



## 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 The Nest Schools Powell	Program Number 000000410786	Program Type Child Care Center
Address 6055 GLICK RD POWELL OH 43065		County DELAWARE

Inspection Information			
Inspection Type Complaint		Inspection Scope Partial	Inspection Notice Unannounced
Reviewer(s) SARENA POWHIDA	Inspection Day 02/07/2022	Begin Time 9:05 AM	End Time 10:55 AM

Summary of Findings				
No. Rules Verified 5	No. Rules with Non-compliances 2	No. Serious Risk 0	No. Moderate Risk 0	No. Low Risk 2

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Toddler 1 and 2	18 months to < 30 months	2 to 6	
Preschool Prep	30 months to < 36 months	2 to 3	
Infant 2	0 to < 12 months	1 to 1	
Kindergarten	School-Age to < 11 years	1 to 1	
Pre-K	4 years to < 5 years	1 to 11	
Kindergarten Prep	3 years to < 4 years	1 to 9	
Preschool	3 years to < 4 years	1 to 7	



### 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.

#### Domain:10 Written Policies & Procedures

Rule: 5101:2-12-07 Written Program Policies and Procedures

Code: The program administrator is required to maintain and implement the parent handbook.

Allegation: It was alleged that the program did not implement program policies and procedures as required.

Determination: Substantiated

Findings: The allegation is substantiated in that, during the inspection, it was determined the administrator/designee did not implement the policies and procedures detailed in Appendix B of this rule in that, although one of the teacher's recognized the individual picking-up the child, the program's policy for individuals picking-up other than the custodial parent was not implemented. 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 required at this time.

Risk Level: Low

Corrective Action Plan Due: 03/13/2022

### Summary of Additional Non-Compliances

#### Serious Risk Non-Compliances

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

Empty text box for reporting serious risk non-compliances.

#### Moderate Risk Non-Compliances

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

Empty text box for reporting moderate risk non-compliances.



### Low Risk Non-Compliances

#### Domain:07 Diapering & Infant Care

Rule: 5101:2-12-23 Infant Bottle and Food Preparation

Code: The program is required to obtain written instructions from parents regarding feeding their infant.

Findings: During the inspection, it was determined that written instructions for feeding the infants were missing information as noted in number(s) 1 below:

1. Written instructions were not on file.
2. Type of food and/or formula/breast milk was missing.
3. Amount of food and/or formula/breast milk was missing.
4. Feeding times or frequency of feedings was missing.
5. The written instructions on file had not been updated.

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 required at this time.

Corrective Action Plan Due: 03/13/2022