



## 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<br>Mary's Little Lamb Child Interactive Learning Academy | Program Number<br>000000400943 | Program Type<br>Child Care Center |
| Address<br>1800 Parsons Ave Columbus OH 43207                         |                                | County<br>FRANKLIN                |

| Inspection Information       |                                     |                             |                                  |
|------------------------------|-------------------------------------|-----------------------------|----------------------------------|
| Inspection Type<br>Complaint |                                     | Inspection Scope<br>Partial | Inspection Notice<br>Unannounced |
| Reviewer(s) DIANE GRIGGS     | Inspection Day<br>04/26/2022        | Begin Time<br>2:15 PM       | End Time<br>3:23 PM              |
| Summary of Findings          |                                     |                             |                                  |
| No. Rules Verified<br>4      | No. Rules with Non-compliances<br>2 | No. Serious Risk<br>0       | No. Moderate Risk<br>1           |
|                              |                                     | No. Low Risk<br>1           |                                  |

| Staff-Child Ratios at the Time of Inspection |                          |                |          |
|--|--------------------------|----------------|----------|
| Group  | Age Group/Range          | Ratio Observed | Comment  |
| Infant                                       | 0 to < 12 months         | 3 to 11        |          |
| Toddler 1                                    | 18 months to < 30 months | 1 to 16        | nap time |
| Toddler 2                                    | 30 months to < 36 months | 1 to 8         |          |
| Preschool                                    | 3 years to < 4 years     | 2 to 13        |          |
| School Age                                   | School-Age to < 11 years | 1 to 4         |          |



### 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.

**No Complaints were observed during this inspection.**

### Summary of Additional Non-Compliances

#### Serious Risk Non-Compliances

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

#### Moderate Risk Non-Compliances

##### 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.

Findings: During the inspection, a ratio of 1 child care staff member(s) for 16 children was determined to have occurred for the toddler 1 group when the situation in number(s)15 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: transitioning children were moving over to sleep and other children arrived that had not been there in the morning.

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.

Corrective Action Plan Due: 06/01/2022

### Low Risk Non-Compliances

#### Domain:01 Ratio & Supervision

Rule: 5101:2-12-18 Group Size

Code: The program is required to maintain the appropriate group size for each group of children served.

Findings: During the inspection, group size limitations were not maintained for the group of young toddlers as it was determined there were 16 children grouped together. The group size shall not exceed twice the maximum number of children allowed per Child Care Staff Member. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/01/2022