

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 Deta | ails | | |
|---|---------------------|-------------------------|--------------------|--|
| Program Name | Program Number | | Program Type | |
| Young Scholars Enrichment Center | 2190020669 | | Child Care Center | |
| Address 3800 Sullivant Avenue Columbus OH 43228 | | | County FRANKLIN | |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ | |
| 08/19/2019 | E | 50 | 24 | |
| Fire Inspection Approval Date | Food Service Risk L | Food Service Risk Level | | |
| 08/28/2019 | Level IV | | | |

| Inspection Information | | | | | |
|------------------------|--------------------------------|------------------|-------------------|--------------|--|
| Inspection Type | Inspection | Scope | Inspection Notice | | |
| Annual | Full | | Unannounced | | |
| Inspection Date | Begin Time | 9:00 AM | End Time 12:17 PM | | |
| 04/10/2023 | | | | | |
| Reviewer: | Reviewer: | | | | |
| JO ELLEN MORTON-CONRAD | | | | | |
| Summary of Findings | | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk | |
| 58 | 0 | 0 | 0 | 0 | |

| 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) | | 5 | 0 | 5 |
| Young Toddler | | 4 | 0 | 4 |
| Total Under 2 ½ Years | 24 | 9 | 0 | 9 |
| Older Toddler | | 2 | 0 | 2 |
| Preschool | | 11 | 0 | 11 |
| School Age | | 0 | 0 | 0 |
| Total Capacity/Enrollment | 41 | 13 | 0 | 22 |

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



| Infant | 0 to < 12 months | 1 to 3 | |
|----------|--------------------------|--------|--|
| toddlers | 18 months to < 30 months | 1 to 4 | |
| PS | 3 years to < 4 years | 1 to 7 | |

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 | | | | |
| No Serious Risk Non-Compilances were observed during this hispection | | | | |
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| Moderate Risk Non-Compliances | | | | |
| No Moderate Risk Non-Compliances were observed during this inspection | | | | |
| The moderate make non-compliances were observed during and mopestion | | | | |
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| Low Risk Non-Compliances | | | | |

| No Low Risk Non-Compliances were observed during this inspection |
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Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(s), If applicable |
|----------------------------------|-----------|---|
| 5101:2-12-02 License Posted | | bocumenting Statement(s), it applicable |
| 5101:2-12-02 License Posted | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-02 Current Information | Compliant | bocamenting statement(s), it applicable |
| 5101.2 12 02 carrent information | Compliant | |
| | l | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-03 Inspection | Compliant | |
| Requirements | | |
| · | <u> </u> | <u> </u> |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Building Department | Compliant | |
| Inspection | | |
| | | <u> </u> |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Fire Inspection | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Food Service | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |

| 5101:2-12-05 Denial, Revocation and Suspension | Compliant | |
|--|-------------|---|
| | | · |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator | Compliant | |
| Qualifications | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator | Compliant | |
| Responsibilities/Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Written Program | Compliant | |
| Policies and Procedures | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Medical Statement | Compliant | |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Child Care Staff Member | Compliant | |
| Educational Requirements | | |
| | | |
| 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 | |
| Requirements | | |
| Pula | Chatura | Decree outing Chateres out/o\ If a reliable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-10 Health Training | Compliant | |
| Requirements | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-10 Professional | Compliant | Documenting statement(s), it applicable |
| | Computation | |
| Development Requirements | | |
| Rule | Status | Documenting Statement(s), If applicable |
| | Compliant | Documenting Statement(s), It applicable |
| 5101:2-12-11 Indoor Space Requirements | Compliant | |
| Requirements | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Separation of Children | | Documenting statement(s), it applicable |
| · · · · · · · · · · · · · · · · · | Compliant | |
| Under 2 1/2 Years | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule | Status | Documenting statement(s), if applicable |

| Designation. | 1 | _ |
|--------------------------------------|-----------|---|
| 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 Equipment | Compliant | 3 (7 11 |
| 310112 12 11 outdoor ridy Equipment | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Fall Zones | Compliant | bocamenting statement(s), it applicable |
| J101.2-12-11 Outdoor Flay Fair Zones | Compilant | |
| | | |
| Rule | Ctatus | Desumenting Statement/s) If applicable |
| | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe 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 | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Handwashing | Compliant | Bocamenting statement(s), it applicable |
| <u> </u> | Compilant | |
| Requirements | | |
| | 1. | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Smoke Free | Compliant | |
| Environment | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-15 Child Medical and | Compliant | |
| Enrollment Records | | |
| | <u> </u> | |
| Rule | Status | Documenting Statement(s), If applicable |
| | | bocumenting statement(s), if applicable |
| 5101:2-12-15 Medical/Physical Care | Compliant | |
| Plans | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Medical, Dental, and | Compliant | |
| General Emergency Plan | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Emergency Drills | Compliant | |
| Jioi.z-iz-io lineigency Dinis | Compilant | |
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| Pulo | Ctatus | Documenting Statement/s) If a reliable |
| Rule | Status | Documenting Statement(s), If applicable |

| 5101:2-12-16 First Aid/Standard | Compliant | |
|--------------------------------------|---------------------|---|
| Precautions | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Management of | Compliant | |
| Communicable Disease | · | |
| | _ | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Incident/Injury | Compliant | |
| Reporting | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Written Disaster Plan | Compliant | Documenting Statement(3), it applicable |
| | | |
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| Rule 5101:2-12-17 Daily Schedule | Status | Documenting Statement(s), If applicable |
| 3101:2-12-17 Daily Scriedule | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Materials and | Compliant | |
| Equipment | | |
| Dula | Chahua | Decrease which Chateres and (a) If a malical la |
| Rule 5101:2-12-17 Daily Outdoor Play | Status Compliant | Documenting Statement(s), If applicable |
| 3101.2 12 17 Daily Gatagor Flay | Compilant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 License Capacity | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 Ratio | Compliant | <u> </u> |
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| Rule | Status | Documenting Statement(e) If applicable |
| 5101:2-12-18 Group Size | Status Compliant | Documenting Statement(s), If applicable |
| | Compilation | |
| | | |
| 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 | |
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| Dula | Chahua | Decrease white a Chahaman (1) If a market |
| Rule 5101:2-12-19 Child Guidance | Status Compliant | Documenting Statement(s), If applicable |
| JIOI.2-12-19 Cillia Galadice | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-12-20 Cots and Napping | Compliant | |
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| Rule 5101:2-12-20 Cribs | 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 | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Fluid Milk Requirements | Compliant | |
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| Dula | Chahua | Decumenting (teterrentia) if andicable |
| Rule 5101:2-12-22 Safe Food | Status Compliant | Documenting Statement(s), If applicable |
| Handling/Storage | Compilant | |
| Handing/Storage | <u> </u> | |
| 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 | | |
| Dula | Chabina | Decree on the Chatana and the life and the late |
| Rule F101:2 12 22 Diaporing and Toilet | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Diapering and Toilet Training | Compliant | |
| Hunning | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-25 Medication | Compliant | Documenting statement(s), it applicable |
| Administration | | |
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