



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 SKIDADDLES OF MASON, INC.	Program Number 000000200111	Program Type Child Care Center
Address 5939 DEERFIELD BLVD. MASON OH 45040		County WARREN

Inspection Information			
Inspection Type Complaint		Inspection Scope Partial	Inspection Notice Unannounced
Reviewer(s) NANCY SCHMITT	Inspection Day 11/22/2022	Begin Time 10:30 AM	End Time 1:00 PM
Summary of Findings			
No. Rules Verified 5	No. Rules with Non-compliances 4	No. Serious Risk 2	No. Moderate Risk 1
		No. Low Risk 1	

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Younger Toddler	18 months to < 30 months	1 to 6	
Older Toddler	30 months to < 36 months	2 to 6	
Preschool/PreK	3 years to < 4 years	2 to 11	
School Age	School-Age to < 11 years	2 to 7	



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:01 Ratio & Supervision

Rule: 5101:2-12-19 Supervision

Code: The program staff is required to supervise children in their assigned group by sight and hearing. Supervision includes being near enough to respond and reach children immediately and protecting them from harm.

Allegation: There was a lack of supervision of children resulting in a child being injured.

Determination: Substantiated

Findings: During the inspection, it was determined that children were not adequately supervised while inside the program as noted in number 8 below:

1. Child(ren) were left unattended once.
2. Child(ren) were left unattended more than once.
3. Child(ren) left the group and were unattended.
4. Child care staff were using a baby monitor to supervise children.
5. Child care staff were using a walkie talkie to supervise children.
6. Child care staff were using mirrors to view children in another room.
7. Child care staff were using a video camera instead of physically being present in the room.
8. Other: Children were not within sight and hearing of a child care staff member during indoor play more than once.

Children must be supervised and within sight and hearing of a child care staff member at all times. 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.

Risk Level: Moderate

Corrective Action Plan Due: 01/06/2023

Domain:01 Ratio & Supervision

Rule: 5101:2-12-19 Child Guidance

Code: The program staff shall use developmentally appropriate techniques when managing children's behavior and shall not abuse, endanger or neglect children.

Allegation: There was inappropriate behavior by children in the PreK group resulting in an injury to a child.

Determination: Substantiated

Findings: During the inspection, it was determined that a child had been neglected while in care at the program which resulted in an injury to the child. Child Care Staff Members, administrators, and owners must always ensure that children are safe at all times. Provide training to staff. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Risk Level: Serious

Corrective Action Plan Due: 12/12/2022



Summary of Additional Non-Compliances

Serious Risk Non-Compliances

Domain:01 Ratio & Supervision

Rule: 5101:2-12-19 Supervision

Code: The program is required to notify their local public children services agency of any suspicion of abuse or neglect against a child.

Findings: During the inspection, it was determined that the program failed to immediately notify their local public children services agency of suspicions that a child had been abused or neglected. Provide staff training. Submit the program's corrective action plan, which includes a description of action taken to assure that all staff are knowledgeable of their responsibilities, and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/12/2022

Moderate Risk Non-Compliances

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

Low Risk Non-Compliances

Domain:05 Health & Safety

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

Code: The program is required to submit notification of a serious incident in OCLQS by the next business day.

Findings: During the inspection, it was determined that a Serious Incident was not reported in the Ohio Child Licensing and Quality System (OCLQS), as required, by the program administrator or designee for an incident as listed in number 1 below:

1. An incident, injury or illness that required professional medical consultation or treatment.



2. An unusual or unexpected incident which jeopardizes the safety of a child, child care staff member or employee of the program.
3. An incident defined as a serious risk non-compliance in appendix A to rule 5101:2-12-03 of the Administrative Code.
4. The program did not submit the report in OCLQS by the next business day as required by rule.

Submit the program's corrective action plan, which includes a statement that the program administrator or designee has completed the Serious Incident Report in OCLQS, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/06/2023