

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 LA PETITE ACADEMY | Program Number | | Program Type Child Care Center | |
| LA PETITE ACADEMY | 000000407259 | | Child Care Center | |
| Address | · | | County | |
| 3710 RIDGE MILL DRIVE HILLIARD OH 43026 | | | FRANKLIN | |
| 011 43020 | | | | |
| | 11. 0. /0.1 | To | 1.1.24 | |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ | |
| Fire Inspection Approval Date | Food Service Risk L | evel | 1 | |
| 02/08/2022 | | | | |

| Inspection Information | | | | |
|---|--------------------------------|-------------------|-------------------|--------------|
| Inspection Type | Inspection So | cope | Inspection Notice | |
| Annual | Full | | Unannounced | |
| Inspection Date Begin Time 8:30 AM 08/02/2022 | | End Time 12:15 PM | | |
| Reviewer: HEATHER STILLION | | | | |
| Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58 | 4 | 0 | 1 | 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) | | 11 | 0 | 11 |
| Young Toddler | | 11 | 0 | 11 |
| Total Under 2 ½ Years | 42 | 22 | 0 | 22 |
| Older Toddler | | 13 | 0 | 13 |
| Preschool | | 32 | 0 | 32 |
| School Age | | 0 | 18 | 18 |
| Total Capacity/Enrollment | 149 | 45 | 18 | 85 |

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

| Infant | 0 to < 12 months | 1 to 2 | |
|-----------------------|--------------------------|---------|--|
| Infant | 0 to < 12 months | 1 to 4 | |
| older infant/todd | 12 months to < 18 months | 1 to 4 | |
| older infant/todd | 12 months to < 18 months | 1 to 6 | |
| 2's | 18 months to < 30 months | 2 to 8 | |
| 2's | 18 months to < 30 months | 2 to 10 | |
| early PS (older todd) | 30 months to < 36 months | 1 to 4 | |
| early PS (older todd) | 30 months to < 36 months | 1 to 5 | |
| PS | 3 years to < 4 years | 2 to 9 | |
| PS | 3 years to < 4 years | 2 to 10 | |
| preK/sa | 4 years to < 5 years | 1 to 8 | |
| PreK | 4 years to < 5 years | 1 to 6 | |
| SA | School-Age to < 11 years | 1 to 10 | |

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 | | | | |
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Moderate Risk Non-Compliances

Domain: 09 Children's Files

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

<u>Code</u>: 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.

<u>Finding</u>: 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 number(s) 11, 12, and 13 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: 09/01/2022



Low Risk Non-Compliances

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Handwashing Requirements

Code: The program is required to have all staff wash their hands as outlined in rule.

<u>Finding</u>: During the inspection, it was determined that at least one staff member with the preschool group did not wash his or her hands at the time listed in number(s) 6 below, as required in rule.

- 1. Upon arrival for the day.
- 2. Prior to departure.
- 3. Upon entry into a classroom.
- 4. After toileting or assisting a child with toileting.
- 5. After each diaper change or pull-up change.
- 6. After contact with bodily fluids or cleaning up spills or objects contaminated with bodily fluids.
- 7. After cleaning or sanitizing or using any chemical products.
- 8. After handling pets, pet cages or other pet objects that have come in contact with the pet.
- 9. Before eating, serving or preparing food or bottles or feeding a child.
- 10. Before and after completing a medical procedure or administering medication.
- 11. When visibly soiled (must use soap and water).
- 12. Other [].

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

Corrective Action Plan Due: 09/01/2022

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Play Equipment

Code: The program is required to provide equipment that does not pose a safety risk.

<u>Finding</u>: During the inspection, it was determined that outdoor play equipment was unsafe as noted in number(s) 1 below:

- 1. There was rust exposed; (on a tricycle on inf/todd playground)
- 2. There was protruding bolts;
- 3. There were cracks;
- 4. There were holes;
- 5. There was splintering wood;
- 6. There were sharp edges or points;
- 7. There were lead hazards;

- 8. There were toxic substances;
- 9. There were tripping hazards;
- 10. There was chipped and/or peeling paint;
- 11. Other [].

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

Corrective Action Plan Due: 09/01/2022

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

<u>Code</u>: The program staff medicals are required to be completed and on file at the program.

<u>Finding</u>: 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.

Corrective Action Plan Due: 09/01/2022

Rules In-Compliance/Not Verified

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

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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-03 Inspection | Compliant | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Building Department | Compliant | |
| Inspection | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Fire Inspection | Compliant | Bocumenting statement(s), it applicable |
| 3101.2-12-04 The inspection | Compilant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Food Service | Compliant | Bocumenting Statement(3), if applicable |
| | Compilant | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-05 Denial, Revocation and | Compliant | |
| Suspension | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator | Compliant | |
| Qualifications | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator | Compliant | (c), (c) |
| Responsibilities/Requirements | | |
| Responsibilities, Requirements | <u> </u> | |
| Rule | Status | Documenting Statement/s) If applicable |
| | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Written Program | Compliant | |
| Policies and Procedures | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Child Care Staff Member | Compliant | |
| Educational Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Orientation Training & | Compliant | |
| Whistle Blower Protection | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-09 Background Check | Compliant | g control (e), ii applicatio |
| Requirements | | |
| Requirements | | |
| Pula | Ctatus | Decumenting Statement (a) If a self-self- |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-10 Health Training | Compliant | |
| II Boauiromonts | • | n l |
| Requirements | | |



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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-10 Professional | Compliant | |
| Development Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| | | Documenting Statement(s), if applicable |
| 5101:2-12-11 Indoor Space | Compliant | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Separation of Children | Compliant | |
| Under 2 1/2 Years | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 7 7 | | Documenting Statement(s), if applicable |
| 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 Fall Zones | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Equipment | Compliant | Bocamenting statement(3), it applicable |
| 3101.2-12-12 Sale Equipment | Compliant | |
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| 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 Smoke Free | | Documenting statement(s), if applicable |
| | Compliant | |
| Environment | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-14 Transportation and Field | Compliant | |
| Trip Procedures | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| | | bocamenting statement(3), if applicable |
| 5101:2-12-14 Transportation - Driver | Compliant | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-14 Transportation - Vehicle | Compliant | |
| Requirements | _ | |
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| Pulo | Status | Documenting Statement/s) If applicable |
| Rule | Status | Documenting Statement(s), If applicable |

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| 5101:2-12-15 Child Medical and | Compliant | |
| Enrollment Records | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Medical, Dental, and | Compliant | |
| General Emergency Plan | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Emergency Drills | Compliant | 3 (" 11 |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 First Aid/Standard | Compliant | 3 (7, 1) |
| Precautions | ' | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Management of | Compliant | z z z z z z z z z z z z z z z z z z z |
| Communicable Disease | Compilation | |
| Communicable Disease | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Incident/Injury | Compliant | Documenting Statement(s), if applicable |
| | Compliant | |
| Reporting | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Written Disaster Plan | Compliant | |
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| Rule | Ctatus | Decumenting Statement(s) If applicable |
| | Status | Documenting Statement(s), If applicable |
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| 5101:2-12-17 Daily Schedule | Compliant | |
| 2101:5-15-17 Daily Schedule | Compliant | |
| , | | Documenting Statement(s) If applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule 5101:2-12-17 Materials and | | Documenting Statement(s), If applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule 5101:2-12-17 Materials and Equipment | Status Compliant | |
| Rule 5101:2-12-17 Materials and Equipment Rule | Status Compliant Status | Documenting Statement(s), If applicable Documenting Statement(s), If applicable |
| Rule 5101:2-12-17 Materials and Equipment | Status Compliant | |
| Rule 5101:2-12-17 Materials and Equipment Rule | Status Compliant Status | |
| Rule 5101:2-12-17 Materials and Equipment Rule 5101:2-12-17 Daily Outdoor Play | Status Compliant Status Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-12-17 Materials and Equipment Rule 5101:2-12-17 Daily Outdoor Play Rule | Status Compliant Status Compliant Status Status | |
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| Rule 5101:2-12-17 Materials and Equipment Rule 5101:2-12-17 Daily Outdoor Play Rule | Status Compliant Status Compliant Status Status | Documenting Statement(s), If applicable |
| Rule 5101:2-12-17 Materials and Equipment Rule 5101:2-12-17 Daily Outdoor Play Rule 5101:2-12-18 License Capacity | Status Compliant Status Compliant Status Compliant Compliant | Documenting Statement(s), If applicable Documenting Statement(s), If applicable |
| Rule 5101:2-12-17 Materials and Equipment Rule 5101:2-12-17 Daily Outdoor Play Rule 5101:2-12-18 License Capacity | Status Compliant Status Compliant Status Compliant Status Compliant | Documenting Statement(s), If applicable |
| Rule 5101:2-12-17 Materials and Equipment Rule 5101:2-12-17 Daily Outdoor Play Rule 5101:2-12-18 License Capacity | Status Compliant Status Compliant Status Compliant Compliant | Documenting Statement(s), If applicable Documenting Statement(s), If applicable |
| Rule 5101:2-12-17 Materials and Equipment Rule 5101:2-12-17 Daily Outdoor Play Rule 5101:2-12-18 License Capacity | Status Compliant Status Compliant Status Compliant Status Compliant | Documenting Statement(s), If applicable Documenting Statement(s), If applicable |
| Rule 5101:2-12-17 Materials and Equipment Rule 5101:2-12-17 Daily Outdoor Play Rule 5101:2-12-18 License Capacity Rule 5101:2-12-18 Ratio | Status Compliant Status Compliant Status Compliant Status Compliant Status Compliant | Documenting Statement(s), If applicable Documenting Statement(s), If applicable Documenting Statement(s), If applicable |
| Rule 5101:2-12-17 Materials and Equipment Rule 5101:2-12-17 Daily Outdoor Play Rule 5101:2-12-18 License Capacity | Status Compliant Status Compliant Status Compliant Status Compliant | Documenting Statement(s), If applicable Documenting Statement(s), If applicable |

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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 Attendance Records | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Supervision | Compliant | 3 (7) |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Child Guidance | Compliant | bocumenting statement(s), it applicable |
| 3101.2-12-19 Cillia Galdance | Compilant | |
| | | |
| Dula | Chahira | Decumenting Statement (a) If applicable |
| 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 |
| 5101:2-12-20 Cribs | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Meal and Snack | Compliant | |
| Requirements | | |
| 244 | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Fluid Milk Requirements | Compliant | bocumenting statement(s), if applicable |
| 3101.2-12-22 Fluid Wilk Requirements | Compilant | |
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| Dula | Chahira | Decumenting Statement (a) If applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Safe Food | Compliant | |
| Handling/Storage | | |
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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 |
| 5101:2-12-23 Infant Bottle and Food | Compliant | |
| Preparation | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| | | bocumenting statement(s), if applicable |
| 5101:2-12-23 Diapering and Toilet | Compliant | |
| Training | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-25 Medication | Compliant | |
| Administration | | |
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