

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 Details			
Program Name COLUMBUS EARLY LEARNING CENTERS - MYRTLE	Program Number 000000401216	Program Type Child Care Center	
Address 1400 MYRTLE COLUMBUS OH 43211		County FRANKLIN	
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date 09/03/2025	Food Service Risk Level Level II		

Inspection Information				
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced		
Inspection Date 09/24/2025	Begin Time 9:45 AM	End Time 2:00 PM		
Reviewer: BEVERLY JAMES				
Summary of Findings				
No. Rules Verified 58	No. Rules with Non-compliances 4	No. Serious Risk 0	No. Moderate Risk 0	No. Low Risk 4

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	0	0	0	0
Older Toddler		0	0	0
Preschool		9	0	9
School Age		0	0	0
Total Capacity/Enrollment	40	9	0	9

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

Full Day PReschool	3 years to < 4 years	1 to 8	Lunch
Full Day PReschool	3 years to < 4 years	1 to 8	Arrival
Full Day PReschool	3 years to < 4 years	1 to 8	Nap

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 5180:2-12-03 and 5180:2-13-03 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

Moderate Risk Non-Compliances

No Moderate Risk Non-Compliances were observed during this inspection

Low Risk Non-Compliances

Domain: 01 Ratio & Supervision

Rule: 5180:2-12-18 Attendance Records

Code: The program is required to have a method for tracking the children in each group. The tracking method must be updated throughout the day and kept with the group at all times.

Finding: During the inspection, it was determined that the method for tracking children in each group did not meet the requirements of the rule as noted in number(s) 5 below:

1. There was no method in place;
2. The method did not include each child's name;
3. The method did not include each child's date of birth;
4. The tracking method did not remain with the group at all times;
5. The tracking method was not updated throughout the day as children entered or left the group.

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

Corrective Action Plan Due: 10/26/2025

Domain: 05 Health & Safety

Rule: 5180:2-12-22 Fluid Milk Requirements

Code: The program is required to serve age-appropriate fluid milk or obtain written documentation when serving substitutions for fluid milk.

Finding: During the inspection, it was determined that required documentation for substitutions for fluid milk was not on file as noted in number(s) 3 below:

1. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when infants up to 12 months of age are served anything other than formula or breast milk.
2. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when infants and toddlers 12 months of age up to 24 months of age are served anything other than unflavored whole homogenized vitamin D fortified cow's milk, breast milk, or non-cow milk substitution that is nutritionally equivalent to milk.
3. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when toddlers and children 24 months of age and older are served anything other than unflavored one per cent milk that is vitamin A and D fortified, unflavored fat free or skim milk that is vitamin A and D fortified, or non-cow milk substitutions that are nutritionally equivalent to milk. (Chocolate Milk)
4. Written parental consent for non-cow milk substitutions that are nutritionally equivalent to milk for children 12 months of age and older.
5. The program did not have the type of milk on-site to ensure that all children were served age-appropriate fluid milk.

Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.

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.

Finding: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 2 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: 10/26/2025

Domain: 08 Staff Files

Rule: 5180:2-12-08 Medical Statement

Code: The program staff's medical statements are required to be completed and on file at the program.

Finding: In review of the staff records, it was determined that the medical statements for the employees listed on the Employee Record Chart did not meet the requirements as listed in number(s) 5a,5c,6a below.

1. A medical statement was not on file for at least one employee;
2. The medical statement(s) on file did not have a date of examination within 12 months of the employee's first day of employment;
3. Date of examination was missing;
4. Signature, business address, or telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination was missing;
5. A statement was missing that verifies the employee is:
 - a. Physically fit for employment in a program caring for children;
 - b. Immunized against Tetanus, Diphtheria, Pertussis (Tdap);
 - c. Immunized against Measles, Mumps, and Rubella (MMR);
6. Tuberculosis (TB) screening/test information was missing:
 - a. Documentation of the screening process to determine if the employee resided in a country identified by the world health organization as having a high burden of TB and arrived in the United States within the five years preceding the date of application for employment.
 - b. Results of a TB test for employees meeting both criteria in 6a.
 - c. Results of additional testing for employees with a positive TB test.
 - d. Written statement, signed by a representative of the TB control unit, that the employee's TB is no longer infectious or the individual is receiving a TB treatment regimen for employees with a positive TB test.

Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, or TB results/documentation, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/26/2025

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-16 Written Disaster Plan	Compliant	Documenting Statement: The program's written disaster plan was reviewed during the inspection and met the requirements on 6/7/24.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-02 License Posted	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-04 Building Department Inspection	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-02 Current Information	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-03 Inspection Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-04 Fire Inspection	Compliant	Documenting Statement: Please Note: Documentation of a fire inspection without any uncorrected violations must be secured for the program. Secure a new fire inspection by 9/3/26.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-04 Food Service Requirements	Compliant	Documenting Statement: The off-site food processing establishment's current Ohio Department of Agriculture registration information was observed during the inspection.
Rule: 5180:2-12-04 Food Service Requirements	Compliant	Documenting Statement: Written permission to operate under the food service license of another entity at the same location was observed.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-07 Administrator Qualifications	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-08 Child Care Staff Member Educational Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-08 Orientation Training & Whistle Blower Protection	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-09 Background Check Requirements	Compliant	Documenting Statement: During the inspection, the required documentation

		regarding background checks was on file for all employees listed.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-10 Health Training Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-10 Professional Development Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Indoor Space Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Outdoor Space Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-12 Safe Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Outdoor Play Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-11 Outdoor Play Fall Zones	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding outdoor play fall zones were discussed. Program was reminded that cannot use the program located at the front of the building as the play equipment does not meet licensing requirements.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-12 Safe Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-13 Sanitary Equipment and Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable

5180:2-12-13 Handwashing Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-13 Smoke Free Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-14 Transportation and Field Trip Procedures	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-15 Child Medical and Enrollment Records	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-15 Medical/Physical Care Plans	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Emergency Drills	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 First Aid/Standard Precautions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Management of Communicable Disease	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Incident/Injury Reporting	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-17 Materials and Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-17 Daily Schedule	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 Group Size	Compliant	

Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-17 Daily Outdoor Play	Compliant	Documenting Statement: Outdoor play was observed for the preschool group(s).
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 License Capacity	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 Ratio	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-20 Cots and Napping	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-19 Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-19 Child Guidance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Meal and Snack Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Safe Food Handling/Storage	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-25 Medication Administration	Compliant	