

## 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<br>Inspire Me Learning Academy- Leadership Campus | Program Number<br>2240030117        |                       | Program Type<br>Child Care Center |
| Address<br>1416 W.Riverview Avenue Dayton<br>OH<br>45402       |                                     |                       | County<br>MONTGOMERY              |
|                                                                |                                     |                       |                                   |
| Building Approval Date<br>07/18/2013                           | Use Group/Code<br>E                 | Occupancy Limit<br>30 | Maximum Under 2 ½<br>16           |
| Fire Inspection Approval Date<br>05/29/2024                    | Food Service Risk Level<br>Level II |                       |                                   |

| Inspection Information        |                          |                                  |
|-------------------------------|--------------------------|----------------------------------|
| Inspection Type<br>Annual     | Inspection Scope<br>Full | Inspection Notice<br>Unannounced |
| Inspection Date<br>10/09/2025 | Begin Time<br>9:20 AM    | End Time<br>11:59 PM             |
| Reviewer:<br>KEYAUNA BABER    |                          |                                  |

| Summary of Findings      |                                      |                       |                        |                    |
|--------------------------|--------------------------------------|-----------------------|------------------------|--------------------|
| No. Rules Verified<br>58 | No. Rules with Non-compliances<br>13 | No. Serious Risk<br>0 | No. Moderate Risk<br>0 | No. Low Risk<br>13 |

| 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)                                 |                  | 2          | 0         | 2     |
| Young Toddler                                             |                  | 2          | 0         | 2     |
| <b>Total Under 2 ½ Years</b>                              | 16               | 4          | 0         | 4     |
| Older Toddler                                             |                  | 4          | 0         | 4     |
| Preschool                                                 |                  | 24         | 0         | 24    |
| School Age                                                |                  | 1          | 0         | 1     |
| <b>Total Capacity/Enrollment</b>                          | 125              | 29         | 0         | 33    |

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

|                   |                          |         |  |
|-------------------|--------------------------|---------|--|
| Infants           | 0 to < 12 months         | 2 to 2  |  |
| Infants           | 0 to < 12 months         | 1 to 2  |  |
| Toddlers          | 18 months to < 30 months | 2 to 6  |  |
| Toddlers          | 18 months to < 30 months | 2 to 6  |  |
| Chrysalis- Purple | 3 years to < 4 years     | 1 to 11 |  |
| Chrysalis- Purple | 3 years to < 4 years     | 1 to 11 |  |
| Chrysalis- Orange | 3 years to < 4 years     | 1 to 9  |  |
| Chrysalis- Orange | 3 years to < 4 years     | 1 to 9  |  |

### 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

**No Moderate Risk Non-Compliances were observed during this inspection**

### Low Risk Non-Compliances

#### Domain: 01 Ratio & Supervision

Rule: 5180:2-12-18 Attendance Records

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 center for a period of one year.

Finding: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number(s) 4 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 accurate 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.

Corrective Action Plan Due: 11/09/2025

#### Domain: 02 Safe & Sanitary Environment

Rule: 5180:2-12-12 Safe Environment

Code: 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.

Finding: During the inspection, it was determined that children were not protected from item(s) or condition(s) which may threaten their health, safety, or well-being as noted in number(s) 1 below:

1. Surge protectors/outlets did not have childproof receptacle covers.
2. Open pull cords that are not closed loop.
3. Toys or other items small enough to be swallowed were present in the space where infants and/or toddlers were in care.
4. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
5. Stacked chairs.
6. Employee(s) purse(s).

7. Diaper bags.
8. Television not securely anchored.
9. Small or lightweight pieces of shelving units are not securely anchored to the wall.
10. Smoke detector needing batteries replaced.
11. An area rug did not have a nonskid backing.
12. An area rug presented a tripping hazard.
13. A floor surface that was unsafe in that [ ].
14. No platform was provided for the sink or toilet in the [ ] classroom.
15. The platform provided for the sink or toilet in the [ ] classroom was not sturdy.
16. The platform provided for the sink or toilet in the [ ] classroom posed a safety hazard in that [ ].
17. Telephone cords.
18. Staff member stepped over a barrier/gate while holding a child.
19. Emergency exits were blocked by the following classroom furniture: [ ].
20. A mercury thermometer was being used to take a child's temperature.
21. Methods of ventilation used did not provide protection from rodents, insects, or other hazards.
22. Other [ ].

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: 11/09/2025

#### **Domain: 04 Indoor/Outdoor Space**

Rule: 5180:2-12-11 Outdoor Space Requirements

Code: The program is required to conduct and document quarterly inspections of their outdoor play space.

Finding: During the inspection, it was determined that quarterly inspections of one or more outdoor play area(s) and equipment had not been completed and documented as required, using the JFS 01281 "Child Care Playground Inspection Report" form. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/09/2025

#### **Domain: 05 Health & Safety**

Rule: 5180:2-12-22 Meal and Snack Requirements

Code: The program is required to obtain written approval from a licensed physician if a child is to have a food group eliminated from their diet.



Finding: During the inspection, it was determined that an entire food group was eliminated for a child, and written instructions from a licensed physician were not file. Refer to the Children Records Review for the names of children who do not have these instructions on file. 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.

**Domain: 05 Health & Safety**

Rule: 5180:2-12-16 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) 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 the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/09/2025

**Domain: 05 Health & Safety**

Rule: 5180:2-12-16 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 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.
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.
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).

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.

**Domain: 05 Health & Safety**

Rule: 5180:2-12-16 Management of Communicable Disease

Code: The program is required to post the JFS 08087 "Ohio Communicable Disease Chart".

Finding: During the inspection, it was determined that the JFS 08087 "Ohio Communicable Disease Chart" was not posted as required, as indicated in number(s) 1 below:

1. The chart was not posted.
2. In a location readily available to program staff and parents.
3. The posted chart was not the current version, and the Child Care Manual Procedural Letter No. 159 was not attached.
4. The posted chart was not displayed in the size available in the ODJFS forms central to be easily read.

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

**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.

Finding: 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 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: 11/09/2025

**Domain: 08 Staff Files**

Rule: 5180:2-12-10 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) 5, 6 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: 11/09/2025

**Domain: 08 Staff Files**

Rule: 5180:2-12-09 Background Check Requirements

Code: The program is required to maintain a current JFS 01176 "Program Notification of Background Check Review for Child Care" on file for each staff.

Finding: In review of the staff records, it was determined that background check requirements had not been followed, for the individual(s) listed on the Employee Record Chart, as noted in number(s) 2 below:

1. The JFS 01177 "Individual Notification of Background Check Review for Child Care" was on file instead of the JFS 01176.
2. The JFS 01176 on file was for a different program.

Submit the program's corrective action plan, which includes a statement that the correct form is now on file, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/09/2025

**Domain: 08 Staff Files**

Rule: 5180:2-12-08 Orientation Training & Whistle Blower Protection

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

Finding: In review of the staff records, it was determined that child care staff member(s) did not meet the requirements for completing the online orientation training as noted in number(s) 4 below:



1. The training was not completed within 30 days of starting employment at the program as a child care staff member.
2. Documentation of completing the training after December 31, 2016 was not on file.
3. Completion of the training was not verified in the OPR.
4. A child care staff member had sole responsibility of children and had not completed the online orientation.

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

Corrective Action Plan Due: 11/09/2025

**Domain: 09 Children's Files**

Rule: 5180:2-12-15 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) 7, 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 [ ]

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.

**Domain: 10 Written Policies & Procedures**

Rule: 5180:2-12-16 Written Disaster Plan

Code: The program is required to train child care staff members and employees on the written disaster plan annually and keep written documentation of the training on-site.

Finding: During the inspection, it was determined the program's written disaster plan did not meet the requirement for training child care staff members and employees on the plan annually as noted in number(s) 1 below:

1. Child care staff members and employees were not trained annually.
2. Written documentation of the training was not kept on file.

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

Corrective Action Plan Due: 11/09/2025

**Rules In-Compliance/Not Verified**

| Rule                        | Status    | Documenting Statement(s), If applicable |
|-----------------------------|-----------|-----------------------------------------|
| 5180:2-12-02 License Posted | Compliant |                                         |

| Rule                                        | Status    | Documenting Statement(s), If applicable |
|---------------------------------------------|-----------|-----------------------------------------|
| 5180:2-12-04 Building Department Inspection | Compliant |                                         |

| Rule                             | Status    | Documenting Statement(s), If applicable |
|----------------------------------|-----------|-----------------------------------------|
| 5180:2-12-02 Current Information | Compliant |                                         |

| Rule | Status | Documenting Statement(s), If applicable |
|------|--------|-----------------------------------------|
|------|--------|-----------------------------------------|

|                                                               |               |                                                                                                                                             |
|---------------------------------------------------------------|---------------|---------------------------------------------------------------------------------------------------------------------------------------------|
| 5180:2-12-03 Inspection Requirements                          | Compliant     |                                                                                                                                             |
| <b>Rule</b>                                                   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                              |
| 5180:2-12-04 Fire Inspection                                  | Compliant     |                                                                                                                                             |
| <b>Rule</b>                                                   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                              |
| Rule: 5180:2-12-04 Food Service Requirements                  | Compliant     | Documenting Statement: The food service license was observed posted. Following is the audit number and date of expiration: 0021420, 3/1/26. |
| <b>Rule</b>                                                   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                              |
| 5180:2-12-07 Administrator Qualifications                     | Compliant     |                                                                                                                                             |
| <b>Rule</b>                                                   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                              |
| 5180:2-12-07 Administrator Responsibilities/Requirements      | Compliant     |                                                                                                                                             |
| <b>Rule</b>                                                   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                              |
| 5180:2-12-07 Written Program Policies and Procedures          | Compliant     |                                                                                                                                             |
| <b>Rule</b>                                                   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                              |
| 5180:2-12-08 Child Care Staff Member Educational Requirements | Compliant     |                                                                                                                                             |
| <b>Rule</b>                                                   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                              |
| 5180:2-12-10 Professional Development Requirements            | Compliant     |                                                                                                                                             |
| <b>Rule</b>                                                   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                              |
| 5180:2-12-11 Indoor Space Requirements                        | Compliant     |                                                                                                                                             |
| <b>Rule</b>                                                   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                              |
| 5180:2-12-11 Separation of Children Under 2 1/2 Years         | Compliant     |                                                                                                                                             |
| <b>Rule</b>                                                   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                              |
| 5180:2-12-12 Safe Equipment                                   | Compliant     |                                                                                                                                             |
| <b>Rule</b>                                                   | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>                                                                                              |
| 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 |
| 5180:2-12-13 Sanitary Equipment and Environment          | Compliant |                                         |
| Rule                                                     | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-13 Handwashing Requirements                    | Compliant |                                         |
| Rule                                                     | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-13 Smoke Free Environment                      | Compliant |                                         |
| Rule                                                     | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-15 Medical/Physical Care Plans                 | Compliant |                                         |
| Rule                                                     | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-16 Medical, Dental, and General Emergency Plan | Compliant |                                         |
| Rule                                                     | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-16 Incident/Injury Reporting                   | Compliant |                                         |
| Rule                                                     | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-17 Materials and Equipment                     | Compliant |                                         |
| Rule                                                     | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-17 Daily Schedule                              | Compliant |                                         |
| Rule                                                     | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-18 Group Size                                  | Compliant |                                         |
| Rule                                                     | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-17 Daily Outdoor Play                          | Compliant |                                         |
| 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 |                                         |
| Rule                                            | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-20 Cots and Napping                   | Compliant |                                         |
| Rule                                            | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-19 Supervision                        | Compliant |                                         |
| Rule                                            | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-19 Child Guidance                     | Compliant |                                         |
| Rule                                            | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-20 Cribs                              | Compliant |                                         |
| Rule                                            | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-22 Safe Food Handling/Storage         | Compliant |                                         |
| Rule                                            | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-22 Fluid Milk Requirements            | Compliant |                                         |
| Rule                                            | 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 Infant Bottle and Food Preparation | Compliant |                                         |
| Rule                                            | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-23 Diapering and Toilet Training      | Compliant |                                         |
| Rule                                            | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-25 Medication Administration          | Compliant |                                         |