



## 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 Kids with vision learning center	Program Number 2220026143	Program Type Child Care Center	
Address 1787 E. LIVINGSTON AVE COLUMBUS OH 43205		County FRANKLIN	
Building Approval Date 07/19/2022	Use Group/Code E	Occupancy Limit 50	Maximum Under 2 ½
Fire Inspection Approval Date 04/30/2022	Food Service Risk Level Level III		

Inspection Information		
Inspection Type Provisional	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 06/07/2023	Begin Time 3:30 PM	End Time 6:40 PM
Inspection Date 06/08/2023	Begin Time 10:00 AM	End Time 11:00 AM
Reviewer: STEPHANIE WALTERS		
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Summary of Findings				
No. Rules Verified 58	No. Rules with Non-compliances 13	No. Serious Risk 0	No. Moderate Risk 0	No. Low Risk 16

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)		12	0	12
Young Toddler		7	0	7
<b>Total Under 2 ½ Years</b>	31	19	0	19
Older Toddler		0	0	0
Preschool		11	2	13
School Age		11	0	11



<b>Total Capacity/Enrollment</b>	59	22	2	43
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<b>Staff-Child Ratios at the Time of Inspection</b>			
<b>Group</b>	<b>Age Group/Range</b>	<b>Ratio Observed</b>	<b>Comment</b>
Toddler/Preschool	3 years to < 4 years	1 to 5	At arrival, Combined with Prek and School Age outside on playground.
Toddler/Preschool	3 years to < 4 years	1 to 4	combined with Prek and School age in classroom
Infants 6 weeks-18 months	0 to < 12 months	2 to 6	At arrival, Combined with Infants 18-30 months
Infants 6 weeks-18 months	12 months to < 18 months	1 to 3	Combined with 18-30 months

**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**



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**Low Risk Non-Compliances**

**Domain: 02 Safe & Sanitary Environment**

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

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

Finding: During the inspection, it was determined that unsanitary conditions, as noted in number(s) 4, 5, 6 below, were in the School age and Preschool/Toddler Restrooms 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. School age and Preschool/Toddler Restrooms
5. The plunger was accessible to the children. School age and Preschool/Toddler Restrooms
6. The toilet(s) were not flushed. Preschool/Toddler Restroom
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. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/08/2023

**Domain: 02 Safe & Sanitary Environment**

Rule: 5101:2-12-12 Safe Equipment

Code: The program is required to use straps on equipment that is manufactured with straps.



Finding: During the inspection, it was determined that the following equipment was not used according to manufacturer's guidelines as noted in number(s) 2 below:

1. The straps were missing on the [ ].
2. The straps were attached, but were not used on the high chair.
3. The straps were attached and were used, but were not used in a safe manner.
4. Manufacturer's guidelines for the [ ] were not followed in that [ ].

Provide staff training. Submit the program's corrective action plan, which includes a statement that training has been provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/08/2023

**Domain: 04 Indoor/Outdoor Space**

Rule: 5101:2-12-11 Outdoor Play Fall Zones

Code: The program is required to provide adequate fall surface for the outdoor play space.

Finding: During the inspection it was determined that the fall surface material used as noted in number(s) 1 below had not been checked, and the material turned over or raked as needed, as required by the rule:

1. Mulch;
2. Woodchips;
3. Sand;
4. Pea gravel;
5. Gravel;
6. Shredded tires;
7. Other [ ].

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

Corrective Action Plan Due: 07/08/2023

**Domain: 04 Indoor/Outdoor Space**

Rule: 5101:2-12-11 Outdoor Space Requirements

Code: The program is required to have an outdoor play space free from general hazards.



Finding: During the inspection, it was determined that hazardous conditions existed in the outdoor play area, as noted in number(s) 6 below:

1. There was broken glass.
2. There were tall weeds.
3. There was poison ivy.
4. There were tree branches.
5. There was mold visible.
6. There were thistles with pricklers.
7. There were bird droppings.
8. There were bolts with more than two threads exposed along a fence line or gate on a playground.
9. The sandbox was contaminated.
10. Other [ ].

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

Corrective Action Plan Due: 07/08/2023

**Domain: 05 Health & Safety**

Rule: 5101:2-12-16 First Aid/Standard Precautions

Code: The program is required to have a first aid kit onsite.

Finding: During the inspection, it was determined first aid kit(s) at the program had missing, or expired, items that are required by appendix A of this rule to be contained in a first aid kit, as noted in number(s) 10, 12 below:

1. The program did not have a first aid kit [onsite, on the vehicle, on a field trip].
2. One roll of hypoallergenic first-aid tape.
3. Individually wrapped sterile gauze squares in assorted sizes.
4. Sterile adhesive bandages in assorted sizes.
5. Tweezers.
6. Gauze rolled bandage.
7. Triangular bandage.
8. Rounded end scissors.
9. Tooth preservation system or fresh chilled liquid milk in which to transport a lost permanent tooth, including a written reference indicating location of the refrigerator/freezer where milk is stored if a tooth preservation system is not part of the first aid kit (for programs serving school age children only).
10. A working digital thermometer. for the Front room First Aid Kit
11. Disposable non-latex gloves.
12. A working flashlight. for the Front Room First Aid Kit
13. An instant cold pack that has not been activated or ice, including a written reference indicating location of the refrigerator/freezer where the ice is stored if an instant cold pack is not part of the first aid kit.
14. Sealable leak-proof plastic bags in assorted sizes or double bagged plastic bags that can be securely tied for materials soiled with blood or bodily fluids.



15. Pocket mask or face shield, appropriate for all ages of children in care, for cardiopulmonary resuscitation (CPR) administration.
16. Soap or waterless sanitizer (field trip or transporting away from the program only).
17. Bottled water (field trip or transporting away from the program only).

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

Corrective Action Plan Due: 07/08/2023

**Domain: 05 Health & Safety**

Rule: 5101:2-12-16 Emergency Drills

Code: The program is required to complete fire drills, weather drills, and emergency/lockdown drills appropriately.

Finding: During the inspection, it was determined that the required drills were not completed for item number(s) 1, 2 below:

1. Monthly fire drills.
2. Monthly weather emergency drills (March through September).
3. Emergency/lockdown drills in each quarter of the calendar year.

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

Corrective Action Plan Due: 07/08/2023

**Domain: 07 Diapering & Infant Care**

Rule: 5101:2-12-20 Cribs

Code: The program is required to label all cribs.

Finding: During the inspection, it was determined that at least one crib was not labeled with the child's name, as required by this rule. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/08/2023



**Domain: 07 Diapering & Infant Care**

**Rule:** 5101:2-12-23 Infant Bottle and Food Preparation

**Code:** The program is required to obtain written instructions from parents regarding feeding their infant.

**Finding:** During the inspection, it was determined that written instructions for feeding the infants noted on the Children Record Review were missing information as noted in number(s) 1 below:

1. Written instructions were not on file.
2. Type of food and/or formula/breast milk was missing.
3. Amount of food and/or formula/breast milk was missing.
4. Feeding times or frequency of feedings was missing.
5. The written instructions on file had not been updated.

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

Corrective Action Plan Due: 07/08/2023

**Domain: 08 Staff Files**

**Rule:** 5101:2-12-08 Orientation Training & Whistle Blower Protection

**Code:** The program is required to have staff complete the online staff orientation training.

**Finding:** In review of the staff records, it was determined that child care staff member(s) had not completed the online orientation training as noted in number(s) 1 below:

1. Within 30 days of starting employment at the program as a child care staff member.
2. No documentation of completing the training after December 31, 2016.
3. Completion of the training was not verified in the OPR.

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

Corrective Action Plan Due: 07/08/2023



**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.

Finding: 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: 07/08/2023

**Domain: 08 Staff Files**

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to include all information.

Finding: 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) 2.

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: 07/08/2023





**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.

Finding: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 5, 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: 07/08/2023

**Domain: 08 Staff Files**

Rule: 5101:2-12-08 Orientation Training & Whistle Blower Protection

Code: The program is required to have staff complete the online staff orientation training before they are permitted to have sole responsibility of children.

Finding: During the inspection, it was determined that Child Care Staff Member(s) listed on the Employee Record Chart had sole responsibility of children and had not completed the online orientation, as required by this rule. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/08/2023



**Domain: 08 Staff Files**

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

Code: 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.

Finding: 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(s) 1 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: 07/08/2023

**Domain: 09 Children's Files**

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

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

Finding: 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) 1, 4, 6, 10, 11, 12, 13 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 [ ]

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

Corrective Action Plan Due: 07/08/2023

**Domain: 09 Children's Files**

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

Code: The program is required to have a completed medical on file at the program for each child enrolled.

Finding: In review of 25% of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in number(s) 1, 7 below:

1. No medical was on file for at least one child
2. Medical(s) on file was not updated every 13 months
3. Medical(s) were missing child's name and date of birth
4. Medical(s) were missing the date of the medical examination
5. The date of the exam was more than 13 months prior to the date the form was signed.
6. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care
7. Medical(s) were missing the signature, business address and telephone number of the physician, physician's assistant(PA), advance practice nurse (APN) or certified nurse practitioner (CNP) who examined the child
8. Medical(s) were missing a record of immunizations the child has had specifying month, day and year
9. Medical(s) were missing a statement from the physician, PA, APN, or CNP that the child has been immunized or is in the process of being immunized against the diseases required by division 5104.014 of the Revised Code and found in appendix A to this rule
10. Medical(s) were missing a statement from the child's parent or guardian that he or she has declined to have the child immunized against the disease for reasons of conscience, including religious convictions
11. Other [ ]



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

Corrective Action Plan Due: 07/08/2023

**Rules In-Compliance/Not Verified**

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 License Posted	Compliant	
5101:2-12-02 Current Information	Compliant	
5101:2-12-03 Inspection Requirements	Compliant	
5101:2-12-04 Building Department Inspection	Compliant	
5101:2-12-04 Fire Inspection	Compliant	
Rule: 5101:2-12-04 Food Service Requirements	Compliant	Documenting Statement: The food service license was observed posted. Following is the audit number and date of expiration: 9967674 3/1/24.
5101:2-12-07 Administrator Qualifications	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Written Program Policies and Procedures	Compliant	
Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements	Compliant	Documenting Statement: All Child Care Staff Members had verification of educational requirements on file at the program.
Rule: 5101:2-12-09 Background Check Requirements	Compliant	Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed.
Rule: 5101:2-12-10 Professional Development Requirements	Compliant	
5101:2-12-11 Indoor Space Requirements	Compliant	
5101:2-12-11 Separation of Children Under 2 1/2 Years	Compliant	
5101:2-12-11 Outdoor Play Equipment	Compliant	
5101:2-12-12 Safe Environment	Compliant	
5101:2-12-13 Handwashing Requirements	Compliant	
5101:2-12-13 Smoke Free Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable



Rule: 5101:2-12-15 Medical/Physical Care Plans	Compliant	Documenting Statement: At the time of the inspection, there were no children currently enrolled who had health conditions.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	Documenting Statement: On the day of the inspection, the complete prescribed JFS 01242 "Medical, Dental, and General Emergency Plan For Child Care" were posted in the program as required.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-16 Management of Communicable Disease	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-16 Incident/Injury Reporting	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-16 Written Disaster Plan	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-17 Daily Schedule	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-17 Materials and Equipment	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-17 Daily Outdoor Play	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-18 License Capacity	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5101:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child ratios observed during the inspection were in compliance.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>



5101:2-12-18 Group Size	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
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.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-19 Supervision	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-19 Child Guidance	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-20 Cots and Napping	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-22 Meal and Snack Requirements	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-22 Fluid Milk Requirements	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-22 Safe Food Handling/Storage	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-23 Infant Daily Care	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-23 Diapering and Toilet Training	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5101:2-12-25 Medication Administration	Compliant	



Department of Education  
Department of Job and Family Services

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