

# **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 <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. 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			
Big Adventures Learning Center Corp.	2200023409	Child Care Center			
Address		County			
3158 Glenmore Ave Cincinnati OH 45211		HAMILTON			

Inspection Information							
Inspection Type			Inspection Scope		Inspection Notice		
Complaint		Partial		Unannounced			
Reviewer(s) Beverly McGlasson Inspection Day		n Day	Begin Time		End Time		
	11/13/2024		24	12:45 PM		1:15 PM	
Summary of Findings							
No. Rules Verified	No. Rules with Non-cor	mpliances No. Serious Risk		(	No. Moderate Risk	No. Low Risk	
4	3		0		1	2	

Staff-Child Ratios at the Time of Inspection							
Group	Age Group/Range	Ratio Observed	Comment				
Infants	0 to < 12 months	1 to 6					
Toddlers	18 months to < 30 months	1 to 5					
Preschool 1	3 years to < 4 years	1 to 13	This ratio was taken at nap time in the Preschool 1 classroom. It includes children from the Preschool 1 and Preschool 2 groups.				



### **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:08 Staff Files**

Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements

Code: The program staff is required to have educational verification on file at the program or in the Ohio Professional Registry.

Allegation: It was alleged that an individual is working at the center as a child care staff member without having a high school diploma.

Determination: Substantiated

Findings: In review of the staff records, it was determined that verification of a high school education and enrollment in an early childhood education program was not on file nor verified in the Ohio Professional Registry for Child Care Staff Member(s) listed on the Employee Record Chart, as required. Submit the program's corrective action plan, which includes a copy of the verification of a high school education, to the Department to verify compliance with the requirements of this rule.

Risk Level: Low

Corrective Action Plan Due: 12/15/2024

# **Summary of Additional Non-Compliances**

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

#### **Moderate Risk Non-Compliances**

#### **Domain:01 Ratio & Supervision**

Rule: 5101:2-12-18 Ratio

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

Findings: During the inspection, a ratio of 1 child care staff member(s) for 6 children was determined to have occurred for the infant 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.

Corrective Action Plan Due: 12/15/2024

## **Low Risk Non-Compliances**

#### **Domain:01 Ratio & Supervision**

Rule: 5101:2-12-18 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 4 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: 12/15/2024

