

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 Det | ails | |
|--|-------------------------------------|-----------------------|----------------------|
| Program Name | Program Number | | Program Type |
| Walker's Learning Center II | 2210025291 | | Child Care Center |
| Address 8264 Clara ave Cincinnati OH 45239 | | | County HAMILTON |
| Building Approval Date | Use Group/Code E | Occupancy Limit 43 | Maximum Under 2 ½ 23 |
| Fire Inspection Approval Date 12/09/2021 | Food Service Risk Level Level II | | |

| Inspection Information | | | | |
|----------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type | Inspection So | cope | Inspection Notice | |
| Provisional | Full | | Unannounced | |
| Inspection Date 04/27/2022 | Begin Time 9 | :15 AM | End Time 2:54 PM | |
| Reviewer: BRENDA MEYER | | | | |
| 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) | | 0 | 0 | 0 |
| Young Toddler | | 0 | 0 | 0 |
| Total Under 2 ½ Years | 23 | 0 | 0 | 0 |
| Older Toddler | | 0 | 0 | 0 |
| Preschool | | 7 | 0 | 7 |
| School Age | | 0 | 0 | 0 |
| Total Capacity/Enrollment | 43 | 7 | 0 | 7 |

| Staff-Child Ratios at the Time of Inspection | | | |
|--|-----------------|----------------|---------|
| Group | Age Group/Range | Ratio Observed | Comment |
| Preschool | | 1 to 5 | |



| Preschool | 2 to 5 | |
|-----------|--------|--|

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 |
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| No Serious Risk Non-Compliances were observed during this inspection |
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| Moderate Risk Non-Compliances |
| No Moderate Rick New Compliances were observed during this inspection |
| No Moderate Risk Non-Compliances were observed during this inspection |
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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 |
|--|---------------------|---|
| Rule: 5101:2-12-02 License Posted | Compliant | Documenting Statement: The license was in a location visible to parents as required. |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-02 Current Information | Compliant | Bootheriting statement(s), it applicable |
| | | |
| Rule 5101:2-12-03 Inspection Requirements | Status Compliant | Documenting Statement(s), If applicable |
| | - | , |
| Rule 5101:2-12-04 Building Department Inspection | Status Compliant | Documenting Statement(s), If applicable |
| • | | - |
| Rule 5101:2-12-04 Fire Inspection | Status Compliant | Documenting Statement(s), If applicable |
| | | |
| Rule: 5101:2-12-04 Food Service Requirements | Compliant | Documenting Statement(s), If applicable Documenting Statement: The food service license was observed posted. Following is the audit number and date of expiration: Level II exp 3/1/23; using UMC Food Ministry Caterer- Dept of Agriculture ID # 3100974 exp 1/31/23. |

| Rule | Ctatus | Decumenting Statement/s) If applicable |
|--------------------------------------|---------------------|---|
| 5101:2-12-05 Denial, Revocation and | Status Compliant | Documenting Statement(s), If applicable |
| Suspension | Compliant | |
| Suspension | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator | Compliant | bocumenting statement(s), if applicable |
| Qualifications | Compilant | |
| Quantications | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator | Compliant | Bookine ming state mem (s), it approals |
| Responsibilities/Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Written Program | Compliant | 0 (" 11 |
| 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 | | |
| | 1. | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-09 Background Check | Compliant | |
| Requirements | | |
| DI- | Chahara | December 1 Chatana anti-) If a sulti-alia |
| Rule: F101:2-12-10 Health Training | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-10 Health Training | Compliant | Documenting Statement: The program had at least one Child Care Staff Member |
| Requirements | | |
| | | with currently valid training in First Aid, |
| | | Management of Communicable Disease, CPR, and Child Abuse Prevention present |
| | | · |
| | | and readily accessible during all hours of |
| | | operation. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Indoor Space | Compliant | bocumenting statement(3), it applicable |
| Requirements | Comphant | |
| Requirements | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Separation of Children | Compliant | bootinenting statement(s), it applicable |
| Under 2 1/2 Years | 30p | |
| 5.1451 Z 1/2 16415 | <u> </u> | |

| Rule | Status | Documenting Statement(s), If applicable |
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| Rule: 5101:2-12-11 Outdoor Space | Compliant | Documenting Statement: The quarterly |
| Requirements | | playground inspections were completed |
| | | and documented, as required. The most |
| | | recent inspection report form was dated |
| | | 1/4/22. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Equipment | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Fall Zones | Compliant | bocumenting statement(s), it applicable |
| 3101.2-12-11 Outdoor Flay Fair Zones | Compilant | |
| | ı | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Equipment | Compliant | |
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| 0.1 | l c | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Environment | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-13 Sanitary | Compliant | Documenting Statement: During the |
| Equipment and Environment | · | inspection, the equipment was observed |
| | | clean and in good repair. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Handwashing | Compliant | |
| Requirements | | |
| | I - | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-13 Smoke Free | Compliant | Documenting Statement: A notice was |
| Environment | | observed posted stating that smoking is |
| | | prohibited at the program. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-15 Child Medical and | Compliant | Documenting Statement: At the time of |
| Enrollment Records | | the inspection, 25% of the children's |
| 2 omnerie necoras | | records were reviewed, and the records |
| | | were complete, as required by the rule. |
| | | were complete, as required by the rule. |
| | <u>I</u> | |
| Rule | Status | Documenting Statement(s), If applicable |
| Raic | Status | bocamericing statement(s), it applicable |

| Rule: 5101:2-12-15 Medical/Physical Care Plans | Compliant | Documenting Statement: At the time of the inspection, there were no children currently enrolled who had health conditions. |
|---|---------------------|--|
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Medical, Dental, and | Compliant | , , , , , , , , , , , , , , , , , , , |
| General Emergency Plan | · | |
| , | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Emergency Drills | Compliant | Documenting Statement: Documentation |
| | | for completed fire, weather, and |
| | | emergency/lockdown drills was verified |
| | | during this inspection. |
| | | |
| Rule | Status | Decumenting Statement/s) If applicable |
| Rule: 5101:2-12-16 First Aid/Standard | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: During the |
| Precautions | Compliant | inspection, the program had complete |
| Frecautions | | first aid kits available as required. |
| | | mst ald kits available as required. |
| | | |
| 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 | bocamenting statement(s), it applicable |
| STOT.2 12 TO WHEELT DISUSTED FROM | Compilant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Schedule | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Materials and | Compliant | |
| Equipment | r | |
| \ | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-17 Daily Outdoor Play | Compliant | Documenting Statement: Outdoor play |
| | | was observed for the preschool group. |
| | | |
| Dul | Ct-tu- | Daniel Children Children |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 License Capacity | Compliant | |

| Beginning! | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 Ratio | Compliant | |
| 3101.2 12 10 Natio | Compilation | |
| | | |
| Rule | Status | Decumenting Statement/s) If applicable |
| | | Documenting Statement(s), If applicable |
| 5101:2-12-18 Group Size | Compliant | |
| | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 Attendance | Compliant | Documenting Statement: During the |
| Records | | 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. |
| | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Supervision | Compliant | g control of the process of the proc |
| 3101.2 12 13 Supervision | Compilant | |
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| Rule | Ctatus | Decumenting Statement(s) If applicable |
| | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Child Guidance | Compliant | |
| | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-20 Cots and Napping | Compliant | |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-20 Cribs | Compliant | |
| 3101.2 12 20 61103 | Compilant | |
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| Pulo | Status | Decumenting Statement/s) If applicable |
| 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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| Rule | Status | Documenting Statement/s) If applicable |
| | 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 |
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| Rule: 5101:2-12-23 Infant Daily Care | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding infant daily care were discussed however there were no infants enrolled at the program at this time. |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Infant Bottle and Food | | Bocumenting Statement(3), if applicable |
| | Compliant | |
| Preparation | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Diapering and Toilet | Compliant | |
| Training | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-25 Medication | Compliant | |
| Administration | | |
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