

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	Program Number	Program Type				
Michelle's Academy	2190019523	Child Care Center				
Address		County				
3955 Brown Park Dr Hilliard OH 43026		FRANKLIN				

Inspection Information								
Inspection Type				Inspection Scope		Inspection Notice		
Complaint				Partial		Unannounced		
Reviewer(s) CRYSTAL LUSE		Inspection Day		Begin Time		End Time		
09/23/20		22	10:30 AM		11:45 AM			
Summary of Findings								
No. Rules Verified	No. Rules with Non-compliances		No. Serious Risk		No. Moderate Risk	No. Low Risk		
5	3		0		2	1		

Staff-Child Ratios at the Time of Inspection						
Group	Age Group/Range	Ratio Observed	Comment			
Infant 1	0 to < 12 months	1 to 5				
Infant 2	12 months to < 18 months	2 to 8				
Toddler	18 months to < 30 months	2 to 9				
Preschool	3 years to < 4 years	1 to 5				
PreK	4 years to < 5 years	2 to 12				



Complaint Allegations

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.

Domain:05 Health & Safety

Rule: 5101:2-12-16 Incident/Injury Reporting

Code: The program is required to complete the JFS 01299 "Incident/Injury Report" for injuries and incidents at the program.

Allegation: Complainant alleges that the program did not complete the JFS 01299 "Incident/Injury Report for Child Care" when required for an incident.

Determination: Substantiated

Findings: During the inspection, it was determined that a JFS 01299 "Incident/Injury Report" was not completed by child care staff for the situation(s) listed in number 4 below:

- 1. A child became ill or received an injury which required first aid treatment.
- 2. A child was transported for emergency medical care.
- 3. A child received a bump or blow to the head.

4. An unusual or unexpected incident which jeopardized the safety of a child or employee of a program (a toddler wandered away from their group on the playground and was left outside with the Preschool group, but the teacher did not notice the child was missing from her group).

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

Risk Level: Low

Corrective Action Plan Due: 10/28/2022

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 2 child care staff members for 17 children was determined to have occurred for the Preschool/PreK group when the situation in number 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: A young toddler child wandered into the Preschool/PreK group while on the playground, and the program did not follow the ratio for the youngest child in the group (2:14).

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: 10/28/2022

Domain:08 Staff Files

Rule: 5101:2-12-09 Background Check Requirements

Code: The program is required to have all staff request background checks as required.

Findings: In review of the staff records, it was determined that background checks were not requested for the person(s) listed on the Employee Record Chart as noted in number 1 below:

1. Submitting the request for a background check for child care in the OPR.

2. Submitting fingerprints electronically according to the process established by BCI.

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

Corrective Action Plan Due: 11/03/2022



Low Risk Non-Compliances

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