

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 Det | ails | |
|---|---------------------|-----------------|--------------------|
| Program Name | Program Number | | Program Type |
| Little Shepherds Learning Center | 000000406810 | | Child Care Center |
| Address 5475 BRAND ROAD DUBLIN OH 43017 | | | County FRANKLIN |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ |
| Fire Inspection Approval Date 02/01/2023 | Food Service Risk L | Level | |

| Inspection Information | | | | |
|------------------------|-------------------------------|--------------------|-------------------|--------------|
| Inspection Type | Inspection | n Scope | Inspection Notice | |
| Annual | Full | | Unannounced | |
| Inspection Date | Begin Tir | ne 10:00 AM | End Time 11:20 AM | |
| 11/13/2023 | | | | |
| Reviewer: | | | | |
| JO ELLEN MORTON-CONRAD | | | | |
| Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliance | s No. Serious Risk | No. Moderate Risk | 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 | 9 | 0 | 0 | 0 |
| Older Toddler | | 0 | 0 | 0 |
| Preschool | | 0 | 52 | 52 |
| School Age | | 0 | 6 | 6 |
| Total Capacity/Enrollment | 91 | 0 | 58 | 58 |

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

| 4's | 4 years to < 5 years | 2 to 14 | |
|-----|---------------------------|---------|--|
| 3's | 3 years to < 4 years | 2 to 9 | |
| 4's | 4 years to < 5 years | 2 to 14 | |
| 3'S | 3 years to < 4 years | 2 to 7 | |
| 5's | 5 years to < Kindergarten | 2 to 6 | |

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 Non-Compliances | | | |
|---|---------------|--|--|
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| No Serious Risk Non-Compliances were observed during this inspection | | | |
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| Moderate Risk Non-Compliances | $\overline{}$ | | |
| 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 | | |
| No Low Kisk Non-Compliances were observed during this hispection | | |
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Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(s), If applicable |
|----------------------------------|-----------|---|
| 5101:2-12-02 License Posted | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-02 Current Information | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-03 Inspection | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Building Department | Compliant | |
| Inspection | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Fire Inspection | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Food Service | Compliant | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| Rule | Status | Documenting Statement(s), If applicable |
|--|---------------------|---|
| | | |
| 5101:2-12-11 Outdoor Play Equipment | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| | | |
| Requirements | | |
| 5101:2-12-11 Outdoor Space | Compliant | bocumenting statement(s); if applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| Requirements | | |
| 5101:2-12-11 Indoor Space | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| | | |
| Development Requirements | | |
| 5101:2-12-10 Professional | Compliant | , |
| Rule | Status | Documenting Statement(s), If applicable |
| печинения | l | |
| Requirements | Compliant | |
| Rule 5101:2-12-10 Health Training | Status Compliant | Documenting Statement(s), If applicable |
| Pulo | Ctatus | Decumenting Statement(s) If applicable |
| Requirements | | |
| 5101:2-12-09 Background Check | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
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| Whistle Blower Protection | | |
| 5101:2-12-08 Orientation Training & | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| | 1 | |
| 5151.2 12 00 Medical Statement | Compliant | |
| 5101:2-12-08 Medical Statement | Compliant | bocumenting statement(s); if applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| Folicies and Procedures | | |
| 5101:2-12-07 Written Program Policies and Procedures | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| | | |
| Responsibilities/Requirements | | |
| 5101:2-12-07 Administrator | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| | | |
| Qualifications | | |
| 5101:2-12-07 Administrator | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| | 1 | 1 |
| Suspension | Compliant | |
| 5101:2-12-05 Denial, Revocation and | Compliant | |

| 5101:2-12-11 Outdoor Play Fall Zones | Compliant | |
|---|---------------------|---|
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Equipment | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Environment | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Sanitary Equipment and | Compliant | |
| Environment | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Handwashing | Compliant | |
| Requirements | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Smoke Free | Compliant | 5 (" 11 |
| Environment | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-15 Child Medical and | Compliant | Boodinenting statement(s), in applicable |
| Enrollment Records | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-15 Medical/Physical Care | Compliant | Documenting statement(s), if applicable |
| Plans | · · | |
| Dula | Chabina | Day was a king of the transport of the same live king |
| Rule 5101:2-12-16 Medical, Dental, and | Status Compliant | Documenting Statement(s), If applicable |
| General Emergency Plan | | |
| | 1 | |
| Rule 5101:2-12-16 Emergency Drills | Status Compliant | Documenting Statement(s), If applicable |
| Jioi.2-12-10 Lineigency Dims | Compilant | |
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| Rule 5101:2-12-16 First Aid/Standard | Status Compliant | Documenting Statement(s), If applicable |
| Precautions | Compilant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Management of Communicable Disease | Compliant | |
| | 1 | <u> </u> |
| Rule | Status | Documenting Statement(s), If applicable |

| 5101:2-12-16 Incident/Injury | Compliant | |
|--------------------------------------|---------------------|--|
| Reporting | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Written Disaster Plan | Compliant | - · · · · · · · · · · · · · · · · · · · |
| | | |
| 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 | |
| Equipment | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 License Capacity | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 Ratio | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 Group Size | Compliant | |
| | | |
| Rule 5101:2-12-18 Attendance Records | Status Compliant | Documenting Statement(s), If applicable |
| 5101.2 12 16 Attendance Necords | Compilant | |
| | I a | |
| Rule 5101:2-12-19 Supervision | Status Compliant | Documenting Statement(s), If applicable |
| | John phiam. | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Child Guidance | Compliant | bocumenting statement(s), if applicable |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-25 Medication | Compliant | Same of the same o |
| Administration | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Child Care Staff Member | Compliant | bodamenting statement(s), it applicable |
| Educational Requirements | | |
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