



## 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 Kidz Klub Learning Center	Program Number 2210024882	Program Type Child Care Center
Address 8162 Colerain Ave Cincinnati OH 45231		County HAMILTON

Inspection Information			
Inspection Type Complaint		Inspection Scope Partial	Inspection Notice Unannounced
Reviewer(s) Beverly McGlasson	Inspection Day 07/21/2022	Begin Time 9:00 AM	End Time 11:00 AM

Summary of Findings				
No. Rules Verified 11	No. Rules with Non-compliances 8	No. Serious Risk 1	No. Moderate Risk 3	No. Low Risk 6

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Infant	0 to < 12 months	1 to 8	There was an employee in the classroom that did not meet the requirements for ratio.
Young Toddler	18 months to < 30 months	1 to 7	An employee was in the classroom at the time the ratio was observed.
Older Toddler	30 months to < 36 months	1 to 3	
Preschool	3 years to < 4 years	1 to 10	
School Age	School-Age to < 11 years	1 to 8	



### Complaint Allegations

If the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited. Ohio Administrative Code 5101: 2-12-03 details the process for submitting a request for a review if a program disagrees with a licensing finding. The request for review must be submitted within seven days from the receipt of the licensing report.

#### Domain:01 Ratio & Supervision

Rule: 5101:2-12-19 Supervision

Code: The program staff are not permitted to leave children unattended.

Allegation: It was alleged that supervision was absent when a child ran away from the center to a local gas station.

Determination: Substantiated

Findings: During the inspection, it was determined that children were not supervised while outside the program as noted in number 1 below:

1. Child(ren) left unattended outside the facility building.
2. Child(ren) left unattended outside the facility building more than once.
3. Child(ren) left unattended off the program's premises.
4. Child(ren) left unattended during a swimming activity.
5. Child(ren) left unattended in a vehicle.
6. Child(ren) left unattended inside the building and no adults were present in the building.
7. Other [ ].

Children must be supervised and within sight and hearing of a child care staff member at all times. 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: Serious

Corrective Action Plan Due: 07/26/2022

### 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 8 children was determined to have occurred for the Infant group when the situation in number 4 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: 08/20/2022

#### Domain:01 Ratio & Supervision

Rule: 5101:2-12-19 Supervision

Code: The program staff is required to supervise children in their assigned group by sight and hearing. Supervision includes being near enough to respond and reach children immediately and protecting them from harm.

Findings: During the inspection, it was determined that children were left unattended while inside the program as noted in number 1 below:

1. Child(ren) were left unattended once in the Older Toddler classroom.
2. Child(ren) were left unattended more than once.
3. Child(ren) left the group and were unattended.
4. Child care staff were using a baby monitor to supervise children.
5. Child care staff were using a walkie talkie to supervise children.
6. Child care staff were using mirrors to view children in another room.
7. Child care staff were using a video camera instead of physically being present in the room.
8. Other [ ].



Children must be supervised and within sight and hearing of a child care staff member at all times. 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: 08/20/2022

**Domain:08 Staff Files**

Rule: 5101:2-12-09 Background Check Requirements

Code: The program is required to have all staff request background checks as required.

Findings: In review of the staff records, it was determined that background checks were not requested for the person(s) listed on the Employee Record Chart as noted in number 1 and 2 below:

1. Submitting the request for a background check for child care in the OPR.
2. Submitting fingerprints electronically according to the process established by BCI.

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

Corrective Action Plan Due: 08/20/2022

**Low Risk Non-Compliances**

**Domain:01 Ratio & Supervision**

Rule: 5101:2-12-18 Attendance Records

Code: The program is required to have the information listed in rule on all attendance records.

Findings: During the inspection, it was determined that the attendance records did not include the required information listed in number(s) 1, 2, and 4 below:

1. The name of the child.
2. The birth date of the child.
3. The assigned group.
4. The child's weekly schedule.
5. The time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.

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

Corrective Action Plan Due: 08/20/2022

**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: 08/20/2022

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

Rule: 5101:2-12-16 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 3 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: 08/20/2022

#### **Domain:08 Staff Files**

Rule: 5101:2-12-07 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 number(s)

1 and 2 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: 08/20/2022

**Domain:08 Staff Files**

Rule: 5101:2-12-07 Administrator Responsibilities/Requirements

Code: The program is required to have a designated employee that has access to all records and handles emergencies in charge if the administrator is absent.

Findings: During the inspection, it was determined the role of the designee did not meet the requirements as noted in number 1 below:

1. Have access to all records;
2. Handle all emergencies.

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:08 Staff Files**

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to be completed and on file at the program.

Findings: In review of the staff records, it was determined a completed medical examination statement for the employee(s) listed on the Employee Record Chart was not on file, as required by this rule. Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 08/20/2022