

## Family Child Care 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://ifs.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<br>WILSON, LORI M                        | Program Number<br>000000915300898 | Program Type<br>FCC - Type B Home |
| Address<br>3139 QUINBY DR<br><br>COLUMBUS<br>OH 43232 |                                   | County<br>FRANKLIN                |

| Inspection Information        |                                     |                          |                       |                                |
|-------------------------------|-------------------------------------|--------------------------|-----------------------|--------------------------------|
| Inspection Type<br>Compliance |                                     | Inspection Scope<br>Full |                       | Inspection Notice<br>Announced |
| Inspection Date<br>01/22/2026 |                                     | Begin Time<br>11:33 AM   |                       | End Time<br>1:15 PM            |
| Reviewer:<br>Melinda Irwin    |                                     |                          |                       |                                |
| Summary of Findings           |                                     |                          |                       |                                |
| No. Rules Verified<br>68      | No. Rules with Non-compliances<br>3 |                          | No. Serious Risk<br>0 | No. Moderate Risk<br>0         |
|                               |                                     |                          | No. Low Risk<br>3     |                                |

| 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)                                 | 3                | 0          | 0         | 0     |
| Young Toddler                                             |                  | 0          | 0         | 0     |
| <b>Total Under 2 Years</b>                                |                  | 0          | 0         | 0     |
| Older Toddler                                             | 6                | 1          | 0         | 1     |
| Preschool                                                 |                  | 5          | 0         | 5     |
| School Age                                                |                  | 0          | 0         | 0     |
| <b>Total Capacity/Enrollment</b>                          |                  | 6          | 0         | 6     |

| Staff-Child Ratios at the Time of Inspection |                 |                |         |
|----------------------------------------------|-----------------|----------------|---------|
| Group                                        | Age Group/Range | Ratio Observed | Comment |
| Lori Wilson                                  | Mixed Age Group | 1 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

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

#### Moderate Risk Non-Compliances

**No Moderate Risk Non-Compliances were observed during this inspection**

#### Low Risk Non-Compliances

**Domain: 02 Safe & Sanitary Environment**

Rule: 5180:2-13-12 Safe Environment

Code: The program is required to store cleaning and sanitizing supplies in a place that is inaccessible to children. Cleaning agents, aerosol cans and chemical substances must be stored in their original container or clearly labeled. School-age children may use cleaning supplies and equipment with adult supervision.

Findings: During the inspection, cleaning and sanitizing equipment and supplies were not used or stored properly as noted in number 15 below:

1. Cosmetics were accessible to children in the [ ] area.
2. Disinfecting wipes were accessible to children in the [ ] area.
3. Fish food was accessible to children in the [ ] area.
4. Hand lotion was accessible to children in the [ ] area.
5. Hand sanitizer (for children under 24 months) was accessible to children in the [ ] area.
6. Laundry detergent was accessible to children in the [ ] area.
7. Powder dish washing soap was accessible to children in the [ ] area.
8. Paint cans were accessible to children in the [ ] area.
9. White out was accessible to children in the [ ] area.
10. Potting Soil was accessible to children in the [ ] area.
11. Other potentially hazardous substance [ ] was accessible to children in the [ ] area.
12. Cleaning/sanitizing supplies had not been clearly labeled.
13. School-age children were using cleaning supplies, agents and/or equipment without adult supervision.
14. A spray aerosol was used in the [ ] group while children were in attendance.
15. Toothpaste was accessible to children in the program bathroom.

Provide staff training. Submit the program's corrective action plan, which includes a statement that the potentially hazardous substance is no longer accessible to children and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/21/2026

### **Domain: 05 Health & Safety**

Rule: 5180:2-13-16 Emergency Preparedness and Response Plan

Code: The program is required to have a completed emergency preparedness and response plan.

Findings: During the inspection, it was determined the program's written emergency preparedness and response plan did not meet the requirement or was missing the information in numbers 3, 5, 6 and 9 below:

Procedures:

1. The written emergency and preparedness and response plan had not been completed
2. The plan was not provided to all child care staff and employees
3. Weather emergencies and natural disasters which include severe thunderstorms, tornadoes, flash flooding, major snowfall, blizzards, ice storms or earthquakes
4. Emergency outdoor and indoor lockdown or evacuation due to threats of violence which includes active shooter, bioterrorism or terrorism including a designated safe site where staff and children can safely remain when evacuated
5. Emergency or disaster evacuations due to hazardous materials and spills, gas leaks or bomb threats including a designated safe site where staff and children can safely remain when evacuated
6. Outbreaks, epidemics or other infectious disease emergencies
7. Loss of power, water, or heat
8. Other threatening situations that may pose a health or safety hazard to the children in the program

Details:



9. Shelter in place or evacuation, how the program will care for and account for the children until they can be reunited with the parent
10. Assisting infants, toddlers and children with special needs and/or health conditions
11. Emergency contact information for parents and the program
12. Procedures for notifying and communicating with parents regarding the location of the children if evacuated
13. Procedures for communicating with parents during loss of communications, no phone or internet service available
14. The location of supplies and procedures for gathering necessary supplies for staff and children if required to shelter in place
15. What to do if a disaster occurs during the transport of children or when on a field trip or routine trip
16. Making the plan available to all child care staff members and employees
17. Training of staff or reassignment of staff duties as appropriate
18. Updating the plan on a yearly basis
19. Contact with local emergency management officials
20. The plan was unable to be implemented in that, [ ].

Submit the program's corrective action plan, which includes the missing information, if applicable, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/21/2026

#### **Domain: 09 Children's Files**

Rule: 5180:2-13-15 Child Medical and Enrollment Records

Code: The program is required to have a completed medical on file for each child.

Findings: In review of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in number 8 below:

1. No medical was on file for at least one child
2. Medical(s) on file was not updated every 13 months
3. Medical(s) were missing child's name and date of birth
4. Medical(s) were missing the date of the medical examination
5. The date of the exam was more than 13 months prior to the date the form was signed
6. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care
7. Medical(s) were missing the signature, business address and telephone number of the physician, physician's assistant(PA), advance practice nurse (APN) or certified nurse practitioner (CNP) who examined the child
8. Medical were missing a record of immunizations the child has had specifying month, day and year
9. Medical(s) were missing a statement from the physician, PA, APN, or CNP that the child has been immunized or is in the process of being immunized against the diseases required by division 5104.014 of the Revised Code and found in appendix A to this rule
10. Medical(s) were missing a statement from the child's parent or guardian that he or she has declined to have the child immunized against the disease for reasons of conscience, including religious convictions

11. Other [ ]

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

Corrective Action Plan Due: 02/21/2026

### Rules In-Compliance/Not Verified

| Rule                                                | Status    | Documenting Statement(s), If applicable |
|-----------------------------------------------------|-----------|-----------------------------------------|
| 5180:2-13-02 Voluntary Temporary Closure            | Compliant |                                         |
| Rule                                                | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-02 License Visible                        | Compliant |                                         |
| Rule                                                | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-02 Change of Location                     | Compliant |                                         |
| Rule                                                | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-02 Information in OCLQS                   | Compliant |                                         |
| Rule                                                | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-02 Provider Medical                       | Compliant |                                         |
| Rule                                                | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-03 Inspection Requirements                | Compliant |                                         |
| Rule                                                | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-04 Building Requirements for Type B Homes | Compliant |                                         |

| Rule                                                              | Status    | Documenting Statement(s), If applicable |
|-------------------------------------------------------------------|-----------|-----------------------------------------|
| 5180:2-13-04 Fire Safety for Type B Homes                         | Compliant |                                         |
| Rule                                                              | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-04 Flammable and Combustible Materials in a Type B Home | Compliant |                                         |
| Rule                                                              | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-04 Heaters in a Type B Home                             | Compliant |                                         |
| Rule                                                              | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-07 Staff Records                                        | Compliant |                                         |
| Rule                                                              | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-07 Provider Responsibilities                            | Compliant |                                         |
| Rule                                                              | Status    | Documenting Statement(s), If applicable |
| 5180:2-13 Written Policies and Procedures                         | Compliant |                                         |
| Rule                                                              | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-07 Type B Provider - Foster Parent                      | Compliant |                                         |
| Rule                                                              | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-08 Employee Requirements                                | Compliant |                                         |
| Rule                                                              | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-08 Child Care Staff Requirements                        | Compliant |                                         |
| Rule                                                              | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-08 Whistle Blower                                       | Compliant |                                         |

| Rule                           | Status    | Documenting Statement(s), If applicable |
|--------------------------------|-----------|-----------------------------------------|
| 5180:2-13-09 Background Checks | Compliant |                                         |

| Rule                         | Status    | Documenting Statement(s), If applicable |
|------------------------------|-----------|-----------------------------------------|
| 5180:2-13-10 Health Training | Compliant |                                         |

| Rule                                  | Status    | Documenting Statement(s), If applicable |
|---------------------------------------|-----------|-----------------------------------------|
| 5180:2-13-10 Professional Development | Compliant |                                         |

| Rule                      | Status    | Documenting Statement(s), If applicable |
|---------------------------|-----------|-----------------------------------------|
| 5180:2-13-11 Indoor Space | Compliant |                                         |

| Rule                       | Status    | Documenting Statement(s), If applicable |
|----------------------------|-----------|-----------------------------------------|
| 5180:2-13-11 Outdoor Space | Compliant |                                         |

| Rule                           | Status    | Documenting Statement(s), If applicable |
|--------------------------------|-----------|-----------------------------------------|
| 5180:2-13-11 Outdoor Equipment | Compliant |                                         |

| Rule                   | Status    | Documenting Statement(s), If applicable |
|------------------------|-----------|-----------------------------------------|
| 5180:2-13-11 Fall Zone | Compliant |                                         |

| Rule                        | Status    | Documenting Statement(s), If applicable |
|-----------------------------|-----------|-----------------------------------------|
| 5180:2-13-12 Safe Equipment | Compliant |                                         |

| Rule                                                 | Status    | Documenting Statement(s), If applicable |
|------------------------------------------------------|-----------|-----------------------------------------|
| 5180:2-13-12 Carbon Monoxide Detectors - Type B Only | Compliant |                                         |

| Rule              | Status    | Documenting Statement(s), If applicable |
|-------------------|-----------|-----------------------------------------|
| 5180:2-13-12 Pets | Compliant |                                         |

| Rule | Status | Documenting Statement(s), If applicable |
|------|--------|-----------------------------------------|
|------|--------|-----------------------------------------|

|                                                                |               |                                                |
|----------------------------------------------------------------|---------------|------------------------------------------------|
| 5180:2-13-13 Clean environment and equipment                   | Compliant     |                                                |
| <b>Rule</b>                                                    | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-13 Smoke Free                                        | Compliant     |                                                |
| <b>Rule</b>                                                    | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-13 Handwashing                                       | Compliant     |                                                |
| <b>Rule</b>                                                    | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-13 Toothbrushing                                     | Compliant     |                                                |
| <b>Rule</b>                                                    | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-14 Requirements for Field and Routine Trips          | Compliant     |                                                |
| <b>Rule</b>                                                    | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-14 Ratio and Supervision for Field and Routine Trips | Compliant     |                                                |
| <b>Rule</b>                                                    | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-14 Driver Requirements                               | Compliant     |                                                |
| <b>Rule</b>                                                    | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-14 Vehicle Inspections                               | Compliant     |                                                |
| <b>Rule</b>                                                    | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-14 Vehicle Requirements                              | Compliant     |                                                |
| <b>Rule</b>                                                    | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-15 Health Conditions                                 | Compliant     |                                                |
| <b>Rule</b>                                                    | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-15 Child Records Retention and Confidentiality       | Compliant     |                                                |



|                                                          |               |                                                |
|----------------------------------------------------------|---------------|------------------------------------------------|
|                                                          |               |                                                |
| <b>Rule</b>                                              | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-16 Medical, Dental, and General Emergency Plan | Compliant     |                                                |
| <b>Rule</b>                                              | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-16 Emergency Drills                            | Compliant     |                                                |
| <b>Rule</b>                                              | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-16 First Aid Kit/Standard Precautions          | Compliant     |                                                |
| <b>Rule</b>                                              | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-16 Communicable Diseases                       | Compliant     |                                                |
| <b>Rule</b>                                              | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-16 Incident/Injury                             | Compliant     |                                                |
| <b>Rule</b>                                              | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-17 Programming                                 | Compliant     |                                                |
| <b>Rule</b>                                              | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-17 Materials and Equipment                     | Compliant     |                                                |
| <b>Rule</b>                                              | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-18 Group Size and Ratios                       | Compliant     |                                                |
| <b>Rule</b>                                              | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-18 Attendance                                  | Compliant     |                                                |
| <b>Rule</b>                                              | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-19 Supervision                                 | Compliant     |                                                |

| Rule                                          | Status    | Documenting Statement(s), If applicable |
|-----------------------------------------------|-----------|-----------------------------------------|
| 5180:2-13-19 School Age Supervision           | Compliant |                                         |
| Rule                                          | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-21 Evening and Overnight Care       | Compliant |                                         |
| Rule                                          | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-20 Sleep and Nap Requirements       | Compliant |                                         |
| Rule                                          | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-19 Child Guidance                   | Compliant |                                         |
| Rule                                          | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-20 Crib and Playpen Requirements    | Compliant |                                         |
| Rule                                          | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-21 Sanitary Environment and Hygiene | Compliant |                                         |
| Rule                                          | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-22 Meals and Snacks                 | Compliant |                                         |
| Rule                                          | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-22 Food Handling                    | Compliant |                                         |
| Rule                                          | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-22 Fluid Milk                       | Compliant |                                         |
| Rule                                          | Status    | Documenting Statement(s), If applicable |
| 5180:2-13-23 Infant Daily Care                | Compliant |                                         |
| Rule                                          | Status    | Documenting Statement(s), If applicable |

|                                                 |               |                                                |
|-------------------------------------------------|---------------|------------------------------------------------|
| 5180:2-13-23 Infant Bottle and Food Preparation | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-23 Diapering                          | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-24 On-site Pools                      | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-24 Swimming Sites                     | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-24 Parent Permission for Swimming     | Compliant     |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 5180:2-13-25 Medication Requirements            | Compliant     |                                                |