

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		Prog	Program Type	
Medo Childcare LLC	2220027094		Chile	d Care Center	
Address	5		Cou	nty	
1033 Old Henderson Rd Columbus			FRA	FRANKLIN	
OH 43220					
Building Approval Date	Use Group/Code	Occupancy Limit		Maximum Under 2 ½	
000		77			
Fire Inspection Approval Date	Food Service Risk Level				

Inspection Information				
Inspection Type Inspection Sco		cope	Inspection Notice	
Pre-license	Full		Unannounced	
Inspection Date 12/15/2022	2001111110 2120 1111			
Reviewer:				
Bradie McAfee				
Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
55	13	0	3	15

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
Older Toddler		0	0	0
Preschool		0	0	0
School Age		0	0	0
Total Capacity/Enrollment		0	0	0

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

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
Scrious hisk Non-compliances
No Serious Risk Non-Compliances were observed during this inspection

Moderate Risk Non-Compliances

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>: Children in care shall be protected from any items and conditions which threaten their health, safety, and well-being. During the inspection, it was determined the program did not protect children from an unsafe item, condition or equipment noted in numbers 2 below:

- 1. Closed ended pull cord(s) on the window blind(s)
- 2. Extension cord(s); electrical cord(s) attached to an object that could result in a severe injury if pulled. (AC cord in Infants)
- 3. Stacked tables.
- 4. Folding tables.
- 5. Matches and/or a lighter.
- 6. Power tool(s).
- 7. Live wires.
- 8. Stove(s) that are either on or able to be turned on by a child.
- 9. Asbestos.
- 10. Traffic.

- 11. A body of water.
- 12. A well.
- 13. Environmental hazard(s) confirmed by local authorities having jurisdiction over the hazard.
- 14. A crockpot used to heat bottles.
- 15. Immediate access to a knife.
- 16. Large or heavy pieces of shelving units are not securely anchored to the wall.
- 17. Other [].

Any hazardous equipment must be removed, replaced, or repaired and any hazardous condition must be corrected and must be made inaccessible to children. Provide staff training. Submit the program's corrective action plan, which includes a statement that the item or condition has been removed and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/20/2023

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

<u>Code</u>: The program is required to store chemicals and machinery in a place that is inaccessible to children. The program is required to provide an outdoor play area away from machinery in operation.

<u>Finding</u>: During the inspection, a potentially hazardous item or toxic substance was used or stored in the where children had access to it, as noted in number 9 below.

- 1. Bleach.
- 2. Cleaning agent.
- 3. Fish tank chemicals.
- 4. Gasoline.
- 5. Pesticide.
- 6. Poison, including insect/rodent poison.
- 7. Flammable substance.
- 8. Windshield washer fluid.
- 9. Aerosol cans. (Pre-K 1 classroom shelf and restroom shelf)
- 10. A lawn mower.
- 11. A weed trimmer.
- 12. Hedge trimmers.
- 13. A snow blower.
- 14. Other potentially hazardous substance, equipment or machinery: [].

Provide staff training. Submit the program's corrective action plan, which includes a statement that the potentially hazardous substance or item is no longer accessible to children and/or children will not be outside when machinery is in use and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/20/2023



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.

<u>Finding</u>: 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 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, which includes a copy of the JFS 01176, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/20/2023

Low Risk Non-Compliances

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>: Children in care shall be protected from any items and conditions which threaten their health, safety, and well-being. During the inspection, it was determined that children were not protected from the following item(s) or condition(s) which may threaten their health, safety, or well-being as noted in numbers 9 and 12 below:

- 1. Open pull cords that are not closed loop.
- 2. Telephone cords.
- 3. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
- 4. Stacked chairs.
- 5. Employee(s) purse(s).
- 6. Diaper bags.

- 7. Television not securely anchored.
- 8. Small or lightweight pieces of shelving units are not securely anchored to the wall.
- 9. Smoke detector needing batteries replaced.
- 10. Staff member stepped over a barrier/gate while holding a child.
- 11. Emergency exits were blocked by the following classroom furniture: [].
- 12. Other: Toys that were stored in bags. (Toddler)

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: 01/20/2023

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 numbers 3, 4, 5 and 6 below, were in the restrooms

- 1. There was no liquid soap.
- 2. There was no toilet paper.
- 3. There were no paper towels. (Toddler)
- 4. The toilet cleaning brush was accessible to the children. (Toddler, School Age, Pre-K)
- 5. The plunger was accessible to the children. (Toddler)
- 6. The toilet(s) were not flushed. (Toddler)
- 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: 01/20/2023

Domain: 03 Postings & Equipment

Rule: 5101:2-12-17 Daily Schedule

<u>Code</u>: The program is required to have the daily program schedule posted in all required areas.

<u>Finding</u>: During the inspection, it was determined that a copy of the daily program schedule was not posted in each classroom as required. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/20/2023

Domain: 03 Postings & Equipment

Rule: 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 1 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.
- 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: 01/20/2023

Domain: 03 Postings & Equipment

<u>Rule</u>: 5101:2-12-16 Medical, Dental, and General Emergency Plan Code: The program is required to post the fire and weather plans.

<u>Finding</u>: During the inspection, it was determined that the following information was not posted for item numbers 1 and 2 below:

- 1. Fire alert plan was missing written instructions for fire emergencies.
- 2. Weather alert plan was missing written instructions for weather emergencies.
- 3. Weather alert plan was missing a diagram indicating evacuation routes.

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

Corrective Action Plan Due: 01/20/2023

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Play Equipment

<u>Code</u>: The program is required to provide equipment that does not pose a safety risk.

<u>Finding</u>: During the inspection, it was determined that outdoor play equipment was unsafe as noted in number 6 below:

- 1. There was rust exposed;
- 2. There was protruding bolts;
- 3. There were cracks;
- 4. There were holes;
- 5. There was splintering wood; (remove rotting stumps from splash pad)
- 6. There were sharp edges or points; (Plastic broken on standing round swing)
- 7. There were lead hazards:
- 8. There were toxic substances;
- 9. There were tripping hazards;
- 10. There was chipped and/or peeling paint;
- 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: 01/20/2023

Domain: 04 Indoor/Outdoor Space

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

<u>Code</u>: The program is required to have an outdoor play space free from debris.

<u>Finding</u>: During the inspection, it was determined that the outdoor area was littered with debris. 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. (Remove large items including ladder and plywood on large playground, hedge trimmers on splash pad, broken umbrella on infant playground, in addition to litter)

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 immediate risk.

<u>Finding</u>: During the inspection, it was determined that an area was used which was not protected from traffic and other hazards by a fence in good repair, or other barrier. Although the fence or natural barrier was not meeting the rule requirements, it was determined to not present an immediate risk for a child to be able to leave the playground. The fence or gate was not in good repair and/or being used inappropriately as noted in number 7 below:

- 1. The fencing had missing slat boards.
- 2. The fencing was broken.
- 3. The fencing was loose.
- 4. The fencing was rotting.
- 5. The gate was broken and did not close.
- 6. The gate was locked.
- 7. The latch on the gate was broken. (School Age Gate and Splash Pad gate leading to pump area)
- 8. The latch was easily opened by children on the playground.
- 9. The gate had no latch.

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

Corrective Action Plan Due: 01/20/2023

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.

<u>Finding</u>: 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 numbers 3, 6, 9, 10 and 14 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. (Toddler)
- 4. Sterile adhesive bandages in assorted sizes.
- 5. Tweezers.
- 6. Gauze rolled bandage. (Pre-K 2)
- 7. Triangular bandage.
- 8. Rounded end scissors. (Pre-K 2)
- 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). (Pre-K 2 expired)
- 10. A working digital thermometer. (Toddler)
- 11. Disposable non-latex gloves.
- 12. A working flashlight.
- 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. (Toddler and Pre-K 2)
- 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: 01/20/2023

Domain: 07 Diapering & Infant Care

Rule: 5101:2-12-20 Cribs

<u>Code</u>: The program is required to provide a safe and sufficient barrier to separate the play and sleeping space.

<u>Finding</u>: During the inspection, it was determined that the barrier between the play and sleeping space did not meet the requirements as noted in number 4 below:

1. No barrier had been provided

- 2. The barrier did not prevent the infants from entering the sleeping area.
- 3. The barrier was not safe.
- 4. The barrier was not sturdy.
- 5. The barrier impaired staff's ability to see and hear all sleeping infants in their cribs.
- 6. The barrier was inadequate.
- 7. 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.

Corrective Action Plan Due: 01/20/2023

Domain: 07 Diapering & Infant Care

Rule: 5101:2-12-20 Cribs

<u>Code</u>: The program is required to provide clean sheets for all cribs that are not too large or too small for the crib.

<u>Finding</u>: During the inspection, it was determined that sheets did not meet the rule requirement as noted in number 2 below:

- 1. At least one crib did not have a sheet.
- 2. At least one sheet was too large.
- 3. At least one sheet was too small.
- 4. At least one sheet was torn.
- 5. Crib sheets were not clean.

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

Corrective Action Plan Due: 01/20/2023

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.

<u>Finding</u>: 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: 01/20/2023

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.

<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 number 4, 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: 01/20/2023

Domain: 08 Staff Files

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

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

<u>Finding</u>: In review of the staff records, it was determined that verification of a high school education 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.

Corrective Action Plan Due: 01/20/2023

Domain: 08 Staff Files

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

Code: The program is required to maintain a staff schedule with coverage of the required health trainings.

<u>Finding</u>: In review of the staff records, it was determined the program did not have at least one child care staff member present/scheduled to be present during all hours of operation with currently valid documentation for the training(s) listed in number(s) [] below:

- 1. First Aid child care staff members scheduled during the hours of and had expired training
- 2. First Aid child care staff members scheduled during the hours of 6 AM and 12 PM did not have verification of completion of First Aid
- 3. First Aid trained child care staff member was not present in each building used by the program.
- 4. CPR child care staff members scheduled during the hours of [] and [] had expired training
- 5. CPR child care staff scheduled during the hours of 6 AM and 12 PM did not have verification of completion of CPR
- 6. CPR trained child care staff member was not present in each building used by children
- 7. CPR training taken by staff was not appropriate for all ages and developmental levels of the children in care
- 8. CPR audiovisual or electronic media training taken by staff did not include an in-person component of the training
- 9. Communicable Disease child care staff members scheduled during the hours of [] and [] had expired training
- 10. Communicable Disease child care staff scheduled during the hours of 6 AM and 10 AM had not taken Communicable Disease training
- 11. Communicable Disease trained child care staff member was not present in each building used by the program
- 12. Child Abuse child care staff members scheduled during the hours of [] and [] had expired training
- 13. Child Abuse child care staff scheduled during the hours of 6 AM and 10 AM had not taken Child Abuse training
- 14. Child Abuse trained child care staff was not in each building used by the program

Refer to the Employee Record Chart for specific details. Submit the program's corrective action plan, which includes verification of complete coverage for any training listed, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/20/2023



Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-02 Current Information	Compliant	
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		
Rule	Status	Decumenting Statement(s) If applicable
		Documenting Statement(s), If applicable
5101:2-12-04 Fire Inspection	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-04 Food Service	Compliant	
Requirements		
1	T	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator	Compliant	
Qualifications		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Written Program	Compliant	
Policies and Procedures		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-08 Orientation Training &	Compliant	Documenting Statement(S), it applicable
Whistle Blower Protection	Compliant	
WITHSHE BIOWET I TOLECTION		
Rule	Status	Documenting Statement(s), If applicable
		Dodamonano Data Comencia, in apprioable

5101:2-12-10 Professional	Not Verified	
Development Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Separation of Children	Compliant	Documenting Statement(3), ii applicable
Under 2 1/2 Years	Compilation	
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
5101:2-12-13 Smoke Free	Compliant	
Environment		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-15 Child Medical and	Not Verified	
Enrollment Records		
		Description of the continuous
Rule 5101:2-12-16 Management of	Status	Documenting Statement(s), If applicable
Communicable Disease	Compliant	
Commandatio Discuss		
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Written Disaster Plan	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-25 Medication	Not Verified	
Administration		