

## 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 CHILDTIME LEARNING CENTER	Program Number 000000205892	Program Type Child Care Center
Address 312 WALNUT STREET SUITE 100 CINCINNATI OH 45202		County HAMILTON

Inspection Information			
Inspection Type Complaint		Inspection Scope Partial	Inspection Notice Unannounced
Reviewer(s) Carlie Bennett	Inspection Day 01/03/2025	Begin Time 10:55 AM	End Time 1:00 PM
Reviewer(s) TRENTAE TAYLOR	Inspection Day 01/03/2025	Begin Time 10:55 AM	End Time 1:00 PM

Summary of Findings				
No. Rules Verified 13	No. Rules with Non-compliances 6	No. Serious Risk 1	No. Moderate Risk 1	No. Low Risk 5

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Infant 2		1 to 2	
Toddler/PS/PK		2 to 11	
Infant 3		1 to 5	

### 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:00 License & Approvals

Rule: 5180:2-12-03 Inspection Requirements

Code: The program is required to allow ODJFS access to all records and documentation.

Allegation: Program does not have a disaster plan

Determination: Substantiated

Findings: During the inspection, it was stated that program had a disaster plan on site, but the plan was not provided to Department staff upon request. The rule requires programs to allow Department staff to review required records and documentation as part of the inspection process. 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: 02/16/2025

#### Domain:05 Health & Safety

Rule: 5180:2-12-16 Emergency Drills

Code: The program is required to complete fire drills, weather drills, and emergency/lockdown drills appropriately.

Allegation: Teachers are not aware of emergency protocol

Determination: Substantiated

Findings: During the inspection, it was determined that the required drills were not completed for item number(s) 1, 2 & 3 below:

1. Monthly fire drills.
2. Monthly weather emergency drills (March through September).
3. Emergency/lockdown drills in each quarter of the calendar year.

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: 02/16/2025

### Summary of Additional Non-Compliances

#### Serious Risk Non-Compliances

**Domain:00 License & Approvals**

Rule: 5180:2-12-03 Inspection Requirements

Code: The program administrator and owner are required to provide true and accurate information.

Findings: During the inspection, it was determined that the program provided false information about meeting Step up to Quality requirements. Administrator and Designee stated that a staff member who is no longer employed is meeting education requirements for a classroom. It was also stated that another staff member is meeting minimum instruction time for another room, which was found to be false information. The rule requires the program to provide accurate and truthful information to the Department. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/22/2025

**Moderate Risk Non-Compliances**

**Domain:07 Diapering & Infant Care**

Rule: 5180:2-12-20 Cribs

Code: The program is required to place infants in cribs while sleeping.

Findings: During the inspection, it was determined that the equipment in number(s) 8 below had been used for sleeping infants and did not allow the infant to sleep on a firm mattress:

1. Mesh cribs;
2. Play pens;
3. Bassinets;
4. Cots;
5. Car seats;
6. Infant swing;
7. The floor;
8. Infant seat
9. An infant placed in a car seat in a crib;
10. Other

Infants must be provided with a crib, which meets requirements specified in this rule, for resting and sleeping. Provide staff training. Submit the program's corrective action plan, which includes a statement that staff training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/16/2025

**Low Risk Non-Compliances**

**Domain:00 License & Approvals**

Rule: 5180:2-12-03 Inspection Requirements

Code: The program staff is required to provide true and accurate information.

Findings: During the inspection, it was determined that the program Designee provided false information, in that Designee stated that the program is completing required drills (Fire, Weather/Tornado, & Lockdown) as required by rule. During the investigation it was determined that drills have not been completed in months/years and that the only fire drill that has been completed recently was a building wide fire evacuation set up by the facility owner, not the program. The rule requires the program to provide accurate and truthful information to the Department. 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: 02/16/2025

**Domain:02 Safe & Sanitary Environment**

Rule: 5180:2-12-12 Safe Equipment

Code: The program is required to use equipment, that is safe and hazard free, according to the manufacturer's guidelines. Fans, air conditioners, heat pumps, and space heaters must be inaccessible to children. The program is required to refrain from using trampolines, ball pits and inflatable equipment intended for climbing and bouncing, including but not limited to slides and bounce houses.

Findings: During the inspection, equipment was determined to be unsafe, hazardous to children, or in need of repair as noted in number(s) 10 below:

1. Manufacturer's guidelines for the [ ] were not followed in that [ ].
2. The straps were missing on the [ ].
3. The straps were attached, but were not used on the [ ].
4. The straps were attached and were used, but were not used in a safe manner.
5. The equipment had sharp points or corners.
6. The equipment had splinters.
7. The equipment had protruding nails.
8. The equipment had loose or rusty parts.
9. The equipment had paint which contains lead or other poisonous materials.
10. The equipment had hazardous features in that the door of the white cabinet is falling off on the hinge side, causing a pinching hazard.
11. A fan was unstable and could easily tip over.
12. A fan had openings a finger could enter.
13. The pipes from the heat pump felt hot to the touch
14. A space heater felt hot to the touch
15. The position of a space heater was a tripping hazard
16. The air conditioning unit was not enclosed and was accessible to children on the playground.
17. A ball pit, trampoline, inflatable bounce house, inflatable slide, or inflatable equipment used for climbing and bouncing was used.
18. Other

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

Corrective Action Plan Due: 02/16/2025



**Domain:08 Staff Files**

Rule: 5180:2-12-07 Administrator Responsibilities/Requirements

Code: The program administrator is required to maintain current employee records in the Ohio Professional Registry.

Findings: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 3, 6 & 7 below:

1. At least one administrator, employee or child care staff member (including substitutes) had not created a profile.
2. At least one administrator, employee or child care staff member had not created an employment record for the program on or before their first day of employment.
3. At least one administrator, employee or child care staff member had not updated changes to positions or roles within five calendar days of the change.
4. The administrator had not assigned at least one employee or child care staff member to the program's organization dashboard.
5. At least one individual's schedule was not current.
6. At least one individual's position or role did not include an applicable group assignment.
7. At least one individual's employment had not been end dated.
8. Other:

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

Corrective Action Plan Due: 02/16/2025