 Transportation and Field Trip Procedures Rule	Compliant	Documenting Statement(s), If applicable Documenting Statement(s), If applicable
5101:2-12-14 Transportation and Field Trip Procedures Rule 5101:2-12-14 Transportation - Driver	Compliant	
5101:2-12-14 Transportation and Field Trip Procedures	Compliant	
5101:2-12-14 Transportation and Field Trip Procedures Rule 5101:2-12-14 Transportation - Driver	Compliant	Documenting Statement(s), If applicable
5101:2-12-14 Transportation and Field Trip Procedures Rule 5101:2-12-14 Transportation - Driver Requirements Rule	Status Compliant Status Status	
5101:2-12-14 Transportation and Field Trip Procedures Rule 5101:2-12-14 Transportation - Driver Requirements Rule 5101:2-12-14 Transportation - Vehicle	Status Compliant	Documenting Statement(s), If applicable
5101:2-12-14 Transportation and Field Trip Procedures Rule 5101:2-12-14 Transportation - Driver Requirements Rule	Status Compliant Status Status	Documenting Statement(s), If applicable
5101:2-12-14 Transportation and Field Trip Procedures Rule 5101:2-12-14 Transportation - Driver Requirements Rule 5101:2-12-14 Transportation - Vehicle	Status Compliant Status Status	Documenting Statement(s), If applicable Documenting Statement(s), If applicable
5101:2-12-14 Transportation and Field Trip Procedures Rule 5101:2-12-14 Transportation - Driver Requirements Rule 5101:2-12-14 Transportation - Vehicle Requirements	Status Compliant Status Compliant Status Compliant	Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement(s), If applicable
S101:2-12-14 Transportation and Field Trip Procedures Rule 5101:2-12-14 Transportation - Driver Requirements Rule 5101:2-12-14 Transportation - Vehicle Requirements Rule	Status Compliant Status Compliant Status Compliant	Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement: At the time of
S101:2-12-14 Transportation and Field Trip Procedures Rule 5101:2-12-14 Transportation - Driver Requirements Rule 5101:2-12-14 Transportation - Vehicle Requirements Rule Rule: 5101:2-12-15 Child Medical and	Status Compliant Status Compliant Status Compliant	Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement: At the time of the inspection, 25% of the children's
S101:2-12-14 Transportation and Field Trip Procedures Rule 5101:2-12-14 Transportation - Driver Requirements Rule 5101:2-12-14 Transportation - Vehicle Requirements Rule Rule: 5101:2-12-15 Child Medical and	Status Compliant Status Compliant Status Compliant	Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement: At the time of

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-15 Medical/Physical	Compliant	Documenting Statement: The program
Care Plans	'	had current information on the medical
		status and the required treatment plan
		for the children with health conditions.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Medical, Dental, and	Compliant	
General Emergency Plan		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Emergency Drills	Compliant	bocamenting statement(s), it applicable
	Compilarit	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard	Compliant	
Precautions		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Management of	Compliant	Documenting Statement(s), if applicable
Communicable Disease	Compliant	
Communicable Disease		
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 Written Disaster Plan	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Schedule	Compliant	bocumenting statement(s), it applicable
STOTIL IL II Bany sonedane	Compilation	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Materials and	Compliant	
Equipment		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	Documenting Statement(S), if applicable
January Sulus Sulus Flay	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 License Capacity	Compliant	
Rulo	Ctatus	Decumenting Statement(s) If applicable
Rule 5101:2-12-18 Ratio	Status Compliant	Documenting Statement(s), If applicable
	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Group Size	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-18 Attendance Records	Compliant	
	I a	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	bocumenting statement(3), it applicable
3101.2-12-13 Clina Galdance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cots and Napping	Compliant	2 State of the sta
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Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Meal and Snack	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Fluid Milk Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food	Compliant	
Handling/Storage		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-25 Medication	Compliant	Documenting Statement: The program
Administration		had complete written documentation for
		administering medication or food
		supplements.
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