

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 Deta | ils | |
|--------------------------------------|-------------------------|-----------------|-------------------|
| Program Name | Program Number | | Program Type |
| Fruitful Trees Learning Center "LLC" | 2220025630 | | Child Care Center |
| | | | |
| Address | | | County |
| 81 Price Rd Gahanna | | | FRANKLIN |
| OH 43230 | | | |
| | | | |
| | | | |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ |
| 06/04/2010 | E | 215 | |
| Fire Inspection Approval Date | Food Service Risk Level | | |
| 03/16/2023 | Exempt | | |

| Inspection Information | | | | |
|-------------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type | Inspection Se | соре | Inspection Notice | |
| Provisional | Full | | Unannounced | |
| Inspection Date 04/05/2023 | Begin Time S | 9:30 AM | End Time 4:44 PM | |
| Reviewer: | | | | |
| LISA NUTTER | | | | |
| Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58 | 9 | 0 | 1 | 8 |

| 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 | | 0 | 0 | 0 |
| Total Under 2 ½ Years | 0 | 0 | 0 | 0 |
| Older Toddler | | 0 | 0 | 0 |
| Preschool | | 14 | 0 | 14 |
| School Age | | 1 | 0 | 1 |
| Total Capacity/Enrollment | 76 | 15 | 0 | 15 |

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



| preschool | 3 years to < 4 years | 2 to 13 | |
|-----------|----------------------|---------|--|
| preschool | 3 years to < 4 years | 2 to 13 | |

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

Domain: 08 Staff Files

<u>Rule</u>: 5101:2-12-09 Background Check Requirements <u>Code</u>: The program is required to have staff update their background checks every five years as required.

<u>Finding</u>: In review of the staff records, it was determined that background checks were not updated every five years for the individual(s) listed on the Employee Record Chart as noted in number 1 below:

- 1. Owner
- 2. Administrator
- 3. Child care staff member, employee

Submit the program's corrective action plan, which includes a copy of the JFS 01176, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/05/2023



Low Risk Non-Compliances

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Sanitary Equipment and Environment

<u>Code</u>: The program is required to provide a clean restroom with the appropriate materials available.

<u>Finding</u>: During the inspection, it was determined that unsanitary conditions, as noted in number 6 below, were in the boys restroom:

- 1. There was no liquid soap.
- 2. There was no toilet paper.
- 3. There were no paper towels.
- 4. The toilet cleaning brush was accessible to the children.
- 5. The plunger was accessible to the children.
- 6. The toilet(s) were not flushed.
- 7. The trash was not emptied from the day before.
- 8. There was a strong urine odor.
- 9. Other [].

The restroom(s) must be kept sanitary at all times. 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 required at this time.

Corrective Action Plan Due: 05/05/2023

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

<u>Code</u>: The program is required to provide nonskid rugs and correct any floor hazard that may be unsafe.

<u>Finding</u>: During the inspection, it was determined that the program had an area rug that did not have a nonskid backing. A walking surface that is not hazardous to children must be maintained at the program. 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 required at this time.

Corrective Action Plan Due: 05/05/2023



Domain: 03 Postings & Equipment

<u>Rule</u>: 5101:2-12-16 Medical, Dental, and General Emergency Plan <u>Code</u>: The program is required to post and implement the JFS 01242 "Medical, Dental, and General Emergency Plan" when necessary.

<u>Finding</u>: During the inspection, it was determined the requirements for the JFS 01242 "Medical, Dental, and General Emergency Plan for Child Care" were not followed as noted in number 5 below:

- 1. The plan was not posted in each classroom.
- 2. The plan was not posted in other spaces used by children.
- 3. The name, address and telephone number of the program were not complete.

4. The location of first aid kit, fire extinguishers and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.

5. The telephone number for emergency squad, fire department, hospital, poison control program, public children services agency, local health department, local emergency management agency, and police department were not complete. (EMS number in Sunshine Room)

- 6. Location of children's records was not complete.
- 7. Emergency information including any medications or supplies needed in the event of an evacuation was not complete.

8. The current version of the prescribed form was not used.

9. The plan was not implemented when necessary in that [].

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

Corrective Action Plan Due: 05/05/2023

Domain: 04 Indoor/Outdoor Space

<u>Rule</u>: 5101:2-12-11 Outdoor Play Equipment <u>Code</u>: The program is required to anchor equipment to the ground as required.

<u>Finding</u>: During the inspection, it was determined that outdoor equipment as noted in number 4 below was not securely anchored as required:

- 1. Climber(s);
- Swing(s);
- 3. Slide(s);
- 4. Other: airplane



Although the equipment was not securely anchored, it was determined it does not present a risk of imminent danger of the structure collapsing when children are using the equipment. Submit the program's corrective action plan, which includes a statement that the equipment is now anchored or no longer being used, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/05/2023

Domain: 05 Health & Safety

<u>Rule</u>: 5101:2-12-22 Meal and Snack Requirements <u>Code</u>: The program is required to provide meals and snacks as outlined in rule.

<u>Finding</u>: During the inspection, it was determined the program did not provide the following required meal(s) and/or snack(s) for the program's hours of operation, as noted in number 2 below:

1. One meal and one snack.

2. One meal and two snacks or two meals and one snack. (more than 4 hours between opening of program and lunch-all parent provided meals)

3. Breakfast, two meals and two snacks.

4. One snack.

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 required at this time.

Corrective Action Plan Due: 05/05/2023

Domain: 08 Staff Files

Rule: 5101:2-12-10 Health Training Requirements

<u>Code</u>: The program is required to have all child care staff members complete training in child abuse and neglect recognition and prevention within sixty days of hire. Staff must complete training in first aid and CPR within the first ninety days of hire.

<u>Finding</u>: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in number 5 below:

- 1. Child abuse and neglect recognition and prevention training was not completed within sixty days of hire.
- 2. First aid training was not completed within ninety days of hire.
- 3. Cardiopulmonary resuscitation (CPR) training was not completed within ninety days of hire.



4. The child abuse and neglect recognition and prevention training was expired.

- 5. The first aid training was expired.
- 6. The CPR training was expired.

Refer to the Employee Record Chart for the name(s) of the child care staff member(s) who must complete the required health and safety training(s). Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/05/2023

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

<u>Code</u>: The program staff medicals are required to include all information.

<u>Finding</u>: In review of the staff records, it was determined that the medical statements for those employees listed on the Employee Record Chart did not include the required information listed below in number(s) 3A:

1. Date of examination;

2. Signature, business address, and telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination;

- 3. A statement that verifies that the employee is:
- a. Physically fit for employment in a program caring for children;
- b. Immunized against Tetanus, Diphtheria, Pertussis (Tdap);
- c. Immunized against Measles, Mumps, and Rubella (MMR);
- 4. Tuberculosis (TB) screening/test

a. Documentation of the screening process to determine if the employee resided in a country identified by the World Health Organization as having a high burden of TB and arrived in the United States within the five years preceding the date of application for employment;

- b. Results of a TB test for employees meeting both criteria in 4a;
- c. Results of additional testing for employees with a positive TB test;

d. Written statement, signed by a representative of the TB control unit, that the employee's TB is no longer infectious or the individual is receiving a TB treatment regimen for employees with a positive TB test.

Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, or TB results/documentation, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 05/05/2023



Domain: 08 Staff Files

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

<u>Code</u>: The program administrator is required to maintain current employee records in the Ohio Professional Registry.

<u>Finding</u>: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in numbers 3,5, and 6 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: 05/05/2023

Rules In-Compliance/Not Verified

| Rule Rule: 5101:2-12-02 License Posted | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: The license was in a location visible to parents as required. |
|---|---------------------|---|
| Rule 5101:2-12-02 Current Information | Status Compliant | Documenting Statement(s), If applicable |



| Rule | Status | Documenting Statement(s), If applicable |
|--|--|---|
| 5101:2-12-03 Inspection | Compliant | boodmenting statement(s), it approase |
| Requirements | | |
| · · · | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-04 Building Department | Compliant | |
| Inspection | | |
| | T | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Fire Inspection | Compliant | Documenting Statement: Although the |
| | | program had documentation of a current |
| | | fire inspection without any uncorrected |
| | | violations at the time of the licensing inspection, the program did not have the |
| | | fire inspection completed within 12 |
| | | months from the date of the last fire |
| | | inspection without any uncorrected |
| | | violations. Please ensure that fire |
| | | inspections are completed in accordance |
| | | with the rule requirements. |
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| and a second sec | and the second sec | The second |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Food Service | Status Compliant | Documenting Statement: The program |
| | | Documenting Statement: The program has obtained a food service exemption |
| Rule: 5101:2-12-04 Food Service | | Documenting Statement: The program |
| Rule: 5101:2-12-04 Food Service | | Documenting Statement: The program has obtained a food service exemption |
| Rule: 5101:2-12-04 Food Service | | Documenting Statement: The program has obtained a food service exemption |
| Rule: 5101:2-12-04 Food Service Requirements | Compliant | Documenting Statement: The program has obtained a food service exemption status from the local health department. |
| Rule: 5101:2-12-04 Food Service Requirements Rule | Compliant Status | Documenting Statement: The program has obtained a food service exemption status from the local health department. |
| Rule: 5101:2-12-04 Food Service Requirements Rule 5101:2-12-07 Administrator Qualifications | Compliant Status Compliant | Documenting Statement: The program has obtained a food service exemption status from the local health department. Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Food Service Requirements Rule 5101:2-12-07 Administrator Qualifications Rule | Compliant Status Compliant Status | Documenting Statement: The program has obtained a food service exemption status from the local health department. |
| Rule: 5101:2-12-04 Food Service Requirements Rule 5101:2-12-07 Administrator Qualifications Rule 5101:2-12-07 Written Program | Compliant Status Compliant | Documenting Statement: The program has obtained a food service exemption status from the local health department. Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Food Service Requirements Rule 5101:2-12-07 Administrator Qualifications Rule | Compliant Status Compliant Status | Documenting Statement: The program has obtained a food service exemption status from the local health department. Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Food Service Requirements Rule 5101:2-12-07 Administrator Qualifications Rule 5101:2-12-07 Written Program Policies and Procedures | Compliant Status Compliant Status Compliant | Documenting Statement: The program has obtained a food service exemption status from the local health department. Documenting Statement(s), If applicable Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Food Service Requirements Rule 5101:2-12-07 Administrator Qualifications Rule 5101:2-12-07 Written Program Policies and Procedures Rule | Compliant Status Compliant Status Compliant Status Status Status Status Status Status | Documenting Statement: The program has obtained a food service exemption status from the local health department. Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Food Service Requirements Rule 5101:2-12-07 Administrator Qualifications Rule 5101:2-12-07 Written Program Policies and Procedures Rule 5101:2-12-08 Child Care Staff Member | Compliant Status Compliant Status Compliant | Documenting Statement: The program has obtained a food service exemption status from the local health department. Documenting Statement(s), If applicable Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Food Service Requirements Rule 5101:2-12-07 Administrator Qualifications Rule 5101:2-12-07 Written Program Policies and Procedures Rule | Compliant Status Compliant Status Compliant Status Status Status Status Status Status | Documenting Statement: The program has obtained a food service exemption status from the local health department. Documenting Statement(s), If applicable Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Food Service Requirements Rule 5101:2-12-07 Administrator Qualifications Rule 5101:2-12-07 Written Program Policies and Procedures Rule 5101:2-12-08 Child Care Staff Member | Compliant Status Compliant Status Compliant Status Status Status Status Status Status | Documenting Statement: The program has obtained a food service exemption status from the local health department. Documenting Statement(s), If applicable Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Food Service Requirements Rule 5101:2-12-07 Administrator Qualifications Rule 5101:2-12-07 Written Program Policies and Procedures Rule 5101:2-12-08 Child Care Staff Member Educational Requirements | Compliant Status Compliant Status Compliant Status Compliant Status Compliant | Documenting Statement: The program has obtained a food service exemption status from the local health department. Documenting Statement(s), If applicable Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Food Service Requirements Rule 5101:2-12-07 Administrator Qualifications Rule 5101:2-12-07 Written Program Policies and Procedures Rule 5101:2-12-08 Child Care Staff Member Educational Requirements Rule | Compliant Status Compliant Status Compliant Status Compliant Status | Documenting Statement: The program has obtained a food service exemption status from the local health department. Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Food Service Requirements Rule 5101:2-12-07 Administrator Qualifications Rule 5101:2-12-07 Written Program Policies and Procedures Rule 5101:2-12-08 Child Care Staff Member Educational Requirements Rule Rule S101:2-12-08 Orientation | Compliant Status Compliant Status Compliant Status Compliant Status | Documenting Statement: The program has obtained a food service exemption status from the local health department. Documenting Statement(s), If applicable |
| Rule: 5101:2-12-04 Food Service Requirements Rule 5101:2-12-07 Administrator Qualifications Rule 5101:2-12-07 Written Program Policies and Procedures Rule 5101:2-12-08 Child Care Staff Member Educational Requirements Rule Rule S101:2-12-08 Orientation | Compliant Status Compliant Status Compliant Status Compliant Status | Documenting Statement: The program has obtained a food service exemption status from the local health department. Documenting Statement(s), If applicable |



| Rule | Status | Documenting Statement(s), If applicable |
|--------------------------------------|-----------|--|
| 5101:2-12-10 Professional | Compliant | |
| Development Requirements | | |
| | 1, | ÷ |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Indoor Space | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-11 Outdoor Space | Compliant | Documenting Statement: The quarterly |
| Requirements | | playground inspections were completed |
| | | and documented, as required. The most |
| | | recent inspection report form was dated |
| | | 1/5/23. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-11 Outdoor Play Fall Zones | Compliant | |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-12 Safe Equipment | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-13 Handwashing | Compliant | Documenting Statement: Staff and |
| Requirements | | children were observed washing hands as |
| nequirements | | required by the rule. |
| | | a of the construction of the second |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-13 Smoke Free | Compliant | Documenting Statement: A notice was |
| Environment | | observed posted stating that smoking is |
| | | prohibited at the program. |
| | 2 | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-15 Child Medical and | Compliant | Documenting Statement(s), if applicable |
| Enrollment Records | | the inspection, 25% of the children's |
| | | records were reviewed, and the records |
| | | were complete, as required by the rule. |
| | | were complete, as required by the rule. |
| | I | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-15 Medical/Physical | Compliant | Documenting Statement: The program |
| Care Plans | - 25 | had current information on the medical |
| | | status and the required treatment plan |
| | 1 | for the children with health conditions. |



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| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Emergency Drills | Compliant | Documenting Statement: Documentation |
| | | for completed fire, weather, and |
| | | emergency/lockdown drills was verified |
| | | during this inspection. |
| | | |
| | | |
| 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 |
| | | first aid kits available as required. |
| | 2 | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-16 Management of | Compliant | Documenting Statement: The JFS 08087 |
| Communicable Disease | | "Communicable Disease Chart" was |
| | | posted and was readily available to staff |
| | | and parents. |
| | | and parents. |
| | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Incident/Injury | Compliant | |
| Reporting | | |
| Rule | Charles | |
| | Status | Documenting Statement(s), If applicable |
| 5101:2-12-16 Written Disaster Plan | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Schedule | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Materials and | Compliant | |
| Equipment | , | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-17 Daily Outdoor Play | Compliant | |
| L | 1 | 1 |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 License Capacity | Compliant | Documenting Statement: The program |
| | | was operating within their license |
| | | capacity limits. |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| TMIC . | Julus | Documenting statement(s), it applicable |



| 5101:2-12-18 Ratio | Compliant | |
|---|-----------|--|
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-18 Group Size | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-18 Attendance Records | Compliant | Documenting Statement: During the inspection, attendance records were reviewed. Child Care Staff Members were viewed recording the attendance for each child upon arrival and departure. All attendance records met the requirements of the rule and were kept with the group at all times. |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-19 Supervision | Compliant | Documenting Statement: Child Care Staff |
| | | Members were supervising the children |
| | | and were able to intervene as needed. |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-19 Child Guidance | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-20 Cots and Napping | Compliant | |
| Dula | Charters | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Fluid Milk Requirements | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-12-22 Safe Food Handling/Storage | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5101:2-12-25 Medication Administration | Compliant | Documenting Statement: The program had complete written documentation for administering medication or food supplements. |