

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 | | Program Type | |
| Genesis Academy Learning Center One | 2250031532 | | Child Care Center | |
| | | | | |
| Address | | | County | |
| 6015 Colerain Ave Cincinnati | | | HAMILTON | |
| ОН | | | | |
| 45239 | | | | |
| | | | | |
| Building Approval Date | Use Group/Code | Occupancy Limit | Maximum Under 2 ½ | |
| 01/22/2024 | E | 60 | | |
| Fire Inspection Approval Date | Food Service Risk Level | | | |
| 02/07/2025 | Level II | | | |

| Inspection Information | | | | |
|------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type | Inspection So | cope | Inspection Notice | |
| Pre-license | Full | | Unannounced | |
| Inspection Date | Begin Time | | End Time | |
| 03/04/2025 | 10:00 AM | | 11:45 AM | |
| Reviewer: | | | | |
| BRENDA MEYER | | | | |
| Cummon of Findings | | | | |
| Summary of Findings | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58 | 2 | 0 | 0 | 2 |

| 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 |
|---|
| 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: 02 Safe & Sanitary Environment |



Rule: 5180:2-12-12 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>: 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 22 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. Hand sanitizing wipes that say "keep out of reach of children" were left sitting out.

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: 04/04/2025

Domain: 04 Indoor/Outdoor Space

Rule: 5180:2-12-11 Outdoor Play Fall Zones

<u>Code</u>: The program is required to provide fall zones around equipment to prevent injury if a child were to fall.

<u>Finding</u>: During the inspection, it was determined the fall zone under and around equipment designated for climbing, swinging, balancing and sliding did not meet the requirements as noted in number 6 below:



- 1. The fall surface material had not been properly distributed or raked as needed to retain proper depth under and around equipment.
- 2. A fall zone hazard was present, in that, the [] posed a risk of injury if a child were to fall from a piece of equipment.
- 3. The fall zone was less than 3 feet from the fence for equipment used by children 23 months of age and younger.
- 4. The fall zone was less than 6 feet from the fence for equipment used by children 24 months of age and older.
- 5. There was not a fall zone of 3 feet in all directions from the perimeter of the equipment used by children 23 months of age and younger.
- 6. There was not a fall zone of 6 feet in all directions from the perimeter of the equipment used by children 24 months of age and older- slide and dome climber in mulch.
- 7. The fall zone was less than 4 1/2 feet from each piece of applicable equipment used by children 23 months of age and younger.
- 8. The fall zone was less than 9 feet from each piece of applicable equipment used by children 24 months of age and older.
- 9. Other [].

The program is required to provide adequate fall zones under and around outdoor play equipment 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: 04/04/2025

Rules In-Compliance/Not Verified

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



| Rule | Status | Documenting Statement(s), If applicable |
|--------------------------------------|-----------|---|
| 5180:2-12-03 Inspection | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-02 Current Information | Compliant | |
| | , | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-04 Fire Inspection | Compliant | |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-04 Food Service | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-07 Administrator | Compliant | |
| Qualifications | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-05 Denial, Revocation and | Compliant | |
| Suspension | | |
| | T | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-07 Administrator | Compliant | |
| Responsibilities/Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-07 Written Program | Compliant | |
| Policies and Procedures | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-08 Child Care Staff Member | Compliant | |
| Educational Requirements | | |
| D.J. | Chahara | Designation Chairman (1) If |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-08 Medical Statement | Compliant | |
| L | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-08 Orientation Training & | Compliant | Documenting Statement(s), it applicable |
| Whistle Blower Protection | Compilant | |
| winstie blower i Totection | L | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-09 Background Check | Compliant | Documenting Statement(S), if applicable |
| Requirements | Compilant | |
| Requirements | L | |
| Rule | Status | Documenting Statement/s) If applicable |
| Nule | Status | Documenting Statement(s), If applicable |



| | Αλ | |
|---------------------------------------|--|--|
| 5180:2-12-10 Health Training | Compliant | |
| Requirements | | |
| <u> </u> | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-10 Professional | - Control Cont | bocumenting statement(s), if applicable |
| | Compliant | |
| Development Requirements | | |
| | <u> </u> | 1 |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-11 Indoor Space | Compliant | |
| Requirements | | |
| · | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-11 Separation of Children | Compliant | g countering of the countering |
| Under 2 1/2 Years | Compliant | |
| Officer 2 1/2 rears | | |
| | | |
| 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 Space | Compliant | |
| Requirements | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-12 Safe Equipment | Compliant | Becamening statement(s), it approasts |
| 3100.2 12 12 3aic Equipment | Compliant | |
| ļ. | I. | <u> </u> |
| Rule | Status | Desumenting Statement(s) If applicable |
| | | Documenting Statement(s), If applicable |
| 5180:2-12-13 Sanitary Equipment and | Compliant | |
| Environment | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-13 Handwashing | Compliant | |
| Requirements | | |
| | • | , |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-13 Smoke Free | Compliant | Documenting Statement: A notice was |
| Environment | | observed posted stating that smoking is |
| | | prohibited at the program. |
| | | prombited at the program. |
| L | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-14 Transportation and Field | Compliant | |
| Trip Procedures | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-14 Transportation - Driver | Compliant | G |
| Requirements | | |
| Requirements | l | |
| | | |



| ~~ | | |
|--|--|--|
| | Status | Documenting Statement(s), If applicable |
| 5180:2-12-15 Child Medical and | Compliant | |
| Enrollment Records | | |
| | | ·· |
| Rule ! | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-14 Transportation - | Compliant | Documenting Statement: An annual |
| Vehicle Requirements | , | safety check of the vehicle(s), using the |
| The anti-deficiency of the Control of Building to the control of | | JFS 01230 "Vehicle Inspection Report For |
| | | Child Care Centers" form, were verified |
| | | and dated: |
| | | (6114) Bus 8/29/2024 |
| | | (9638) Van 12/16/24 |
| | | (3030) Vall 12/10/21 |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| | Compliant | O THE TOTAL OF THE PROPERTY OF |
| Plans | compilation | |
| 1 | | |
| Rule | Status | Documenting Statement(s), If applicable |
| | Compliant | bodamenting statement(s), it applicable |
| General Emergency Plan | compilant | |
| deficial Emergency Fram | | |
| Rule | Status | Documenting Statement(s), If applicable |
| And the state of t | Compliant | bocumenting statement(3), it applicable |
| 3100.2 12 10 Emergency Drins | Compilant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-17 Daily Schedule | Compliant | Documenting Statement: Daily schedules |
| | | were observed posted. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-16 Management of | Compliant | Documenting Statement: The JFS 08087 |
| Communicable Disease | Cita international Participation and the | "Communicable Disease Chart" was |
| | | posted and was readily available to staff |
| | | and parents. |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| | Compliant | Documenting Statement: During the |
| Precautions | ş* | inspection, the program had complete 3 |
| | | first aid kits available as required (building |
| | | and 1 for each vehicle.) |
| | | The second contract c |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| | Compliant | , , , , , |
| 5180:2-12-16 Incident/Injury (| Compilant | |
| 5180:2-12-16 Incident/Injury Reporting | Compliant | |



| ~~ | v. | |
|--|-------------|--|
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-17 Materials and | Compliant | |
| Equipment | | |
| The state of the s | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-17 Daily Outdoor Play | Compliant | Bootimenting statement(s), it approaches |
| 3100.2 12 17 bany outdoor riay | Compilant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-18 Ratio | Compliant | Bodamenting statement(s), it approaches |
| 3130.2 12 13 Natio | Compilant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-18 License Capacity | Compliant | podamenting otatement(s), it appreads |
| 3100.2 12 10 License capacity | Compilant | |
| | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-18 Group Size | Compliant | 2 statile it in grant in the state in the st |
| 3100.2 12 10 Gloup Size | Compilation | |
| | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-18 Attendance Records | Compliant | podumenting occionant(s), in approache |
| 3100.2 12 10 Attendance Records | Compilant | |
| | | |
| 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 Cots and Napping | Compliant | 0 (7) |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-20 Cribs | Compliant | |
| | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-22 Fluid Milk Requirements | Compliant | 3 |
| | | |
| | I. | |
| Rule | Status | Documenting Statement(s), If applicable |
| Rule: 5180:2-12-22 Meal and Snack | Compliant | Documenting Statement: The menu was |
| Requirements | Compilation | posted. |
| Requirements | | posteu. |
| L | I. | 1 |
| Rule | Status | Documenting Statement(s) If applicable |
| nuie | Status | Documenting Statement(s), If applicable |



| 5180:2-12-22 Safe Food | Compliant | |
|-------------------------------------|-----------|---|
| Handling/Storage | * | |
| - | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-23 Infant Daily Care | Compliant | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-23 Infant Bottle and Food | Compliant | |
| Preparation | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-23 Diapering and Toilet | Compliant | |
| Training | | |
| | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-24 Swimming and Water | Compliant | |
| Safety Requirements | | |
| | | - |
| Rule | Status | Documenting Statement(s), If applicable |
| 5180:2-12-25 Medication | Compliant | |
| Administration | | |
| | | |
| | | |