



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 NOBLE LEARNING CENTER	Program Number 000000409534	Program Type Child Care Center	
Address 44135 SR 821 MARIETTA CALDWELL OH 43724		County NOBLE	
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date 08/05/2023	Food Service Risk Level		

Inspection Information		
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 10/11/2023	Begin Time 9:45 AM	End Time 6:45 PM
Inspection Date 10/13/2023	Begin Time 10:45 AM	End Time 11:15 AM
Reviewer: STEPHANIE WALTERS		
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Summary of Findings				
No. Rules Verified 58	No. Rules with Non-compliances 10	No. Serious Risk 0	No. Moderate Risk 2	No. Low Risk 8

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)		11	0	11
Young Toddler		30	0	30
Total Under 2 ½ Years	52	41	0	41
Older Toddler		3	0	3
Preschool		34	0	34
School Age		0	49	49



Total Capacity/Enrollment	144	37	49	127
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Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Suite A (2 yrs)	18 months to < 30 months	2 to 7	At arrival
Suite A (2 yrs)	18 months to < 30 months	2 to 6	
Suite B	3 years to < 4 years	1 to 7	At arrival
Suite B	3 years to < 4 years	2 to 9	
Suite C	3 years to < 4 years	2 to 17	At arrival
Suite C	3 years to < 4 years	2 to 14	
Suite 1	0 to < 12 months	1 to 2	At arrival
Suite 1	0 to < 12 months	1 to 1	
Suite 2 EHS	0 to < 12 months	3 to 7	At arrival
Suite 2 EHS	0 to < 12 months	3 to 7	
Suite 3 EHS	18 months to < 30 months	3 to 7	
Suite 3 EHS	18 months to < 30 months	3 to 6	At arrival
Suite D	18 months to < 30 months	2 to 6	At arrival
Suite D	18 months to < 30 months	2 to 6	
Suite XYZ	0 to < 12 months	2 to 5	At arrival
Suite XYZ	0 to < 12 months	2 to 5	
School age 1	School-Age to < 11 years	2 to 7	After school arrival
School age 1	School-Age to < 11 years	1 to 1	
School age 2	School-Age to < 11 years	2 to 9	After school arrival

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
No Serious Risk Non-Compliances were observed during this inspection



Moderate Risk Non-Compliances

Domain: 08 Staff Files

Rule: 5101:2-12-09 Background Check Requirements

Code: The program is required to have all staff request background checks as required and receive a JFS 01176 or preliminary approval from ODJFS prior to allowing an individual to engage in assigned duties or be near children.

Finding: In review of the staff records, it was determined that background checks did not meet the requirements of the rule for the person(s) listed on the Employee Record Chart as noted in number(s) 4 below:

1. The request for a background check for child care was not submitted in the OPR.
2. The fingerprints were not submitted electronically according to the process established by BCI.
3. The individual(s) had engaged in assigned duties or were near children and preliminary approval from ODJFS was not on file.
4. Background checks were not updated every five years.

Submit the program's corrective action plan, which includes a copy of the JFS 01176, or a copy of the preliminary approval or a statement that the individual(s) are no longer engaged in assigned duties and are not near children until the preliminary approval has been received, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/10/2023

Domain: 09 Children's Files

Rule: 5101:2-12-15 Medical/Physical Care Plans

Code: The program is required to have a completed JFS 01236 "Child Medical/Physical Care Plan for Child Care" on file at the program for any child having a health condition and must implement and/or follow instructions on the plan. The program is required to have staff trained to perform the procedures on the JFS 01236 "Child Medical/Physical Care Plan for Child Care" present at the program when the child requiring the procedure is onsite. Only staff who have been trained shall be permitted to perform the procedures listed on the JFS 01236.

Finding: In review of the children's records, it was determined the program did not meet the requirements for caring for at least one child, indicated on the Children Records Review, with a condition that requires a JFS 01236 ""Child Medical/Physical Care Plan"" as noted in number(s) 1, 27, 28, 29, 30 below:

1. No plan was on file.
(Page 1)
2. Child's name was missing.
3. Name of the condition was missing.
4. Indication if medication or medical food is required was missing.



5. Signs, symptoms or situations that require staff to take action were missing.
 6. Activities, foods, environmental conditions to avoid were missing.
 7. Training instructions for procedures for staff to follow were missing or incomplete.
- (Page 2)
8. Child's name was missing or not attached.
 9. Child's date of birth was missing or not attached.
 10. Child's weight was missing or not attached.
 11. Name of the medication/medical food was missing or not attached.
 12. Dosage of medication/medical food to be administered was missing or not attached.
 13. Time for medication/medical food to be administered was missing or not attached.
 14. Expiration date for medication/medical food was missing or not attached.
 15. Symptoms that require staff to administer medication/medical food were missing or not attached.
 16. Specific instructions to administer the medication/medical food were missing or not attached.
 17. Actions to be taken if the symptoms do not subside were missing or not attached.
 18. Physician's signature was missing or not attached.
 19. The date of the physician's signature was missing or not attached.
- (Page 3)
20. Child's name was missing.
 21. Instructions regarding emergency evacuation, if applicable, were missing.
 22. Signature of parent granting permission to implement the plan and verifying training was missing.
 23. Date of parent signature was missing.
 24. Certified Professional Trainer information was missing.
 25. Signature of certified professional who trained the program staff was missing, if parent was not the trainer.
 26. Date of trainer signature was missing.
 27. Printed name(s) of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
 28. Signature(s) of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
 29. Date of staff signature was missing.
 30. Administrator/Provider signature was missing
 31. Date of administrator/Provider was missing.
- (Page 4)
32. Child's name was missing.
 33. Name of medication or medical food was missing.
 34. Date the medication/medical food was administered was missing.
 35. Time medication/medical food was administered was missing.
 36. Dosage of medication/medical food that was administered was missing.
 37. Signature of person administering medication/medical food was missing.
 38. The plan was not followed or implemented.
 39. The plan was not able to be implemented due to conflicting information.
 40. None of the child care staff members trained in the procedures on the JFS 01236 were onsite when a child requiring the plan was present.
 41. Child care staff members trained in the procedures on the JFS 01236 were not scheduled to be present the entire the time the child requiring the plan was onsite.
 42. None of the child care staff members trained in the procedures on the JFS 01236 accompanied the child requiring the plan during a trip.
 43. A child care staff member who had not been trained in the procedures on the JFS 01236 performed the procedure.



44. Medication listed in the procedures to follow was not onsite available to administer as instructed and alternate instructions for this situation were not included on the plan.

Provide staff training. Submit the program's corrective action plan, which includes a copy of the completed JFS 01236, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/10/2023

Low Risk Non-Compliances

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

Code: 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.

Finding: During the inspection, it was determined that children were not protected from item(s) or condition(s) which may threaten their health, safety, or well-being as noted in number(s) 6 below:

1. Surge protectors/outlets did not have childproof receptacle covers.
2. Open pull cords that are not closed loop.
3. Toys or other items small enough to be swallowed were present in the space where infants and/or toddlers were in care.
4. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
5. Stacked chairs.
6. Employee(s) purse(s). In Suite 3
7. Diaper bags.
8. Television not securely anchored.
9. Small or lightweight pieces of shelving units are not securely anchored to the wall.
10. Smoke detector needing batteries replaced.
11. An area rug did not have a nonskid backing.
12. An area rug presented a tripping hazard.
13. A floor surface that was unsafe in that [].
14. No platform was provided for the sink or toilet in the [] classroom.
15. The platform provided for the sink or toilet in the [] classroom was not sturdy.
16. The platform provided for the sink or toilet in the [] classroom posed a safety hazard in that [].
17. Telephone cords.
18. Staff member stepped over a barrier/gate while holding a child.
19. Emergency exits were blocked by the following classroom furniture: [].
20. A mercury thermometer was being used to take a child's temperature.



21. Methods of ventilation used did not provide protection from rodents, insects, or other hazards.
22. 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: 11/10/2023

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Equipment

Code: The program is required to refrain from placing indoor swings, slides, climbers, and climbing apparatus directly over a hard surface. Shock absorbent protective covering, intended to be a fall surface per manufacturer's guidelines, shall be placed and used under the equipment.

Finding: During the inspection, it was determined that indoor swings, slides, climbers, and climbing apparatus did not have required shock absorbent protective covering under and around the equipment as noted in number(s) 1 below:

1. A shock absorbent protective covering was not used. climber with slide in Suite 2
2. The mats were not at least one and one-half inches thick for equipment over three feet high.
3. The mats were not used according to the manufacturer's guidelines.
4. Other [].

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

Corrective Action Plan Due: 11/10/2023

Domain: 06 Program Information

Rule: 5101:2-12-14 Transportation and Field Trip Procedures

Code: The program is required to have staff trained in CPR, First Aid, and Communicable Diseases on all trips.

Finding: During the inspection, it was determined that a person trained in cardiopulmonary resuscitation (CPR), first aid and management of communicable disease, had not been present for number(s) 2 below as required by the rule:

1. In the vehicle for routine trips;
2. In the vehicle for field trips;



3. At the destination on all field trips.

Secure current training for the area needed or restructure the staff who are currently trained on the vehicle during routine trips and field trips. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/10/2023

Domain: 06 Program Information

Rule: 5101:2-12-14 Transportation - Driver Requirements

Code: The program is required to have all drivers be an employee of the program, a public transportation driver, or employed by a contracted transportation service company and retain a copy of all licenses for drivers employed by the program.

Finding: During the inspection, it was determined that the requirements for drivers was not met as listed in number(s) 1 below:

1. The driver(s) noted on the Employee Record Chart used for trips did not have a copy of a current driver's license on file.
2. At least one employee who is responsible for transporting children did not have documentation of completion of the prescribed driver training on file.
3. The driver used to transport children was not an employee of the program, a public transportation driver, or employed by a company contracted to provide transportation service.

Remove this individual from transporting children until the requirements are met. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/10/2023

Domain: 08 Staff Files

Rule: 5101:2-12-08 Orientation Training & Whistle Blower Protection

Code: The program is required to have staff complete the online staff orientation training. Additionally, the training must be completed before they are permitted to have sole responsibility of children.

Finding: In review of the staff records, it was determined that child care staff member(s) did not meet the requirements for completing the online orientation training as noted in number(s) 1 below:



1. The training was not completed within 30 days of starting employment at the program as a child care staff member.
2. Documentation of completing the training after December 31, 2016 was not on file.
3. Completion of the training was not verified in the OPR.
4. A child care staff member had sole responsibility of children and had not completed the online orientation.

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

Corrective Action Plan Due: 11/10/2023

Domain: 08 Staff Files

Rule: 5101:2-12-08 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) 2 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: 11/10/2023



Domain: 08 Staff Files

Rule: 5101:2-12-07 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) 4, 5 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: 11/10/2023

Domain: 08 Staff Files

Rule: 5101:2-12-10 Health Training Requirements

Code: The program is required to have all child care staff members complete training in child abuse and neglect recognition and prevention within sixty days of hire. Staff must complete training in first aid and CPR within the first ninety days of hire.

Finding: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in number(s) 2, 3, 4, 5, 6 below:

1. Child abuse and neglect recognition and prevention training was not completed within sixty days of hire.
2. First aid training was not completed within ninety days of hire.



3. Cardiopulmonary resuscitation (CPR) training was not completed within ninety days of hire.
4. The child abuse and neglect recognition and prevention training was expired.
5. The first aid training was expired.
6. The CPR training was expired.

Refer to the Employee Record Chart for the name(s) of the child care staff member(s) who must complete the required health and safety training(s). Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/12/2023

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	
5101:2-12-02 Current Information	Compliant	
5101:2-12-03 Inspection Requirements	Compliant	
5101:2-12-04 Building Department Inspection	Compliant	
5101:2-12-04 Fire Inspection	Compliant	
Rule: 5101:2-12-04 Food Service Requirements	Compliant	Documenting Statement: The food service license was observed posted. Following is



		the audit number and date of expiration: SFRY-CP3NPV 3/1/24.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator Qualifications	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-07 Written Program Policies and Procedures	Compliant	Documenting Statement: The written policies and procedures reviewed on the day of the inspection were verified as complete.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-10 Professional Development Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Separation of Children Under 2 1/2 Years	Compliant	
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 9/13/23.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Play Equipment	Compliant	Documenting Statement: Outdoor equipment was viewed to be safe and free of rust, sharp points, and other hazards.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Fall Zones	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Sanitary Equipment and Environment	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Handwashing Requirements	Compliant	
5101:2-12-13 Smoke Free Environment	Compliant	
Rule: 5101:2-12-13 Toothbrushing Requirements	Compliant	Documenting Statement: Tooth brushing is practiced by the program and it was determined to meet the requirements outlined in the rule.
Rule: 5101:2-12-14 Transportation - Vehicle Requirements	Compliant	Documenting Statement: The vehicle (Bus) used by the program to transport children [is/are] inspected and licensed by the Ohio State Highway Patrol.
Rule: 5101:2-12-14 Transportation - Vehicle Requirements	Compliant	Documenting Statement: During the inspection, weekly safety inspections and/or monthly emergency exiting drills were completed and documented, as required using the ODJFS sample form.
Rule: 5101:2-12-15 Child Medical and Enrollment Records	Compliant	Documenting Statement: At the time of the inspection, 25% of the children's records were reviewed, and the records were complete, as required by the rule.
Rule: 5101:2-12-15 Child Medical and Enrollment Records	Compliant	Documenting Statement: In review of 25% of the records, at the time of the inspection, children's medical statements were complete and on file, as required by the rule.
5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	
5101:2-12-16 Emergency Drills	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard Precautions	Compliant	
5101:2-12-16 Management of Communicable Disease	Compliant	
5101:2-12-16 Incident/Injury Reporting	Compliant	
Rule: 5101:2-12-16 Written Disaster Plan	Compliant	Documenting Statement: The program's written disaster plan was reviewed during the inspection and met the requirements.
Rule: 5101:2-12-16 Written Disaster Plan	Compliant	Documenting Statement: Annual training of the written disaster plan was completed by staff.
5101:2-12-17 Daily Schedule	Compliant	
5101:2-12-17 Materials and Equipment	Compliant	
5101:2-12-17 Daily Outdoor Play	Compliant	
5101:2-12-18 License Capacity	Compliant	
Rule: 5101:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child ratios observed during the inspection surpassed those required by the rule.
5101:2-12-18 Group Size	Compliant	



Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Attendance Records	Compliant	Documenting Statement: During the 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.
Rule: 5101:2-12-19 Supervision	Compliant	
Rule: 5101:2-12-19 Child Guidance	Compliant	
Rule: 5101:2-12-20 Cots and Napping	Compliant	Documenting Statement: Cots were placed appropriately and safely during nap time.
Rule: 5101:2-12-20 Cribs	Compliant	Documenting Statement: All cribs were placed 2 feet apart.
Rule: 5101:2-12-22 Meal and Snack Requirements	Compliant	Documenting Statement: Posted menus were current and dated.
Rule: 5101:2-12-22 Meal and Snack Requirements	Compliant	Documenting Statement: The menu posted reflected the meal served.
Rule: 5101:2-12-22 Fluid Milk Requirements	Compliant	
Rule: 5101:2-12-22 Safe Food Handling/Storage	Compliant	
Rule: 5101:2-12-23 Infant Daily Care	Compliant	



Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-23 Infant Bottle and Food Preparation	Compliant	Documenting Statement: Infants were fed in conformity with parent/guardian's written, dated instructions.
Rule: 5101:2-12-23 Diapering and Toilet Training	Compliant	
Rule: 5101:2-12-25 Medication Administration	Compliant	
Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements	Compliant	Documenting Statement: All Child Care Staff Members had verification of educational requirements on file at the program.