

## **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 <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. 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       |
| KIDS CARE ACADEMY                                   | 000000406601                         |                 | Child Care Center  |
| Address<br>3400 KOHR BOULEVARD COLUMBUS<br>OH 43224 |                                      |                 | County<br>FRANKLIN |
| Building Approval Date<br>01/13/2011                | Use Group/Code<br>E                  | Occupancy Limit | Maximum Under 2 ½  |
| Fire Inspection Approval Date 01/19/2022            | Food Service Risk Level<br>Level III |                 |                    |

| Inspection Information |                                |                  |                   |              |
|------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type        | Inspection Sc                  | cope             | Inspection Notice |              |
| Annual                 | Full                           |                  | Unannounced       |              |
| Inspection Date        | Begin Time 9                   | :45 AM           | End Time 2:00 PM  |              |
| 01/04/2023             |                                |                  |                   |              |
| Reviewer:              |                                |                  |                   |              |
| Sara Goke              |                                |                  |                   |              |
| Summary of Findings    |                                |                  |                   |              |
| No. Rules Verified     | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58                     | 1                              | 0                | 0                 | 1            |

| 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   |                  | 9         | 0          | 9     |  |
| Total Under 2 ½ Years                                     | 49               | 9         | 0          | 9     |  |
| Older Toddler   |                  | 15        | 0          | 15    |  |
| Preschool   |                  | 30        | 0          | 30    |  |
| School Age  |                  | 0         | 0          | 0     |  |
| Total Capacity/Enrollment                                 | 155              | 45        | 0          | 54    |  |

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

| Elephants    | Mixed Age Group      | 2 to 5  | birth-3 |
|--------------|----------------------|---------|---------|
| Stars        | 3 years to < 4 years | 1 to 9  |         |
| Bumble Bees  | 4 years to < 5 years | 1 to 10 |         |
| Hummingbirds | 3 years to < 4 years | 2 to 9  |         |
| Koalas       | Mixed Age Group      | 2 to 6  | birth-3 |
| Sunflowers   | Mixed Age Group      | 1 to 4  | birth-3 |
| Pandas       | Mixed Age Group      | 2 to 5  | birth-3 |

## **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 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.

| Serious Risk No   | n-Compliances   |
|---|-----------------|
| No Serious Risk Non-Compliances were observed during t  | his inspection  |
|   | ·               |
|   |                 |
|   |                 |
|   |                 |
|   |                 |
|   |                 |
| Moderate Risk N   | on-Compliances  |
| No Moderate Risk Non-Compliances were observed durin    |                 |
| To Moderate Misk from Compilatives were observed during | 5 cms mspectron |
|   |                 |
|   |                 |
|   |                 |
|   |                 |
|   |                 |

## **Low Risk Non-Compliances**

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

<u>Code</u>: The program is required to provide an environment that protects the children in care from any items and conditions that may threaten their health, safety, and well-being.

<u>Finding</u>: Children in care shall be protected from any items and conditions which threaten their health, safety, and well-being. During the inspection, it was determined that children were not protected from the following item(s) or condition(s) which may threaten their health, safety, or well-being as noted in number(s) 3 below:

- 1. Open pull cords that are not closed loop.
- 2. Telephone cords.
- 3. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled. (sound machine in Pandas)
- 4. Stacked chairs.
- 5. Employee(s) purse(s).
- 6. Diaper bags.
- 7. Television not securely anchored.
- 8. Small or lightweight pieces of shelving units are not securely anchored to the wall.
- 9. Smoke detector needing batteries replaced.
- 10. Staff member stepped over a barrier/gate while holding a child.
- 11. Emergency exits were blocked by the following classroom furniture: [ ].
- 12. Other [ ].

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: 02/04/2023

## **Rules In-Compliance/Not Verified**

| Rule                        | Status    | Documenting Statement(s), If applicable |
|-----------------------------|-----------|---|
| 5101:2-12-02 License Posted | Compliant |   |

| 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 |   |
| Requirements                             |           |   |
|  |           |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable                                 |
| Rule: 5101:2-12-04 Building              | Compliant | Documenting Statement: On the day of                                    |
| Department Inspection                    |           | the inspection, the program was   |
|  |           | operating in compliance with the current                                |
|  |           | building approval(s).   |
|  |           |   |
| Dulo                                     | Ctatus    | Decumenting State in such (s) If small such (s                          |
| Rule  Rule: 5101:2 12 04 Fire Inspection | Status    | Documenting Statement(s), If applicable                                 |
| Rule: 5101:2-12-04 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 1/19/23.   |
|  |           |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable                                 |
| Rule: 5101:2-12-04 Food Service          | Compliant | Documenting Statement: The food service                                 |
| Requirements                             | Compliant | license was observed posted. Following is                               |
| Requirements                             |           | the audit number and date of expiration:                                |
|  |           | 9944679.  |
|  |           |   |
|  |           | ·   |
| Rule                                     | Status    | Documenting Statement(s), If applicable                                 |
| 5101:2-12-05 Denial, Revocation and      | Compliant |   |
| Suspension                               |           |   |
|  |           |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable                                 |
| 5101:2-12-07 Administrator               | Compliant |   |
| Qualifications                           |           |   |
|  |           |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable                                 |
| 5101:2-12-07 Administrator               | Compliant |   |
| Responsibilities/Requirements            |           |   |
|  |           |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable                                 |
| 5101:2-12-07 Written Program             | Compliant |   |
| Policies and Procedures                  |           |   |
|  |           |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable                                 |
| 5101:2-12-08 Medical Statement           | Compliant |   |

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|---------------------------------------|-----------|--|
|                                       |           |  |
|                                       |           |  |
| 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             |           |  |
|                                       |           |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-09 Background Check         | Compliant |  |
| Requirements                          | ·         |  |
| - 41-                                 |           |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-10 Health Training          | Compliant |  |
| Requirements                          | Joniphane |  |
| nequirements                          | <u> </u>  |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-10 Professional             | Compliant | Documenting Statement(s), if applicable  |
|                                       | Compilant |  |
| Development Requirements              |           |  |
|                                       |           |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-11 Indoor Space             | Compliant |  |
| Requirements                          |           |  |
|                                       |           |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-11 Separation of Children   | Compliant |  |
| Under 2 1/2 Years                     |           |  |
|                                       |           |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-11 Outdoor Space      | Compliant | Documenting Statement: Outdoor play      |
| Requirements                          |           | was observed for the Bumble Bee          |
|                                       |           | group(s).                                |
|                                       |           |  |
| 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  |
|                                       |           | 11/14/22.                                |
|                                       |           | 1-1, - 1,                                |
|                                       | I         |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-11 Outdoor Play Equipment   | Compliant | Documentally statement(3), it applicable |
| 3101.2 12 11 Outdoor Flay Equipment   | Comphant  |  |
|                                       | l         |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-11 Outdoor Play Fall Zones  | Compliant | Documenting Statement(3), it applicable  |
| 3101.2 12 11 Outdoor Flay Fair Zories | Comphant  |  |
|                                       | l         |  |

| Rule                                  | Status    | Documenting Statement(s), If applicable   |
|---------------------------------------|-----------|---|
| 5101:2-12-12 Safe Equipment           | Compliant | ( //                                      |
|                                       | '         |   |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-13 Sanitary Equipment and   | Compliant |   |
| Environment                           |           |   |
|                                       | -         | <u> </u>                                  |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-13 Handwashing        | Compliant | Documenting Statement: Staff and          |
| Requirements                          | ,         | children were observed washing hands as   |
| ·                                     |           | required by the rule.                     |
|                                       |           | ,   |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-13 Smoke Free               | Compliant |   |
| Environment                           | '         |   |
|                                       | 1         |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-13 Toothbrushing            | Compliant |   |
| Requirements                          |           |   |
| педанения                             | ı         |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-14 Transportation and Field | Compliant | Bocamenting statement(3), it applicable   |
| Trip Procedures                       | Compilant |   |
| The Frocedures                        |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-14 Transportation - Driver  | Compliant | Bocumenting Statement(3), if applicable   |
| Requirements                          | Compliant |   |
| Requirements                          |           |   |
| Dula                                  | Ctatus    | Decumenting Statement/s) If applicable    |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-14 Transportation -   | Compliant | Documenting Statement: An annual          |
| Vehicle Requirements                  |           | safety check of the vehicle(s), using the |
|                                       |           | JFS 01230 "Vehicle Inspection Report For  |
|                                       |           | Child Care Centers" form, was verified    |
|                                       |           | and dated 8/24/22.                        |
|                                       |           |   |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-15 Child Medical and        | Compliant |   |
| Enrollment Records                    |           |   |
|                                       | 1         |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-15 Medical/Physical Care    | Compliant |   |
| Plans                                 |           |   |
|                                       |           |   |
| Rule                                  | Status    | Documenting Statement(s), If applicable   |

| 5101:2-12-16 Medical, Dental, and  | Compliant |  |
|------------------------------------|-----------|--|
| General Emergency Plan             | Compilant |  |
| General Emergency Flan             |           |  |
| Dulo                               | Chahua    | Decumenting Statements of a police his         |
| Rule                               | Status    | Documenting Statement(s), If applicable        |
| 5101:2-12-16 Emergency Drills      | Compliant |  |
|                                    |           |  |
| Rule                               | Status    | Documenting Statement(s), If applicable        |
| 5101:2-12-16 First Aid/Standard    | Compliant | bocumenting statement(s), if applicable        |
| Precautions                        | Compliant |  |
| Frecautions                        |           |  |
| Rule                               | Status    | Documenting Statement(s), If applicable        |
| 5101:2-12-16 Management of         |           | bocumenting statement(s), if applicable        |
| Communicable Disease               | Compliant |  |
| Communicable Disease               |           |  |
| Pule                               | Ctatus    | Decumenting Statement of the multiple          |
| Rule                               | Status    | Documenting Statement(s), If applicable        |
| 5101:2-12-16 Incident/Injury       | Compliant |  |
| Reporting                          |           |  |
| D. J.                              | Chatter   | Danisanti Ci i i i i i i i i i i i i i i i i i |
| Rule                               | Status    | Documenting Statement(s), If applicable        |
| 5101:2-12-16 Written Disaster Plan | Compliant |  |
|                                    |           |  |
| Dulo                               | Chahua    | Decumenting Statements of a police his         |
| 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(s), if applicable        |
| Equipment                          | Compliant |  |
| Equipment                          |           |  |
| Rule                               | Status    | Documenting Statement/s) If applicable         |
| 5101:2-12-17 Daily Outdoor Play    | Compliant | Documenting Statement(s), If applicable        |
| 3101.2-12-17 Daily Outdoor Play    | Compliant |  |
|                                    |           |  |
| Rule                               | Status    | Documenting Statement(s), If applicable        |
| 5101:2-12-18 License Capacity      | Compliant | bootinenting statement(s), it applicable       |
| 3101.2 12 10 Licelise capacity     | Compliant |  |
| <u> </u>                           |           |  |
| Rule                               | Status    | Documenting Statement(s), If applicable        |
| 5101:2-12-18 Ratio                 | Compliant | (/// ··  |
|                                    | 1 1 1     |  |
|                                    | •         |  |
| Rule                               | Status    | Documenting Statement(s), If applicable        |
| 5101:2-12-18 Group Size            | Compliant |  |
| · '                                |           |  |
|                                    |           |  |
| Rule                               | Status    | Documenting Statement(s), If applicable        |
| 5101:2-12-18 Attendance Records    | Compliant |  |
| <u>.</u>                           | •         |  |

| Beginning!                           |           |  |
|--------------------------------------|-----------|--|
|                                      |           |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable      |
| 5101:2-12-19 Supervision             | Compliant | Boodinenting Statement(5), ii applicable     |
| 3101.2-12-19 Supervision             | Compilant |  |
|                                      |           |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable      |
| 5101:2-12-19 Child Guidance          | Compliant |  |
|                                      |           |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable      |
| 5101:2-12-20 Cots and Napping        | Compliant |  |
|                                      | ·         |  |
|                                      | 1         |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable      |
| 5101:2-12-20 Cribs                   | Compliant | bocamenting statement(s), it applicable      |
| 3101.2-12-20 CHbs                    | Compilant |  |
|                                      | <u> </u>  |  |
|                                      |           |  |
| 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 | bootimenting statement(5), ii approasie      |
| 5101.2-12-22 Hala Wilk Requirements  | Compilant |  |
|                                      |           |  |
| DI-                                  | Chahara   | Decree while Chate as eather if a collection |
| Rule                                 | Status    | Documenting Statement(s), If applicable      |
| 5101:2-12-22 Safe Food               | Compliant |  |
| Handling/Storage                     |           |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable      |
| 5101:2-12-23 Infant Daily Care       | Compliant |  |
|                                      |           |  |
|                                      | 1         |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable      |
|                                      |           | bocumenting statement(s), if applicable      |
| 5101:2-12-23 Infant Bottle and Food  | Compliant |  |
| Preparation                          |           |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable      |
| 5101:2-12-23 Diapering and Toilet    | Compliant |  |
| Training                             |           |  |
| Traning                              | 1         |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable      |
| 5101:2-12-24 Swimming and Water      | Compliant |  |
| Safety Requirements                  |           |  |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable      |
| 5101:2-12-25 Medication              | Compliant | G 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2      |
| Administration                       |           |  |
| Autilitistiation                     |           |  |

