

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 |
| CARE AFTER SCHOOL - SLATE HILL | 000000403763 | | Child Care Center |
| Address 7625 ALTA VIEW BLVD WORTHINGTON OH 43085 | | | County FRANKLIN |
| Building Approval Date | Use Group/Code School Building | Occupancy Limit | Maximum Under 2 ½ |
| Fire Inspection Approval Date | Food Service Risk Level Level III | | |

| Inspection Information | | | | |
|----------------------------|--------------------------------|---|-------------------|--------------|
| Inspection Type | Inspection So | cope | Inspection Notice | |
| Annual | Full | | Unannounced | |
| Inspection Date 11/15/2021 | Begin Time 3:55 PM | | End Time 5:42 PM | |
| Reviewer: MARGARET COMPTON | | | | |
| Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances | Io. Rules with Non-compliances No. Serious Risk No. | | 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 | 0 | 0 | 0 | 0 |
| Older Toddler | | 0 | 0 | 0 |
| Preschool | | 0 | 0 | 0 |
| School Age | | 0 | 47 | 47 |
| Total Capacity/Enrollment | 53 | 0 | 47 | 47 |

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



| School Age | School-Age to < 11 years | 2 to 18 | Group 1 - in cafeteria |
|------------|--------------------------|---------|------------------------|
| School Age | School-Age to < 11 years | 1 to 7 | Group 2 - in gym |
| School Age | School-Age to < 11 years | 2 to 4 | |

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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| Serious Kisk Non-compliances | | |
| No Serious Risk Non-Compliances were observed during this inspection | | |
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| Moderate Risk Non-Compliances | | |
| No Moderate Risk Non-Compliances were observed during this inspection | | |
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| Low Risk Non-Compliances | | |
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| 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 | Compliant | |
| Dula | Chahua | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-02 Current Information | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-03 Inspection | Compliant | Bocamenting statement(s), it applicable |
| Requirements | Compliant | |
| Requirements | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Building | Compliant | Documenting Statement: This program |
| Department Inspection | | serves only school age children in a public |
| | | or chartered non-public school building. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Fire Inspection | Compliant | Documenting Statement: This program |
| | | serves only school age children in a public |
| | | or chartered non-public school building. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Food Service | Compliant | Documenting Statement: The food service |
| Requirements | | license was observed posted. Following is |

| | | the audit number and date of expiration: #9912263 exp. March 1, 2022. |
|---|---------------------------------------|---|
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator | Compliant | bocumenting statement(s), if applicable |
| Qualifications | Compilant | |
| | _ | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-07 Administrator | Compliant | |
| Responsibilities/Requirements | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-07 Written Program | Compliant | Documenting Statement: During the |
| Policies and Procedures | | inspection, the requirements of the rule |
| | | regarding the program's written policies |
| | | and procedures were discussed which |
| | | included Appendix B and C to Rule |
| | | 5101:2-12-07. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Medical Statement | Compliant | |
| | , , , , , , , , , , , , , , , , , , , | |
| D. J. | Chahara | December Chatemant (s) If and leading |
| Rule: 5101:2-12-08 Child Care Staff | Status | Documenting Statement(s), If applicable Documenting Statement: All Child Care |
| Member Educational Requirements | Compliant | Staff Members had verification of |
| Member Educational Requirements | | educational requirements on file at the |
| | | program. |
| | | p. 98. a.m. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Orientation Training & Whistle Blower Protection | Compliant | |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-09 Background Check | Status Compliant | Documenting Statement: During the |
| | | Documenting Statement: During the inspection, the required documentation |
| Rule: 5101:2-12-09 Background Check | | Documenting Statement: During the inspection, the required documentation regarding background checks was on file |
| Rule: 5101:2-12-09 Background Check | | Documenting Statement: During the inspection, the required documentation |
| Rule: 5101:2-12-09 Background Check | | Documenting Statement: During the inspection, the required documentation regarding background checks was on file |
| Rule: 5101:2-12-09 Background Check | | Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed. |
| Rule: 5101:2-12-09 Background Check Requirements | Compliant | Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed. Documenting Statement(s), If applicable |
| Rule: 5101:2-12-09 Background Check Requirements | Compliant | Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed. |
| Rule: 5101:2-12-09 Background Check Requirements Rule Rule Rule: 5101:2-12-10 Health Training | Compliant | Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed. Documenting Statement(s), If applicable Documenting Statement: The program |
| Rule: 5101:2-12-09 Background Check Requirements Rule Rule Rule: 5101:2-12-10 Health Training | Compliant | Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed. Documenting Statement(s), If applicable Documenting Statement: The program had at least one Child Care Staff Member |

| | | and readily accessible during all hours of operation. |
|--|--------------------|---|
| Bulo | Chatus | Decumenting Statement(s) If applicable |
| Rule: 5101:2-12-10 Professional Development Requirements | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: At the time of the inspection, all child care staff members had completed the required amount of professional development training. |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Indoor Space Requirements | Compliant | Documenting Statement(s), if applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Space Requirements | Compliant | Documenting Statement: The quarterly playground inspections were completed and documented, as required. The most recent inspection report form was dated August 13, 2021. |
| | I 6 | |
| S101:2-12-11 Outdoor Play Equipment | Status Compliant | Documenting Statement(s), If applicable |
| Bulls | Chahara | Decree of the Chateron and (a) If a multi-alia |
| Rule 5101:2-12-11 Outdoor Play Fall Zones | Status Compliant | Documenting Statement(s), If applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Equipment | Compliant | Documenting statement(s), if applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-12 Safe Environment | Compliant | Documenting Statement: A safe environment was observed during the inspection. Children were protected from items and conditions which threaten their health, safety and well-being. |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Sanitary Equipment and Environment | Compliant | Documenting Statement(s), if applicable |
| Rule | Status | Documenting Statement(s), If applicable |

| Dulay F101/2 12 12 Handwashing | Compositions | Decumenting Statements Staff and |
|--|--------------------------------|---|
| Rule: 5101:2-12-13 Handwashing | Compliant | Documenting Statement: Staff and |
| Requirements | | children were observed washing hands as |
| | | required by the rule. |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Smoke Free | Compliant | 0 to 1 to |
| Environment | Compilant | |
| Litvironinient | | |
| - 1 | T | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-14 Transportation and | Compliant | Documenting Statement: The form(s) |
| Field Trip Procedures | | used by the program for routine trips in |
| | | the school building were verified to meet |
| | | the requirements of the rule. |
| | | the requirements of the rule. |
| L | <u>, I</u> | |
| Rule | Status | Documenting Statement(s) If applicable |
| 110110 | | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-15 Child Medical and | Compliant | Documenting Statement: At the time of |
| Enrollment Records | | the inspection, medical statements for |
| | | the children were not needed as all |
| | | children enrolled attended a grade of |
| | | kindergarten or above in an elementary |
| | | school. |
| | | SCHOOL. |
| | | |
| Dolla | Chatura | December 5 Statement of the multiple |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-15 Medical/Physical | Compliant | Documenting Statement: The program |
| Care Plans | | had current information on the medical |
| | | status and the required treatment plan |
| | | for the children with health conditions. |
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| Rulo | Status | Documenting Statement(s) If applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Medical, Dental, | Status Compliant | Documenting Statement: During the |
| | | Documenting Statement: During the inspection, the requirements of the rule |
| Rule: 5101:2-12-16 Medical, Dental, | | Documenting Statement: During the |
| Rule: 5101:2-12-16 Medical, Dental, | | Documenting Statement: During the inspection, the requirements of the rule |
| Rule: 5101:2-12-16 Medical, Dental, | | Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general |
| Rule: 5101:2-12-16 Medical, Dental, | | Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general emergencies and written weather alert |
| Rule: 5101:2-12-16 Medical, Dental, | | Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general emergencies and written weather alert |
| Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general emergencies and written weather alert plan were discussed. |
| Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan Rule | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general emergencies and written weather alert plan were discussed. Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general emergencies and written weather alert plan were discussed. Documenting Statement(s), If applicable Documenting Statement: Documentation |
| Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan Rule | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general emergencies and written weather alert plan were discussed. Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and |
| Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan Rule | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general emergencies and written weather alert plan were discussed. Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified |
| Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan Rule | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general emergencies and written weather alert plan were discussed. Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and |
| Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan Rule | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general emergencies and written weather alert plan were discussed. Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified |
| Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan Rule | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general emergencies and written weather alert plan were discussed. Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified |
| Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan Rule | Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general emergencies and written weather alert plan were discussed. Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection. |
| Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan Rule Rule: 5101:2-12-16 Emergency Drills Rule | Status Compliant Status Status | Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general emergencies and written weather alert plan were discussed. Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified |
| Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan Rule Rule: 5101:2-12-16 Emergency Drills | Status Compliant | Documenting Statement: During the inspection, the requirements of the rule regarding medical, dental and general emergencies and written weather alert plan were discussed. Documenting Statement(s), If applicable Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection. |

| Rule | Status | Documenting Statement(s), If applicable |
|-------------------------------------|-----------|---|
| 5101:2-12-16 Management of | Compliant | |
| Communicable Disease | | |
| | <u> </u> | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Incident/Injury | Compliant | |
| Reporting | | |
| | <u> </u> | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Written Disaster | Compliant | Documenting Statement: During the |
| Plan | | inspection, the requirements of the rule |
| | | regarding the written disaster plan were |
| | | discussed. |
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| 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 | Bocumenting Statement(3), if applicable |
| Equipment | Compliant | |
| Equipment | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 License Capacity | Compliant | Bocamenting statement(s), it applicable |
| 3101.2 12 10 Elective capacity | Compilant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 Ratio | Compliant | Documenting Statement: The Appendix A |
| | | "Staff/Child Ratios, Age Grouping and |
| | | Maximum Group Size" was posted in a |
| | | noticeable area at the program as |
| | | required. |
| | | |
| Rule: 5101:2-12-18 Ratio | Compliant | Documenting Statement: Staff/child |
| | | ratios observed during the inspection |
| | | were in compliance. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 Group Size | Compliant | |
| | | |
| Rule | Ctatus | Decumenting Statement(s) If applicable |
| Rule: 5101:2-12-18 Attendance | Status | Documenting Statement(s), If applicable Documenting Statement: During the |
| | Compliant | - |
| 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 |
| Rule: 5101:2-12-19 Supervision | Compliant | Documenting Statement: School children |
| | | were observed running errands, using the |
| | | restroom, or engaging in short term |
| | | activities under proper supervision. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Child Guidance | Compliant | |
| | | |
| 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 Safe Food | Compliant | |
| Handling/Storage | | |
| Rule | Status | Decumenting Statement(e) If applicable |
| Rule: 5101:2-12-25 Medication | | Documenting Statement(s), If applicable Documenting Statement: There were no |
| Administration | Compliant | children on medication at the time of the |
| Auministration | | inspection; however, the method of |
| | | storage and practices for the |
| | | administration were reviewed. |
| | | autililisti ation were reviewed. |
| | 1 | |