

## 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>Pamela Carter                         | Program Number<br>000000985597980 | Program Type<br>FCC - Type B Home |
| Address<br>225 Border St.<br><br>Columbus<br>OH 43207 | County<br>FRANKLIN                |                                   |

| Inspection Information               |                                     |                          |                       |                                  |
|--------------------------------------|-------------------------------------|--------------------------|-----------------------|----------------------------------|
| Inspection Type<br>Compliance        |                                     | Inspection Scope<br>Full |                       | Inspection Notice<br>Unannounced |
| Inspection Date<br>09/08/2025        |                                     | Begin Time<br>10:15 AM   |                       | End Time<br>12:55 PM             |
| Reviewer:<br>Jamie Nunamaker-Dukuray |                                     |                          |                       |                                  |
| Summary of Findings                  |                                     |                          |                       |                                  |
| No. Rules Verified<br>68             | No. Rules with Non-compliances<br>2 |                          | No. Serious Risk<br>0 | No. Moderate Risk<br>0           |
|                                      |                                     |                          | No. Low Risk<br>2     |                                  |

| 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                                             |                  | 2          | 0         | 2     |
| <b>Total Under 2 Years</b>                                | 3                | 2          | 0         | 2     |
| Older Toddler                                             |                  | 0          | 0         | 0     |
| Preschool                                                 |                  | 3          | 0         | 3     |
| School Age                                                |                  | 1          | 0         | 1     |
| <b>Total Capacity/Enrollment</b>                          | 6                | 4          | 0         | 6     |

| Staff-Child Ratios at the Time of Inspection |                 |                |         |
|----------------------------------------------|-----------------|----------------|---------|
| Group                                        | Age Group/Range | Ratio Observed | Comment |
| Pamela Carter                                | Mixed Age Group | 1 to 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 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: 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 10, 12, 13, 16, 18 and 19 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: 10/08/2025

**Domain: 05 Health & Safety**

Rule: 5180:2-13-22 Meals and Snacks

Code: The program is required to post the current menu in a noticeable location that is accessible to parents and note any substitutions at the time of the change.

Findings: During the inspection, it was determined that the program's weekly menu did not meet the requirement as noted in number 3 below.

1. The menu was not posted.
2. The posted menu was not in a visible place readily accessible to parents.
3. The menu was not currently dated.

4. The entire menu was substituted.
5. At least one item on menu did not match what was served.
6. The meal or snack served did not match the posted menu.

Submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 10/08/2025

### 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 Safe Environment | 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     |                                                |
| <b>Rule</b>                                                    | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 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> |
| 5180:2-13-15 Child Medical and Enrollment Records              | 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     |                                                |

| Rule                                          | Status    | Documenting Statement(s), If applicable |
|-----------------------------------------------|-----------|-----------------------------------------|
| 5180:2-13-18 Attendance                       | Compliant |                                         |
| Rule                                          | Status    | Documenting Statement(s), If applicable |
| 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 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 |                                         |

|                                                 |               |                                                |
|-------------------------------------------------|---------------|------------------------------------------------|
|                                                 |               |                                                |
| <b>Rule</b>                                     | <b>Status</b> | <b>Documenting Statement(s), If applicable</b> |
| 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     |                                                |