



## 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<br>ST JOHN CHRISTIAN PRESCHOOL | Program Number<br>000000402304    | Program Type<br>Child Care Center |                   |
| Address<br>6135 RINGS RD DUBLIN<br>OH 43016 |                                   | County<br>FRANKLIN                |                   |
| Building Approval Date                      | Use Group/Code                    | Occupancy Limit                   | Maximum Under 2 ½ |
| Fire Inspection Approval Date<br>09/16/2022 | Food Service Risk Level<br>Exempt |                                   |                   |

| Inspection Information        |                          |                                  |
|-------------------------------|--------------------------|----------------------------------|
| Inspection Type<br>Annual     | Inspection Scope<br>Full | Inspection Notice<br>Unannounced |
| Inspection Date<br>09/29/2022 | Begin Time 9:00 AM       | End Time 2:50 PM                 |
| Reviewer:<br>Darcie Schofield |                          |                                  |

| Summary of Findings      |                                     |                       |                        |                   |
|--------------------------|-------------------------------------|-----------------------|------------------------|-------------------|
| No. Rules Verified<br>58 | No. Rules with Non-compliances<br>8 | No. Serious Risk<br>0 | No. Moderate Risk<br>1 | No. Low Risk<br>8 |

| 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     |
| <b>Total Under 2 ½ Years</b>                              | 0                | 0          | 0         | 0     |
| Older Toddler                                             |                  | 0          | 0         | 0     |
| Preschool                                                 |                  | 0          | 56        | 56    |
| School Age                                                |                  | 0          | 12        | 12    |
| <b>Total Capacity/Enrollment</b>                          | 75               | 0          | 68        | 68    |

| Staff-Child Ratios at the Time of Inspection |                 |                |         |
|----------------------------------------------|-----------------|----------------|---------|
| Group                                        | Age Group/Range | Ratio Observed | Comment |



|                                          |                          |         |  |
|------------------------------------------|--------------------------|---------|--|
| Noah's-103                               | 3 years to < 4 years     | 2 to 13 |  |
| Noah's-103                               | 3 years to < 4 years     | 2 to 13 |  |
| Rainbow/Lambs Room 105                   | 4 years to < 5 years     | 2 to 14 |  |
| Rainbow/Lambs Room 105                   | 4 years to < 5 years     | 2 to 14 |  |
| Faithful Friends/Genesis Room<br>107/108 | 3 years to < 4 years     | 2 to 8  |  |
| Faithful Friends/Genesis Room<br>107/108 | 3 years to < 4 years     | 2 to 8  |  |
| Kindergarten                             | School-Age to < 11 years | 1 to 11 |  |
| Kindergarten                             | School-Age to < 11 years | 1 to 11 |  |

### Summary of Non-Compliances

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.

#### Serious Risk Non-Compliances

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

#### Moderate Risk Non-Compliances

**Domain: 09 Children's Files**

Rule: 5101:2-12-15 Medical/Physical Care Plans

Code: The program is required to have a completed JFS 01236 "Child Medical/Physical Care Plan for Child Care" on file at the program for any child having a health condition. The program is required to implement and/or follow instructions on the JFS 01236 for a child with a health condition.

Finding: A written, signed and dated JFS 01236 "Child Medical/Physical Care Plan for Child Care" must be on file for any child having health conditions which require monitoring for symptoms, or a medical procedure be performed, or ongoing administration of medication or medical foods at the program. In review of the children's records, it was determined that the required written information was either not on file, implemented



or followed, for at least one child indicated on the Children Records Review, as noted in numbers 1, 18 and 19 below:

1. No plan was on file.
2. Child's name was missing.
3. Child's date of birth was missing.
4. Name of the condition was missing.
5. Indication if medication is required was missing.
6. Symptoms to watch for were missing.
7. Directions for when should the medication or medical food be administered were missing.
8. Instructions for administration were missing.
9. Conditions that trigger the need for medication or medical foods were missing.
10. Expected results of the medication or medical food were missing.
11. Actions to be taken if the symptoms do not subside were missing.
12. Activities, foods, environmental conditions to avoid were missing.
13. Training instructions were missing.
14. Directions for action to be taken if expected result of medication or medical food does not occur were missing.
15. Instructions regarding emergency evacuation, if applicable, were missing.
16. Dated signature of parent was missing.
17. Dated signature of certified professional who trained the program staff was missing, if parent was not the trainer.
18. Printed name(s)/Dated signature(s) of child care staff member(s) trained to perform the procedure were missing.
19. Dated signature(s) of administrator was missing.
20. Name of any applicable medication was missing.
21. Date medication was administered was missing.
22. Time medication was administered was missing.
23. Dosage administered was missing.
24. Signature of staff member who administered the medication was missing.
25. Medication listed in the procedures to follow was not onsite available to administer as instructed and alternate instructions for this situation were not included on the plan.
26. The plan was not implemented.
27. The plan was not able to be implemented due to conflicting information.
28. The plan was not followed.

Submit the program's corrective action plan, which includes a copy of the completed JFS 01236, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/29/2022



### Low Risk Non-Compliances

#### Domain: 03 Postings & Equipment

**Rule:** 5101:2-12-16 Medical, Dental, and General Emergency Plan  
**Code:** The program is required to post the fire and weather plans.

**Finding:** During the inspection, it was determined that the following information was not posted for item number 2 below:

1. Fire alert plan, including a diagram indicating evacuation routes.
2. Weather alert plan was missing details for severe thunderstorms, flash flooding, major snowfall, blizzards, ice storms or earthquakes..
3. Weather alert plan was missing a diagram indicating evacuation routes.

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

Corrective Action Plan Due: 10/29/2022

#### 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.

**Finding:** 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 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: 10/29/2022



**Domain: 08 Staff Files**

Rule: 5101:2-12-10 Health Training Requirements

Code: The program is required to have all child care staff members complete training in child abuse and neglect recognition and prevention within sixty days of hire. Staff must complete training in first aid and CPR within the first ninety days of hire.

Finding: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in number 1 below:

1. Child abuse and neglect recognition and prevention training was not completed within sixty days of hire.
2. First aid training was not completed within ninety days of hire.
3. Cardiopulmonary resuscitation (CPR) training was not completed within ninety days of hire.
4. The child abuse and neglect recognition and prevention training was expired.
5. The first aid training was expired.
6. The CPR training was expired.

Refer to the Employee Record Chart for the name(s) of the child care staff member(s) who must complete the required health and safety training(s). Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/29/2022

**Domain: 08 Staff Files**

Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements

Code: The program staff is required to have educational verification on file at the program or in the Ohio Professional Registry.

Finding: In review of the staff records, it was determined that verification of a high school education was not on file nor verified in the Ohio Professional Registry for Child Care Staff Member(s) listed on the Employee Record Chart, as required. Submit the program's corrective action plan, which includes a copy of the verification of a high school education, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/29/2022

**Domain: 08 Staff Files**

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



**Code:** 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.

**Finding:** 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 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: 10/29/2022

**Domain: 09 Children's Files**

**Rule:** 5101:2-12-15 Medical/Physical Care Plans

**Code:** The program is required to maintain a complete JFS 01236 "Child Medical/Physical Care Plan for Child Care" on file for any child having a health condition.

**Finding:** In review of the children's records, it was determined that the JFS 01236 "Child Medical/Physical Care Plan for Child Care" did not meet the requirements of the rule as noted in number 3 below:

1. The JFS 01236 had not been updated as needed and at least annually.
2. A separate JFS 01236 had not been used for each condition.
3. The program used an old version of the JFS 01236.

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

Corrective Action Plan Due: 10/29/2022

**Domain: 09 Children's Files**



**Rule: 5101:2-12-25 Medication Administration**

**Code:** The program is required to use the appropriate form and retain current documentation to administer medications, medical foods and topical products. The program is also required to obtain separate documentation for each medication/product and child.

**Finding:** During the inspection, it was determined the program did not meet the requirements for the JFS 01217 "Request for Administration of Medication for Child Care" as noted in number 6 below:

1. The program used an old version of the JFS 01217.
2. The signature date on the JFS 01217 exceeded more than 12 months.
3. The time period to administer the medication or medical food on the JFS 01217 was exceeded.
4. The JFS 01217 included more than one medication or medical food.
5. The JFS 01217 included more than one child's name.
6. The prescription label was not current.

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

Corrective Action Plan Due: 10/29/2022

**Domain: 09 Children's Files**

**Rule: 5101:2-12-15 Child Medical and Enrollment Records**

**Code:** The program is required to use the updated JFS 01234 "Child Enrollment and Health Information For Child Care".

**Finding:** In review of 25% of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in numbers 4, 6 and 10 below.

1. No enrollment form was completed for at least one child
2. The current JFS 01234 was not completed for at least one child
3. Complete child information
4. Complete parent information
5. Complete emergency contact information
6. Complete physician information
7. Information regarding the parent list
8. Health information
9. Additional information for all boxes checked "yes"
10. Emergency transportation information
11. Parent/guardian's signature
12. Diapering Statement
13. Acknowledgement of Policies and Procedures
14. Enrollment form for at least one child was not updated by either the parent or the administrator



15. Enrollment form for at least one child was not signed by the administrator  
16. Other [ ]

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 not required at this time.

**Rules In-Compliance/Not Verified**

| Rule                                         | Status    | Documenting Statement(s), If applicable                                                                           |
|----------------------------------------------|-----------|-------------------------------------------------------------------------------------------------------------------|
| Rule: 5101:2-12-02 License Posted            | Compliant | Documenting Statement: The license was in a location visible to parents as required.                              |
| 5101:2-12-02 Current Information             | Compliant |                                                                                                                   |
| 5101:2-12-03 Inspection Requirements         | Compliant |                                                                                                                   |
| 5101:2-12-04 Building Department Inspection  | Compliant |                                                                                                                   |
| 5101:2-12-04 Fire Inspection                 | Compliant |                                                                                                                   |
| Rule: 5101:2-12-04 Food Service Requirements | Compliant | Documenting Statement: The program has obtained a food service exemption status from the local health department. |





| Rule                                                     | Status    | Documenting Statement(s), If applicable                                                                                                                           |
|----------------------------------------------------------|-----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 5101:2-12-07 Administrator Qualifications                | Compliant |                                                                                                                                                                   |
| 5101:2-12-07 Administrator Responsibilities/Requirements | Compliant |                                                                                                                                                                   |
| 5101:2-12-07 Written Program Policies and Procedures     | Compliant |                                                                                                                                                                   |
| Rule: 5101:2-12-08 Medical Statement                     | Compliant | Documenting Statement: All employees had current medical statements on file.                                                                                      |
| Rule: 5101:2-12-09 Background Check Requirements         | Compliant | Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed.                        |
| 5101:2-12-11 Indoor Space Requirements                   | Compliant |                                                                                                                                                                   |
| Rule: 5101:2-12-11 Outdoor Space Requirements            | Compliant | Documenting Statement: Outdoor play was observed for the Noah's/Room 103 group.                                                                                   |
| Rule: 5101:2-12-11 Outdoor Space Requirements            | Compliant | Documenting Statement: The quarterly playground inspections were completed and documented, as required. The most recent inspection report form was dated 8/31/22. |
| Rule: 5101:2-12-11 Outdoor Play Equipment                | Compliant | Documenting Statement: Outdoor equipment was viewed to be safe and free of rust, sharp points, and other hazards.                                                 |
| Rule                                                     | Status    | Documenting Statement(s), If applicable                                                                                                                           |



|                                                       |               |                                                                                                                                                                                                  |
|-------------------------------------------------------|---------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 5101:2-12-11 Outdoor Play Fall Zones                  | Compliant     |                                                                                                                                                                                                  |
| <b>Rule</b>                                           | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                                                                                   |
| 5101:2-12-12 Safe Equipment                           | Compliant     |                                                                                                                                                                                                  |
| <b>Rule</b>                                           | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                                                                                   |
| Rule: 5101:2-12-12 Safe Environment                   | Compliant     | Documenting Statement: A safe environment was observed during the inspection. Children were protected from items and conditions which threaten their health, safety and well-being.              |
| <b>Rule</b>                                           | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                                                                                   |
| Rule: 5101:2-12-13 Sanitary Equipment and Environment | Compliant     | Documenting Statement: On the day of the inspection, the program provided a clean environment in accordance with Appendix A of this rule, which included the furniture, materials and equipment. |
| <b>Rule</b>                                           | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                                                                                   |
| Rule: 5101:2-12-13 Handwashing Requirements           | Compliant     | Documenting Statement: Staff and children were observed washing hands as required by the rule.                                                                                                   |
| <b>Rule</b>                                           | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                                                                                   |
| Rule: 5101:2-12-13 Smoke Free Environment             | Compliant     | Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program.                                                                                           |
| <b>Rule</b>                                           | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                                                                                   |
| Rule: 5101:2-12-16 Emergency Drills                   | Compliant     | Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.                                                             |
| <b>Rule</b>                                           | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                                                                                   |
| Rule: 5101:2-12-16 First Aid/Standard Precautions     | Compliant     | Documenting Statement: During the inspection, the program had complete first aid kits available as required.                                                                                     |
| <b>Rule</b>                                           | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                                                                                   |



|                                                 |               |                                                                                                                                                                                                                                                                                             |
|-------------------------------------------------|---------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 5101:2-12-16 Management of Communicable Disease | Compliant     |                                                                                                                                                                                                                                                                                             |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                                                                                                                                                                              |
| 5101:2-12-16 Incident/Injury Reporting          | Compliant     |                                                                                                                                                                                                                                                                                             |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                                                                                                                                                                              |
| 5101:2-12-16 Written Disaster Plan              | Compliant     |                                                                                                                                                                                                                                                                                             |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                                                                                                                                                                              |
| Rule: 5101:2-12-17 Daily Schedule               | Compliant     | Documenting Statement: Daily schedules were observed posted.                                                                                                                                                                                                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                                                                                                                                                                              |
| Rule: 5101:2-12-17 Materials and Equipment      | Compliant     | Documenting Statement: Sufficient equipment was observed in all categories.                                                                                                                                                                                                                 |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                                                                                                                                                                              |
| 5101:2-12-17 Daily Outdoor Play                 | Compliant     |                                                                                                                                                                                                                                                                                             |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                                                                                                                                                                              |
| 5101:2-12-18 License Capacity                   | Compliant     |                                                                                                                                                                                                                                                                                             |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                                                                                                                                                                              |
| Rule: 5101:2-12-18 Ratio                        | Compliant     | Documenting Statement: Staff/child ratios observed during the inspection surpassed those required by the rule.                                                                                                                                                                              |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                                                                                                                                                                              |
| 5101:2-12-18 Group Size                         | Compliant     |                                                                                                                                                                                                                                                                                             |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                                                                                                                                                                              |
| Rule: 5101:2-12-18 Attendance Records           | Compliant     | Documenting Statement: During the inspection, attendance records were reviewed. Child Care Staff Members were viewed recording the attendance for each child upon arrival and departure. All attendance records met the requirements of the rule and were kept with the group at all times. |



| 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 |                                         |