

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 | Program Number | | Program Type | | |
| YOUTHLAND ACADEMY OF BEEKMAN | 2170012592 | | Child Care Center | | |
| | | | | | |
| Address | 70 | | County | | |
| 3277 BEEKMAN CINCINNATI | | | HAMILTON | | |
| ОН | | | | | |
| 45225 | | | | | |
| | | | | | |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ | | |
| 07/07/2017 | E | 228 | | | |
| Fire Inspection Approval Date | Food Service Risk Level | | | | |
| 08/05/2024 | Level III | | | | |

| Inspection Information | | | | | |
|------------------------|--------------------------------|------------------|-------------------|--------------|--|
| Inspection Type | Inspection So | соре | Inspection Notice | | |
| Annual | Full | | Unannounced | | |
| Inspection Date | Begin Time | | End Time | | |
| 12/27/2024 | 2/27/2024 9:00 AM | | 12:15 PM | | |
| Reviewer: | | | | | |
| Beverly McGlasson | | | | | |
| Summary of Findings | | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk | |
| 58 | 3 | 0 | 0 | 4 | |

| 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) | | 9 | 0 | 9 | |
| Young Toddler | | 9 | 0 | 9 | |
| Total Under 2 ½ Years | 65 | 18 | 0 | 18 | |
| Older Toddler | | 8 | 0 | 8 | |
| Preschool | | 26 | 0 | 26 | |
| School Age | | 8 | 0 | 8 | |
| Total Capacity/Enrollment | 185 | 42 | 0 | 60 | |

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



| Teddy Bear-Infant | 0 to < 12 months | 2 to 4 | |
|-------------------------|--------------------------|---------|---------------------|
| Teddy Bear-Infant | 0 to < 12 months | 2 to 5 | |
| Polar Bear-Preschool | 3 years to < 4 years | 1 to 9 | This ratio includes |
| | 970) 39 | | children from the |
| | | | Panda Bear and |
| | | | Polar Bear |
| | | | classrooms. |
| Polar Bear-Preschool | 3 years to < 4 years | 1 to 11 | This ratio includes |
| | | | children from the |
| | | | Panda Bear and |
| | | | Polar Bear |
| | | | classrooms. |
| Bear Cub-Young Toddler | 18 months to < 30 months | 1 to 5 | This ratio includes |
| | | | children from the |
| | | | Koala Bear and |
| | | | Bear Cub |
| | | | classrooms. |
| Bear Cub-Young Toddler | 18 months to < 30 months | 1 to 9 | This ratio was |
| | | | taken at nap time. |
| | | | It includes |
| | | | children from the |
| | | | Koala Bear and |
| | | | Bear Cub |
| | | | classrooms. |
| Grizzly Bear-School Age | School-Age to < 11 years | 1 to 8 | |
| Grizzly Bear-School Age | School-Age to < 11 years | 1 to 5 | |

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 | | |
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| Moderate Risk Non-Compliances | | | | |
|---|--|--|--|--|
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| No Moderate Risk Non-Compliances were observed during this inspection | | | | |
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| Low Bisk Non Compliances | | | | |
| Low Risk Non-Compliances | | | | |

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

<u>Code</u>: The program is required to maintain a record of the arrival and departure of each child. The program is also required to retain the original attendance record at the center for a period of one year.

<u>Finding</u>: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number 6 below:

- 1. No attendance record was being maintained.
- 2. The attendance record was not being consistently completed.
- 3. The record did not include the name of at least one child.
- 4. The record did not include the birth date of at least one child.
- 5. The record did not include the assigned group.
- 6. The record did not include the child's weekly schedule.
- 7. The record did not include the time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.
- 8. The original attendance record was not kept at the program for a period of one year.

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

Corrective Action Plan Due: 01/29/2025



Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

<u>Code</u>: 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.

<u>Finding</u>: 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 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).
- 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: 01/29/2025

Domain: 09 Children's Files

Rule: 5101:2-12-15 Child Medical and Enrollment Records

<u>Code</u>: The program is required to use the updated JFS 01234 "Child Enrollment and Health Information For Child Care" .



<u>Finding</u>: In review of 25% of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in number(s) 4, 7, 10, and 14 below.

- 1. No enrollment form was completed for at least one child
- 2. The current JFS 01234 was not completed for at least one child
- 3. Complete child information
- 4. Complete parent information
- 5. Complete emergency contact information
- 6. Complete physician information
- 7. Information regarding the parent list
- 8. Health information
- 9. Additional information for all boxes checked "yes"
- 10. Emergency transportation information
- 11. Parent/guardian's signature
- 12. Diapering Statement
- 13. Acknowledgement of Policies and Procedures
- 14. Enrollment form for at least one child was not updated by either the parent or the administrator
- 15. Enrollment form for at least one child was not signed by the administrator
- 16. 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.

Domain: 09 Children's Files

Rule: 5101:2-12-15 Child Medical and Enrollment Records

Code: The program is required to keep children's records confidential.

<u>Finding</u>: During the inspection, it was determined that children's records had not been kept confidential in that children's allergies/medical needs were posted in the classroom. 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: 01/29/2025



Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(s), If applicable |
|------------------------------------|-----------|---|
| Rule: 5101:2-12-02 License Posted | Compliant | Documenting Statement: The license was |
| | | in a location visible to parents as |
| | | required. |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-02 Current Information | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-03 Inspection | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Building Department | Compliant | |
| Inspection | | |
| 10. 20 | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Fire Inspection | Compliant | |
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| D. I. | C | D (' C) ((/) If I' I |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Food Service | Compliant | |
| Requirements | | |
| Dollar | Chalma | D |
| Rule 5101:2-12-07 Administrator | Status | Documenting Statement(s), If applicable |
| | Compliant | |
| Qualifications | | |
| D. I. | | D C |
| Rule 5101:2-12-07 Administrator | Status | Documenting Statement(s), If applicable |
| 0590 0590 0590 0500 0500 0 | Compliant | |
| Responsibilities/Requirements | | |
| D.J. | Chabara | Danis and a Chart |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-07 Written Program | Compliant | Documenting Statement: No changes |
| Policies and Procedures | | have been made to the written policies |
| | | and procedures since it was last approved |
| | | by this Department. |
| | | |
| D.J. | Chahara | D |
| Rule | Status | Documenting Statement(s), If applicable |



| Rule: 5101:2-12-08 Medical Statement | Compliant | Documenting Statement: All employees had current medical statements on file. |
|--|---------------------|---|
| Dula | Chahus | Decumenting Statement(s) If applicable |
| Rule 5101:2-12-08 Orientation Training & Whistle Blower Protection | Status Compliant | Documenting Statement(s), If applicable |
| Pula | Ctatus | Decree on the Chatanage (a) If a multiple |
| Rule: 5101:2-12-09 Background Check Requirements | Compliant Compliant | Documenting Statement(s), If applicable Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed. |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-10 Health Training Requirements | Compliant | Documenting Statement(s), it applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-10 Professional Development Requirements | Compliant | Documenting Statement(s), if applicable Documenting Statement: At the time of the inspection, all child care staff members had completed the required amount of professional development training. |
| | | |
| Rule 5101:2-12-11 Indoor Space Requirements | Status Compliant | Documenting Statement(s), If applicable |
| Rule | Status | Design anting Chatage anticol of a multiple |
| 5101:2-12-11 Separation of Children Under 2 1/2 Years | Compliant | Documenting Statement(s), If applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Space Requirements | Compliant | Documenting Statement(s), if applicable Documenting Statement: The quarterly playground inspections were completed and documented, as required. The most recent inspection report form was dated 11/11/2024. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Play Equipment | Compliant | Documenting Statement(s), if applicable Documenting Statement: The outdoor play space and equipment were not viewed during this inspection due to rain conditions however, the requirements were discussed. |



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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Fall Zones | Compliant | Boodinenting Statement(5), it approasts |
| 5101.2-12-11 Outdoor Flay Fair Zoiles | Compliant | |
| | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Equipment | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Sanitary Equipment and | Compliant | |
| Environment | - Compilation | |
| Livironinent | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Handwashing | Compliant | |
| Requirements | | |
| | Å) | · · · · · · · · · · · · · · · · · · · |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-13 Smoke Free | Compliant | 2 comment of the comm |
| \$2000 (4-10 COM-10 COM) | Compilant | |
| Environment | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-14 Transportation and Field | Compliant | |
| Trip Procedures | | |
| mp m occus. co | | |
| Rule | Status | Desumenting Statement(s) If applicable |
| 3,233,24 | | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-15 Medical/Physical | Compliant | Documenting Statement: During the |
| Care Plans | | inspection, the requirements of the rule |
| | | regarding caring for children with a |
| | | specific health condition were discussed. |
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| Rule | Status | Documenting Statement(s), If applicable |
| | Notice of the second se | Documenting Statement(s), it applicable |
| 5101:2-12-16 Medical, Dental, and | Compliant | |
| General Emergency Plan | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Emergency Drills | Compliant | Documenting Statement: Documentation |
| | 1 | for completed fire, weather, and |
| | | |
| | | emergency/lockdown drills was verified |
| | | during this inspection. |
| | 80 | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 First Aid/Standard | Compliant | Documenting Statement: During the |
| Precautions | | inspection, the program had complete |
| 1 recautions | | |
| | | first aid kits available as required. |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Management of | Compliant | |
| Communicable Disease | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Incident/Injury | Compliant | Documenting Statement: During the |
| Reporting | | inspection, the requirements of the rule |
| | | regarding reporting COVID were |
| | | discussed. |
| | | |
| 500 | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-17 Daily Schedule | Compliant | Documenting Statement: Daily schedules |
| | | were observed posted. |
| L | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-17 Materials and | Compliant | Documenting Statement: Sufficient |
| Equipment | Compilant | equipment was observed in all categories. |
| Equipment | | equipment was observed in an eategories. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Outdoor Play | Compliant | |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 License Capacity | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 Ratio | Compliant | Documenting Statement: Staff/child |
| Control Section (Control Section Control Contr | | ratios observed during the inspection |
| | | were in compliance. |
| | | · |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 Group Size | Compliant | |
| | | |
| D.J. | Chahira | Description Chapter and A. M. Complete L. |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Supervision | Compliant | |
| | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Child Guidance | Compliant | , |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-20 Cots and Napping | Compliant | |



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| Rule | Status | Documenting Statement/s) If applicable |
| Rule: 5101:2-12-20 Cribs | Compliant | Documenting Statement(s), If applicable Documenting Statement: All cribs were |
| Nuie. 5101.2-12-20 Cribs | Compilant | placed 2 feet apart. |
| | | placed 2 feet apart. |
| Rule: 5101:2-12-20 Cribs | Compliant | Documenting Statement: All cribs were |
| Maior STOTIL TE EO ONDS | Compilant | labeled with the assigned infant's name. |
| | | lassied with the assigned illiants indines |
| | · | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Meal and Snack | Compliant | |
| Requirements | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Fluid Milk Requirements | Compliant | bocumenting statement(s), it applicable |
| 5101.2-12-22 Hala Wilk Requirements | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Safe Food | Compliant | |
| Handling/Storage | | |
| - | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Infant Daily Care | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-23 Infant Bottle and Food | Compliant | |
| Preparation | - | |
| | · · | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-23 Diapering and | Compliant | Documenting Statement: Appropriate |
| Toilet Training | | diaper changing procedures were |
| | | observed during the inspection in the |
| | | infant room. |
| | L | I |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-25 Medication | Compliant | |
| Administration | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-08 Child Care Staff Member | Compliant | |
| Educational Requirements | | |
| Rule | Ctatus | Documenting Statement(s) If applies his |
| Rule: 5101:2-12-16 Written Disaster | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: The program's |
| Plan | Compnant | written disaster plan was reviewed during |
| T. IMIT | | the inspection and met the requirements |
| | | the hispection and met the requirements |



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