

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
Kiddos Play Learning Center	2240030025		Child Care Center
Address			County
515 Waterburry BLVD Gahanna			FRANKLIN
ОН			
43230			
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
	E	4.4	
Fire Inspection Approval Date	Food Service Risk Level		
05/15/2024	Level IV		

	Insp	ection Information		
Inspection Type Provisional	Inspection So Full	cope	Inspection Notice Unannounced	
Inspection Date 01/22/2025	Begin Time 9:30 AM		End Time 12:00 PM	
Reviewer: AMY HILLARD				
	Sui	mmary of Findings		
No. Rules Verified 58	No. Rules with Non-compliances	No. Serious Risk 0	No. Moderate Risk 0	No. Low Risk

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)		6	0	6
Young Toddler		1	0	1
Total Under 2 ½ Years	28	7	0	7
Older Toddler		0	0	0
Preschool		6	0	6
School Age		0	4	4
Total Capacity/Enrollment	69	6	4	17

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



Preschool/schoolage	0 to < 12 months	3 to 8	All children combined
Preschool/schoolage	0 to < 12 months	3 to 8	all children combined
Preschool/schoolage	3 years to < 4 years	2 to 5	Preschool and schoolage combined
Infant/Toddler	0 to < 12 months	3 to 8	all children combined
Infant/Toddler	0 to < 12 months	3 to 8	All children combined
Infant/Toddler	0 to < 12 months	1 to 3	Infant and toddler combined

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: 5180:2-12-12 Safe Equipment

<u>Code</u>: The program is required to use equipment, that is safe and hazard free, according to the manufacturer's guidelines. Fans, air conditioners, heat pumps, and space heaters must be inaccessible to children. The program is required to refrain from using trampolines, ball pits and inflatable equipment intended for climbing and bouncing, including but not limited to slides and bounce houses.

<u>Finding</u>: During the inspection, equipment was determined to be unsafe, hazardous to children, or in need of repair as noted in number(s) 3 below:

- 1. Manufacturer's guidelines for the [] were not followed in that [].
- 2. The straps were missing on the [].
- 3. The straps were attached, but were not used on the infant high chair (child not buckled in).
- 4. The straps were attached and were used, but were not used in a safe manner.
- 5. The equipment had sharp points or corners.
- 6. The equipment had splinters.
- 7. The equipment had protruding nails.
- 8. The equipment had loose or rusty parts.
- 9. The equipment had paint which contains lead or other poisonous materials.
- 10. The equipment had hazardous features.
- 11. A fan was unstable and could easily tip over.
- 12. A fan had openings a finger could enter.
- 13. The pipes from the heat pump felt hot to the touch
- 14. A space heater felt hot to the touch
- 15. The position of a space heater was a tripping hazard
- 16. The air conditioning unit was not enclosed and was accessible to children on the playground.
- 17. A ball pit, trampoline, inflatable bounce house, inflatable slide, or inflatable equipment used for climbing and bouncing was used.
- 18. Other [].

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

Corrective Action Plan Due: 02/21/2025



Domain: 08 Staff Files

Rule: 5180:2-12-08 Medical Statement

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

<u>Finding</u>: 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(s) 1, 2 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: 02/21/2025

Rules In-Compliance/Not Verified



n I	T	5
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Written Disaster Plan	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-02 License Posted	Compliant	
Rule	Status	Desumenting Statement(s) If applicable
		Documenting Statement(s), If applicable
5180:2-12-02 Current Information	Compliant	
		,
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-03 Inspection	Compliant	
Requirements	1 *	
Rule	Status	Decumenting Statement(s) If applicable
444-444-444	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-04 Fire Inspection	Compliant	Documenting Statement: Please Note:
		Documentation of a fire inspection
		without any uncorrected violations must
		be secured for the program. Secure a
		new fire inspection by 5/15/24.
		new in c inspection by 3/13/2 ii
- 1	- versiles as	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-04 Food Service	Compliant	Documenting Statement: The food service
Requirements		license was observed posted. Following is
		the audit number and date of expiration:
		9989959; 3/1/25.
		3303333, 3/1/23.
	L	1
- 1		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-07 Administrator	Compliant	
Qualifications		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-07 Administrator	Compliant	and a series of the series of
AND THE PROPERTY OF THE PROPER	Compilant	
Responsibilities/Requirements	1	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-07 Written Program	Compliant	
Policies and Procedures		
	1	
Pule	Ctatus	Desumenting Statement/s) If surlively
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-08 Child Care Staff Member	Compliant	
Educational Requirements		
Rule	Status	Documenting Statement(s), If applicable
	212.300	TTTTTTTT DECEMBER (5)) IT applicable



5180:2-12-08 Orientation Training &	Compliant	
Whistle Blower Protection		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-09 Background Check	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-10 Health Training	Compliant	(-),
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-10 Professional	Compliant	Documenting Statement(s), if applicable
Development Requirements	- Control Control of C	
Rule: 5180:2-12-11 Outdoor Space	Status Compliant	Documenting Statement(s), If applicable Documenting Statement: The quarterly
Requirements	Compliant	playground inspections were completed
		and documented, as required. The most
		recent inspection report form was dated
		1/14/25.
	1.00	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Indoor Space Requirements	Compliant	
Requirements		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Separation of Children	Compliant	
Under 2 1/2 Years		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Outdoor Play Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Outdoor Play Fall Zones	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-12 Safe Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-13 Sanitary Equipment and	Compliant	
Environment		
Rule	Status	Documenting Statement(s), If applicable
naic	Status	bootinenting statement(s), it applicable



Rule: 5180:2-12-13 Handwashing Requirements	Compliant	Documenting Statement: Children were viewed washing their hands, as required by the rule.
PJ-	China	Decomposition (technique and/s) If sometimely
Rule: 5180:2-12-13 Smoke Free Environment	Status Compliant	Documenting Statement(s), If applicable Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-15 Child Medical and Enrollment Records	Compliant	bocumenting statement(3), if applicable
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-15 Medical/Physical Care Plans	Compliant	Documenting Statement: At the time of the inspection, there were no children currently enrolled who had health conditions.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	Documenting Statement(s), if applicable
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-16 Emergency Drills	Compliant	Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection.
Rule: 5180:2-12-16 First Aid/Standard Precautions	Status Compliant	Documenting Statement(s), If applicable Documenting Statement: During the inspection, the program had complete first aid kits available as required.
Pula	Status	Decumenting Statement/s) If applicable
Rule: 5180:2-12-16 Management of Communicable Disease	Compliant	Documenting Statement(s), If applicable Documenting Statement: The JFS 08087 "Communicable Disease Chart" was posted and was readily available to staff and parents.
Pula	Status	Decumenting Chatamant (a) If and the land
Rule 5180:2-12-16 Incident/Injury Reporting	Status Compliant	Documenting Statement(s), If applicable



Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 Attendance Records	Compliant	bocamenting statement(s), it applicable
5180.2-12-18 Attendance Necolds	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 Group Size	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-17 Daily Schedule	Compliant	Documenting Statement: Daily schedules
		were observed posted.
D. J.	Chabin	D
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-17 Materials and	Compliant	
Equipment		
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-17 Daily Outdoor Play	Compliant	Dodding Distribution (9) it approache
Sissil II I Sun, Susues Ha,	- Somphane	
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Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 License Capacity	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-18 Ratio	Compliant	bocumenting statement(s), it applicable
D. f.	6	D (1) (1) (1)
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-19 Supervision	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-20 Cots and Napping	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-20 Cribs	Compliant	booking statement(s), it applicable
	p	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-19 Child Guidance	Compliant	
1		
. L		
Rule	Status	Documenting Statement(s) If applicable
Rule Rule: 5180:2-12-22 Meal and Snack	Status Compliant	Documenting Statement(s), If applicable Documenting Statement: The menu was
Rule: 5180:2-12-22 Meal and Snack	Status Compliant	Documenting Statement: The menu was



Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Safe Food	Compliant	
Handling/Storage		
		·
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-22 Fluid Milk Requirements	Compliant	
		D C
Rule 1100 2 12 22 L C + D 11 C	Status	Documenting Statement(s), If applicable
5180:2-12-23 Infant Daily Care	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-23 Diapering and Toilet	Compliant	
Training		
	90	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-23 Infant Bottle and Food	Compliant	
Preparation		
Rule	Status	Documenting Statement(s), If applicable
Rule: 5180:2-12-25 Medication	Compliant	Documenting Statement: There were no
Administration		children on medication at the time of the
		inspection; however, the method of
		storage and practices for the
		administration were reviewed.
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-04 Building Department	Compliant	Booking Statement(o), it applicable
Inspection	Simpliant	