

Family Child Care 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	A
Program Name	Program Number		Program Type
Brainiac's Enrichment Center	2220027239		FCC - Type A Home
Address			County
2294 Wolff Street			HAMILTON
Cincinnati			
OH 45211			
Building and Fire Approvals apply to Type A Family Chil	d Care Homes only		
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
1780 No. 60	SHED		
Fire Inspection Approval Date			
05/08/2024			

	Insp	ection Information			
Inspection Type	Inspection So	cope	Inspection Notice		
Compliance	Full	OM.	Unannounced		
Inspection Date	Begin Time		End Time		
10/20/2025	11:00 AM	11:00 AM		11:55 AM	
Reviewer:					
Eryn Hunt					
	Sui	mmary of Findings	Sy.		
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk	
66	10	0	1	10	

License Capacity and Enrollment at the Time of Inspection				nspection
Age Group	License Capacity	Enrollment		
	Totals	Full Time	Part Time	Total
Infant (Birth to < 18 m)		1	0	1
Young Toddler		0	0	0
Total Under 2 Years	6	1	0	1
Older Toddler		0	0	0
Preschool		0	0	0
School Age		0	0	0
Total Capacity/Enrollment	12	0	0	1

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
10/20/25		1 to 1	





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 5180:2-12-03 and 5180:2-13-03 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

Rule: 5180:2-13-09 Background Checks

Code: The program is required to receive a preliminary approval from ODJFS prior to allowing an individual to engage in assigned duties or be near children.

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

- 1. The request for a background check for child care was not submitted in the OPR.
- 2. The fingerprints were not submitted electronically according to the process established by BCI.
- 3. The individual(s) had engaged in assigned duties or were near children and preliminary approval from ODJFS was not on file.
- 4. Background checks were not updated every five years.

Submit the program's corrective action plan, which includes a copy of the JFS 01176, or a copy of the preliminary approval or a statement that the individual(s) are no longer engaged in assigned duties and are not near children until the preliminary approval has been received, to the Department to verify compliance with the requirements of this rule.



Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5180:2-13-04 Fire Inspections for Type A Homes

Code: The program is required to have a fire approval completed within 12 months from the date of the last fire approval.

Findings: The program had not been inspected and approved within 12 months from the date of the last fire approval by the local fire department, as required. Secure and submit an updated fire approval as part of the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 11/20/2025

Domain: 01 Ratio & Supervision

Rule: 5180:2-13-18 Attendance

Code: The program is required to maintain a record of the arrival and departure of each child. The program is also required to retain the original attendance record at the program for a period of one year.

Findings: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number(s) 2 below:

- 1. No attendance record was being maintained.
- 2. The attendance record was not being consistently completed.
- 3. The record did not include the name of at least one child.
- 4. The record did not include the birth date of at least one child.
- 5. The record did not include the assigned group.
- 6. The record did not include the child's weekly schedule.
- 7. The record did not include the time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.
- 8. The original attendance record was not kept at the program for a period of one year.

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



Domain: 03 Postings & Equipment

Rule: 5180:2-13-16 Medical, Dental, and General Emergency Plan

Code: The program is required to post the completed JFS 01242 "Medical, Dental, and General Emergency Plan for Child Care" and implement as required by rule.

Findings: During the inspection, it was determined the requirements for the JFS 01242 "Medical, Dental and General Emergency Plan" were not followed as noted in number(s) 1 below:

- 1. The plan was not posted on each level of the home used for child care.
- 2. The name, address and telephone number of the program were not complete.
- 3. The location of the first aid kit, fire extinguisher and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.
- 4. 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.
- 5. Location of children's records was not complete.
- 6. Emergency information including any medications or supplies needed i the event of an evacuation was not complete.
- 7. The current version of the prescribed form was not used.
- 8. 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: 11/20/2025

Domain: 05 Health & Safety

Rule: 5180:2-13-22 Meals and Snacks

Code: The program is required to post the current menu in a noticeable location that is accessible to parents and note any substitutions at the time of the change.

Findings: During the inspection, it was determined that the program's weekly menu did not meet the requirement as noted in number(s) 3 below.

- 1. The menu was not posted.
- 2. The posted menu was not in a visible place readily accessible to parents.
- 3. The menu was not currently dated.
- 4. The entire menu was substituted.
- 5. At least one item on menu did not match what was served.
- 6. The meal or snack served did not match the posted menu.

Submit the program's corrective action plan to verify compliance with the requirement of the rule.



Domain: 05 Health & Safety

Rule: 5180:2-13-16 Emergency Drills

Code: The program is required to complete and document the required drills.

Findings: During the inspection, it was determined that the required drills were not completed for item number(s) 2 3 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 verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/20/2025

Domain: 06 Program Information

Rule: 5180:2-13-14 Requirements for Field and Routine Trips

Code: The program is required to obtain written parental permission before leaving the premises and retain the forms for at least one year from the date of the trip. Routine trip permission forms must be updated annually.

Findings: In review of the program's records, it was determined that requirements for written permission from the parent/guardian for a field trip or routine trip were not met as listed in number(s) 9 below:

- 1. Written parental permission was not secured for field trips and/or routine trips off the premises.
- 2. The written permission was missing the child's name.
- 3. The written permission was missing the date(s) of the trip(s) (field trips only).
- 4. The written permission was missing the destination(s) of the trip(s).
- 5. The written permission was missing the departure and return time(s) of the trip(s) (field trips only).
- 6. The written permission was missing the signature of the parent.
- 7. The written permission was missing the date on which the permission was signed.
- 8. The written permission was missing a statement notifying parents how their child will be transported.
- 9. Permission forms for routine trips were not being updated annually.
- 10. Written parental permission forms for field trips and/or routine trips were not being maintained on file for at least one year from the date of the trip.
- 11. Other: [].

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



Domain: 08 Staff Files

Rule: 5180:2-13-10 Health Training

Code: Child care staff members and substitute child care staff members are required to complete health

trainings within the first ninety days of hire and prior to being left alone with children.

Findings: In review of records, it was determined the CCSM or Substitute CCSM did not meet health training requirements listed in number (s) 1 below:

- 1. All health trainings were not completed prior to being left alone with children.
- 2. First Aid training was not completed within the first ninety days of hire.
- 3. CPR training was not completed within the first ninety days of hire.
- 4. Communicable Disease training was not completed within the first ninety days of hire.
- 5. Child Abuse training was not completed within the first ninety days of hire.

Correct the violation and submit the documentation of current certification with the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 11/20/2025

Domain: 08 Staff Files

Rule: 5180:2-13-07 Staff Records

Code: The provider is required to maintain current employee, child care staff members and resident records in the Ohio Professional Registry.

Findings: During the inspection, it was determined that employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 2 below:

- 1. The provider had not created or updated their individual profile in the OPR.
- 2. The provider had not created or updated the program's organizational dashboard in the OPR.
- 3. At least one employee, child care staff member, or substitute child care staff member had not created or updated their individual profile in the OPR.
- 4. At least one employee, child care staff member, or substitute child care staff member had not created an employment record in the OPR for the program on or before the first day of employment, including date of hire.
- 5. At least one employee, child care staff member, or substitute child care staff member had not updated changes to positions or roles in the OPR within five calendar days of the change.
- 6. The program's organizational dashboard in the OPR was not updated within five business days when at least one employee, child care staff member, or substitute child care staff member's scheduled days and hours changed.
- 7. The program's organizational dashboard in the OPR was not updated within five business days when at least one employee, child care staff member, or substitute child care staff member's group assignments changed, if applicable.
- 8. The program's organizational dashboard in the OPR was not updated with the employment end date within five business days when at least one employee, child care staff member, or substitute child care staff member ended employment.
- 9. At least one resident over the age of eighteen had not created a profile and employment record for the family child care provider within five days of becoming a resident or turning eighteen.



10. The program's organizational dashboard in the OPR was not updated within five calendar days of a change in residency for at least one resident over the age of eighteen.

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

Corrective Action Plan Due: 11/20/2025

Domain: 08 Staff Files

Rule: 5180:2-13-10 Professional Development

Code: The program staff is required to complete at least six clock hours of training annually.

Findings: In review of records, it was determined the Child Care Staff Member(s) indicated on the Employee Record Chart did not meet the annual professional development requirement as noted in number(s) 1.

- 1. The child care staff member(s) had not completed at least six hours of professional development.
- 2. Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.
- 3. Training topic did not meet the requirements listed in appendix A of this rule.
- 4. Documentation of training did not meet the requirements of this rule.
- 5. The substitute(s) had been used more than ninety days annually between July first and June thirtieth and had not completed at least six hours of professional development.
- 6. Other [].

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

Corrective Action Plan Due: 11/20/2025

Domain: 08 Staff Files

Rule: 5180:2-13-10 Health Training

Code: The program is required to meet the health training requirements.

Findings: In review of records, it was determined the provider did not have current valid documentation for training(s) listed in number(s) 10,14 below:

- 1. First Aid expired training
- 2. First Aid did not have verification of the completion of First Aid training
- 3. First Aid documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
- 4. CPR expired training
- 5. CPR had not taken CPR training
- 6. CPR did not have verification of the completion of CPR training



- 7. CPR training taken did not include all age groups and developmental levels of all children in care
- 8. CPR documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
- 9. CPR- audiovisual or electronic media training taken did not include an in-person component of the training
- 10. Communicable Disease expired training
- 11. Communicable Disease had not taken CD training
- 12. Communicable Disease did not have verification of the completion of CD training
- 13. Communicable Disease documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule
- 14. Child Abuse expired training
- 15. Child Abuse had not taken Child Abuse training
- 16. Child Abuse documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule

Correct the violation and submit the documentation of current certification with the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 11/20/2025

Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Voluntary Temporary	Compliant	
Closure		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 License Visible	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Change of Location	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Information in OCLQS	Compliant	
Rule	Status	Documenting Statement(s), If applicable



Children & Youth		
5180:2-13-02 Provider Medical	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-02 Type A Ownership	Compliant	Documenting Statement(s), if applicable
5166.2 13 62 Type // Gwiletship	Compilant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-03 Inspection	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-04 Building Inspections for	Compliant	
Type A Homes		
L		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-13-07 Provider	Compliant	Documenting Statement: During the
Responsibilities	Common of the Management of the Common of th	inspection, it was determined that the
		provider was not meeting the following
		requirements as noted in number(s) 4
		below:
		1. The provider no longer resides at the
		licensed location.
		2. The licensed provider has additional
		activities/employment during operating hours, in that [].
		3. The provider was not on-site for 75
		percent of the program's operating hours
		as required by this rule.
		4. The provider did not have hours of
		availability to meet with parents a
		noticeable location.
		Correct the violation and submit the
		program's corrective action plan to verify
		compliance with the requirement of the
		rule.
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-05 Denial, Revocation, and	Compliant	
Suspension		
Rule	Status	Documenting Statement(s) If applicable
nule	Status	Documenting Statement(s), If applicable



F190-2-12-W-i D-II'	Committee	1
5180:2-13 Written Policies and	Compliant	
Procedures		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Employee Requirements	Compliant	
sizesiz is es impreyes nequirements	Compilation	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Child Care Staff	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-08 Whistle Blower	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Outdoor Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Outdoor Space		Documenting Statement(s), if applicable
5180.2-13-11 Outdoor Space	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Fall Zone	Compliant	(-1)
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Safe Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Safe Environment	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-12 Pets	Compliant	
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	Status	Documenting Statement(s), If applicable
5180:2-13-13 Handwashing	Compliant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Clean environment and	Compliant	
equipment		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-13 Toothbrushing	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Driver Requirements	Compliant	
Dula	Chatura	Describe out in a Chatana and A If an II all
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Ratio and Supervision	Compliant	
for Field and Routine Trips		
Rule	Status	Decumenting Statement/s) If applicable
100 (100 (100 (100 (100 (100 (100 (100		Documenting Statement(s), If applicable
5180:2-13-13 Smoke Free	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Vehicle Inspections	Compliant	Documenting Statement(s), if applicable
5180.2-13-14 Vehicle hispections	Compilant	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-14 Vehicle Requirements	Compliant	bootimenting statement(s), it approases
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-15 Child Medical and	Compliant	(-)/
Enrollment Records		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-15 Health Conditions	Compliant	, , , , , , , , , , , , , , , , , , ,
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-15 Child Records Retention	Compliant	
and Confidentiality		



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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 First Aid Kit/Standard	Compliant	
Precautions		
Treductions		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Communicable Diseases	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-16 Incident/Injury	Compliant	
	Somphane	
	l.	
Dulo	Status	Decumenting Statement/s) If surlicely
Rule 5100 2 12 16 5		Documenting Statement(s), If applicable
5180:2-13-16 Emergency	Compliant	
Preparedness and Response Plan		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-17 Programming	Compliant	
	1	'
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-17 Materials and	Compliant	Decame general (e), in approach
	Compilant	
Equipment		
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Rule	Status	Documenting Statement(s), If applicable
5180:2-13-18 Group Size and Ratios	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
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5180:2-13-19 School Age Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-19 Child Guidance	Compliant	
Rule	Status	Documenting Statement(s), If applicable



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5180:2-13-20 Sleep and Nap	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-20 Crib and Playpen	Compliant	
Requirements		
E		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-21 Evening and Overnight	Compliant	
Care	Compilation	
Care		
Rule	Status	Documenting Statement(s), If applicable
		Documenting statement(s), if applicable
5180:2-13-21 Sanitary Environment	Compliant	
and Hygiene		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Infant Daily Care	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-22 Fluid Milk	Compliant	
	,	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-22 Food Handling	Compliant	0 (7)
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Infant Bottle and Food	Compliant	booth chang statement(s), it applicable
	Compliant	
Preparation		
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D. J.	Chahara	Decumenting Statement (1) If I I I
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-23 Diapering	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-25 Medication	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-11 Indoor Space	Compliant	
	sectors production.	
	1	



Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 On-site Pools	Compliant	Documenting Statement(s), if applicable
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 Swimming Sites	Compliant	bocumenting statement(s), if applicable
Rule	Status	Documenting Statement(s), If applicable
5180:2-13-24 Parent Permission for Swimming	Compliant	Bocamenting statement(3), if applicable
Rule	Status	Documenting Statement(s), If applicable
5101:2-13-08 Review Policies and Procedures	Compliant	,