

Center Complaint Inspection Summary Report

All licensed child care programs are inspected at least once each year. Non-compliances are documented and grouped as Serious, Moderate or Low risk violations. Documenting statements and supplemental information may be included in this report. Licensing inspection reports from the previous three years can be viewed on the child care website at http://jfs.ohio.gov/CDC/childcare.stm. This includes complaint investigation reports with substantiated allegations. For any other child care records, please contact the Child Care Help Desk at 1-877-302-2347, option 4.

Program Details					
Program Name	Program Number	Program Type			
little learner academy	2230029263	Child Care Center			
Address	County				
4132 mount carmel tobasco rd Cincinnati OH 45255		CLERMONT			

Inspection Information								
Inspection Type				Inspection Scope		Inspection Notice		
Complaint			Partial		Unannounced			
Reviewer(s) BRIAN CHASTAIN Ir		Inspection Day		Begin Time		End Time		
06/17/20		24	1:20 PM		3:55 PM			
Summary of Findings								
No. Rules Verified	No. Rules with Non-cor	. Rules with Non-compliances		(No. Moderate Risk	No. Low Risk		
10	4		0		1	3		

Staff-Child Ratios at the Time of Inspection						
Group	Age Group/Range	Ratio Observed	Comment			
School Age	School-Age to < 11 years	1 to 9				
Toddler	18 months to < 30 months	1 to 6				
Infant	0 to < 12 months	2 to 9				
Pre-K	3 years to < 4 years	1 to 9				



Complaint Allegations

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.

Domain:05 Health & Safety

Rule: 5101:2-12-16 Incident/Injury Reporting

Code: The program is required to complete the JFS 01299 "Incident/Injury Report" for injuries and incidents at the program, provide a copy to the person who picks the child up on the day of the incident, and retain a copy of the form onsite at the program for one year.

Allegation: The parent or a person picking up a child did not receive the JFS 01299 on the day of an incident.

Determination: Substantiated

Findings: In review of the records, it was determined the program did not have documentation on file to meet the requirements for completing a JFS 01299 Incident/Injury Report as noted in numbers 1, 5, 16 below:

- 1. The JFS 01299 was not completed when a child became ill or received an injury which required first aid treatment.
- 2.The JFS 01299 was not completed when a child was transported to a source for emergency assistance.
- 3. The JFS 01299 was not completed when a child received a bump or blow to the head.
- 4. The JFS 01299 was not completed when an unusual or unexpected incident which jeopardized the safety of a child or employee of a program.
- 5. The parent or a person picking up the child did not receive the JFS 01299 on the day of the incident.
- 6. The program information (program name, number, address) was incomplete on the JFS 01299.
- 7. Child's name was incomplete on the JFS 01299.
- 8. Child's birthdate was incomplete on the JFS 01299.
- 9. Name of person(s) responsible for the child at the time of the incident was incomplete on the JFS 01299.
- 10. Number of children present in the group at the time of the incident was incomplete on the JFS 01299.
- 11. Date and/or time of the incident was incomplete on the JFS 01299.
- 12. Whether or not parents were contacted was incomplete on the JFS 01299.
- 13. Complete summary of the incident was incomplete on the JFS 01299.
- 14. Accurate summary of the incident was incomplete on the JFS 01299.
- 15. Name and/or signature of the person completing the form was incomplete on the JFS 01299.
- 16. The JFS 01299 was not kept on file at the program for at least one year.
- 17. Other [].

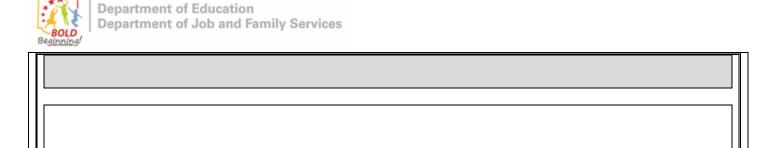
Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is not required at this time.

Risk Level: Low

Summary of Additional Non-Compliances

Serious Risk Non-Compliances

No Additional Serious Risk Non-Compliances were observed during this inspection



Moderate Risk Non-Compliances

Domain: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 and receive a JFS 01176 or 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 listed on the Employee Record Chart as noted in number 3 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 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.

Corrective Action Plan Due: 07/28/2024

Low Risk Non-Compliances

Domain:05 Health & Safety

Rule: 5101:2-12-16 Incident/Injury Reporting

Code: The program is required to submit notification of a serious incident in OCLQS by the next business day.

Findings: During the inspection, it was determined that a Serious Incident was not reported in the Ohio Child Licensing and Quality System (OCLQS), as required, by the program administrator or designee for an incident as listed in number 2 below:

- 1. An incident, injury or illness that required professional medical consultation or treatment.
- 2. An unusual or unexpected incident which jeopardizes the safety of a child, child care staff member or employee of the program (when police were onsite on or about April 3, 2024).
- 3. An incident defined as a serious risk non-compliance in appendix A to rule 5101:2-12-03 of the Administrative Code.
- 4. The program did not submit the report in OCLQS by the next business day as required by rule.

Submit the program's corrective action plan, which includes a statement that the program administrator or designee has completed the Serious Incident Report in OCLQS, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 07/28/2024

Domain:08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: The program staff's medical statements are required to be completed and on file at the program.

Findings: In review of the staff records, it was determined that the medical statements for the employees listed on the Employee Record Chart did not meet the requirements as listed in number 1 below.

- 1. A medical statement was not on file for at least one employee;
- 2. The medical statement(s) on file did not have a date of examination within 12 months of the employee's first day of employment;
- 3. Date of examination was missing;
- 4. Signature, business address, or telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination was missing;
- 5. A statement was missing that verifies 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);
- 6. Tuberculosis (TB) screening/test information was missing:
- 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 6a.
- 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: 07/28/2024