

Center Complaint Inspection Summary 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 DISCOVERY KINGDOM	Program Number 000000503711	Program Type Child Care Center
Address 1069 KLOTZ ROAD BOWLING GREEN OH 43402		County WOOD

Inspection Information			
Inspection Type Complaint		Inspection Scope Partial	Inspection Notice Unannounced
Reviewer(s) ELLEN WOODRUFF	Inspection Day 05/19/2025	Begin Time 1:30 PM	End Time 5:40 PM
Summary of Findings			
No. Rules Verified 11	No. Rules with Non-compliances 11	No. Serious Risk 1	No. Moderate Risk 2
		No. Low Risk 9	

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Infant 1	0 to < 12 months	1 to 4	
Infant 2	0 to < 12 months	1 to 10	2nd staff member stepped out of room.
Infant 2	0 to < 12 months	1 to 10	additional adult in the room not counted in ratio
Toddler 1	18 months to < 30 months	1 to 7	
Toddler 2	18 months to < 30 months	1 to 5	
Toddler 3	18 months to < 30 months	1 to 7	
Preschool 1	3 years to < 4 years	1 to 9	1 younger in the next older age group
Preschool 2	4 years to < 5 years	0 to 9	
SA and non-nappers	4 years to < 5 years	1 to 12	

Complaint Allegations

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.

Domain:01 Ratio & Supervision

Rule: 5180:2-12-19 Child Guidance

Code: The program staff shall use developmentally appropriate techniques when managing children's behavior. Corporal punishment is prohibited, as well as any cruel, harsh, unusual or extreme techniques.

Allegation: Prohibited guidance and management techniques are being used.

Determination: Substantiated

Findings: During the inspection, it was determined that a Child Care Staff Member had used the inappropriate techniques in numbers 1, 8, 14 below when managing unacceptable behavior in children:

1. Utilize cruel, harsh, unusual, or extreme techniques;
2. Utilize any form of corporal punishment;
3. Delegate children to manage or discipline other children;
4. Use physical restraints on a child;
5. Restrain a child by prone restraint or any means other than holding children for a short period of time, such as in a protective hug, so that the children may regain control;
6. Place children in a locked room or confine children in any enclosed area;
7. Confine children to equipment such as cribs or highchairs;
8. Humiliate, threaten or frighten children;
9. Subject children to profane language or verbal abuse;
10. Make derogatory or sarcastic remarks about children or their families;
11. Punish children for failure to eat or sleep or for toileting accidents;
12. Withhold any food (including snacks and treats), rest or toilet use;
13. Punish an entire group of children due to the unacceptable behavior of one or a few;
14. Isolate and restrict children from all activities for an extended period of time.

Child Care Staff Members and other employees must always use appropriate guidance and management methods with children. 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.

Risk Level: Moderate

Corrective Action Plan Due: 07/04/2025

Domain:01 Ratio & Supervision

Rule: 5180:2-12-18 Ratio

Code: The program is required to maintain the appropriate staff to child ratio for each group served.

Allegation: Ratios are not being maintained at naptime.

Determination: Substantiated

Findings: During the inspection, a ratio of 0 child care staff member(s) for 9 children was determined to have occurred for the Preschool 2 group when the situation in number 1 below occurred:

1. A child care staff member stepped out of the room.
2. A child care staff member had not arrived at work on time.
3. Children were present who were not scheduled to be there.
4. A child care staff member was unable to work.
5. A child was injured in that group.
6. A child arrived in the group before a second staff member was scheduled to arrive with the group.
7. Two groups were combined, and the program did not follow the ratio for the youngest child in the group.
8. A child was transitioning to the next older age group, and the program did not follow the ratio for the youngest child in the group.
9. Ratio was doubled for more than two hours while children were napping.
10. Ratio was doubled while children were napping for a group that included at least one infant.
11. Ratio was doubled while children were napping and there were not enough staff members in the building to meet staff/child ratio.
12. Ratio was doubled in the school age group to allow access to the program, however, the program does not serve only school age children.
13. Both child care staff members did not have a working communication device when one staff member left the group to allow access to the school age only program.
14. The child care staff member did not return to the group after allowing access to the school age only program.
15. Other [].

Additional child care staff members must be hired or current child care staff members must be rescheduled to maintain compliance. 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.

Risk Level: Moderate

Corrective Action Plan Due: 07/04/2025

Domain:02 Safe & Sanitary Environment

Rule: 5180:2-12-12 Safe Environment

Code: The program is required to prohibit weapons, firearms, and ammunition from the premises. Individuals who are permitted to carry a weapon in a child care center include law enforcement officials, active duty members of the U. S. armed forces and individuals with a valid concealed handgun license.

Allegation: A weapon was on the premises.

Determination: Substantiated

Findings: During the inspection, it was determined there was a weapon/firearm on the premises of the program as noted in number 3 below:

1. Weapons, firearms, and/or ammunition were accessible to children on the premises.
 2. The individual with documentation of a valid exemption did carry the weapon(s) in a secure manner.
 3. The individual owning or carrying the weapons, firearms and/or ammunition did not have a valid concealed handgun license, was not a law enforcement official with documentation that his or her jurisdiction requires ready and immediate access to the weapon, and/or was not an active duty member of the U.S. armed forces and carrying valid military identification and documentation of successful completion of firearms training that meets the requirements listed in rule.
- These items must be removed from the program or proper documentation obtained.

Rule 5180:2-12-03 requires the program to notify parents when a serious risk non-compliance is cited. The notification must inform parents of the serious risk non-compliance and include the Department of Children and Youth website and location of further information regarding the determination. Submit the program's corrective action plan, which includes a statement that the [weapons/firearms/ammunition] have been removed or proper documentation obtained, and a copy of the written parent notification, to the Department to verify compliance with the requirements of this rule.

Risk Level: Serious

Corrective Action Plan Due: 06/09/2025

Domain:07 Diapering & Infant Care

Rule: 5180:2-12-23 Diapering and Toilet Training

Code: The program is required to launder diapers according to manufacturer's guidelines.

Allegation: Diapers are not being properly disposed in a lined, covered container that prevents hand contamination.

Determination: Substantiated

Findings: During the inspection, it was determined that the program was not storing or laundering soiled diapers or clothing according to the rule, in that the program did not meet the condition indicated in number 6 below.

1. Store for no longer than one day
2. Store in an individual covered container or plastic bag away from children's belongings
3. Kept out of reach of children
4. Store soiled diapers and diapering washcloths laundered by the center in a covered container with sanitizing solution
5. Hold soiled diapers to be commercially laundered for no more than seven days
6. Store soiled disposable diapers in a plastic-lined covered container not easily accessible to children
7. Discard disposable diapers daily or more frequently as needed to eliminate odor
8. Launder diapers according to manufacturer's guidelines
9. Other []

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.

Risk Level: Low

Domain:08 Staff Files

Rule: 5180:2-12-08 Child Care Staff Member Educational Requirements

Code: The program staff is required to have educational verification on file at the program.

Allegation: Education verification is not on file for all child care staff members.

Determination: Substantiated

Findings: In review of the staff records, it was determined that verification of a high school education for the child care staff member(s) listed on the Employee Record Chart, did not meet the requirements as listed in number 1 below:

1. Verification of completion of a high school education was not on file.
2. Documentation was incomplete or not on file for a high school junior or senior who is enrolled in a career-technical program.
3. Documentation was not on file for a high school junior or senior who is also enrolled in a college credit program in child development or early childhood education.
4. Documentation was not on file for a high school junior or senior who is enrolled in a Child Development Associate (CDA) training program.

Submit the program's corrective action plan, which includes a copy of the education verification, to the Department to verify compliance with the requirements of this rule.

Risk Level: Low

Corrective Action Plan Due: 07/04/2025

Summary of Additional Non-Compliances

Serious Risk Non-Compliances

No Additional Serious Risk Non-Compliances were observed during this inspection

Moderate Risk Non-Compliances

No Additional 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.

Findings: 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 3 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: 07/04/2025

Domain:01 Ratio & Supervision

Rule: 5180:2-12-18 Ratio

Code: The program is required to maintain the appropriate staff to child ratio for each group served with child care staff members who meet the requirements.

Findings: During the inspection, it was determined that children were being supervised by an individual who did not meet the requirements of a child care staff member (including orientation, first aid, CPR, child abuse training and professional development.) Additional child care staff members must be hired or current child care staff members must be rescheduled or assure that all individuals used in ration meet the requirements of a child care staff member to maintain compliance. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/04/2025

Domain:01 Ratio & Supervision

Rule: 5180:2-12-20 Cots and Napping

Code: The program is required to provide sufficient lighting when the children rest, nap, or sleep.

Findings: During the inspection, it was determined that the area used when children rest, nap or sleep was not lighted sufficiently to allow child care staff visual supervision of the children at all times.

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

Corrective Action Plan Due: 07/04/2025

Domain:05 Health & Safety

Rule: 5180:2-12-16 Incident/Injury Reporting

Code: The program is required to complete the JFS 01299 "Incident/Injury Report" for injuries and incidents at the program, provide a copy to the person who picks the child up on the day of the incident, and retain a copy of the form onsite at the program for one year.

Findings: In review of the records, it was determined the program did not meet the requirements for completing a JFS 01299 "Incident/Injury Report" as noted in number 4 below:

1. The JFS 01299 was not completed when a child became ill or received an injury which required first aid treatment.
2. The JFS 01299 was not completed when a child was transported to a source for emergency assistance.
3. The JFS 01299 was not completed when a child received a bump or blow to the head.
4. The JFS 01299 was not completed when an unusual or unexpected incident which jeopardized the safety of a child or employee of a program.
5. The parent or a person picking up the child did not receive the JFS 01299 on the day of the incident.
6. The program information (program name, number, address) was incomplete on the JFS 01299.
7. Child's name was incomplete on the JFS 01299.
8. Child's birthdate was incomplete on the JFS 01299.
9. Name of person(s) responsible for the child at the time of the incident was incomplete on the JFS 01299.
10. Number of children present in the group at the time of the incident was incomplete on the JFS 01299.
11. Date and/or time of the incident was incomplete on the JFS 01299.
12. Whether or not parents were contacted was incomplete on the JFS 01299.
13. Complete summary of the incident was incomplete on the JFS 01299.
14. Accurate summary of the incident was incomplete on the JFS 01299.
15. Name and/or signature of the person completing the form was incomplete on the JFS 01299.
16. The JFS 01299 was not kept on file at the program for at least one year.
17. Other [].

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

Corrective Action Plan Due: 07/04/2025

Domain:05 Health & Safety

Rule: 5180:2-12-16 Incident/Injury Reporting

Code: The program is required to submit notification of a serious incident in OCLQS by the next business day.

Findings: During the inspection, it was determined that a Serious Incident was not reported in the Ohio Child Licensing and Quality System (OCLQS), as required, by the program administrator or designee for an incident(s) as listed in number 4 below:

1. An incident, injury or illness that required professional medical consultation or treatment.
2. An unusual or unexpected incident which jeopardizes the safety of a child, child care staff member or employee of the program.
3. An incident defined as a serious risk non-compliance in appendix A to rule 5101:2-12-03 of the Administrative Code.
4. The program did not submit the report in OCLQS by the next business day as required by rule.

Submit the program's corrective action plan, which includes a statement that the program administrator or designee has completed the Serious Incident Report in OCLQS, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/04/2025

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.

Findings: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in numbers 1, 2, 3, 7 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: 07/04/2025

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.

Findings: 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 1 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: 07/04/2025