

## 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>Healthy Kids Programs at Milton Union<br>Exempted | Program Number<br>2250031593      |                         | Program Type<br>Child Care Center |
| Address<br>7610 Milton-Potsdam Road West Milton<br>OH<br>45383    |                                   |                         | County<br>MIAMI                   |
|   |                                   |                         |                                   |
| Building Approval Date<br>06/29/2023                              | Use Group/Code<br>E               | Occupancy Limit<br>8672 | Maximum Under 2 ½                 |
| Fire Inspection Approval Date<br>12/19/2024                       | Food Service Risk Level<br>Exempt |                         |                                   |

| Inspection Information         |                                     |                          |                        |                                  |
|--------------------------------|-------------------------------------|--------------------------|------------------------|----------------------------------|
| Inspection Type<br>Pre-license |                                     | Inspection Scope<br>Full |                        | Inspection Notice<br>Unannounced |
| Inspection Date<br>05/22/2025  |                                     | Begin Time<br>12:30 PM   |                        | End Time<br>1:30 PM              |
| Reviewer:<br>Kathryn Koester   |                                     |                          |                        |                                  |
| Summary of Findings            |                                     |                          |                        |                                  |
| No. Rules Verified<br>58       | No. Rules with Non-compliances<br>8 | No. Serious Risk<br>0    | No. Moderate Risk<br>1 | No. Low Risk<br>7                |

| 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     |
| <b>Total Under 2 ½ Years</b>                              | 0                | 0          | 0         | 0     |
| Older Toddler   |                  | 0          | 0         | 0     |
| Preschool   |                  | 0          | 0         | 0     |
| School Age  |                  | 0          | 0         | 0     |
| <b>Total Capacity/Enrollment</b>                          | 22               | 0          | 0         | 0     |

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

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### 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: 5180:2-12-09 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.

Finding: 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 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.

Corrective Action Plan Due: 06/22/2025

### Low Risk Non-Compliances

**Domain: 02 Safe & Sanitary Environment**

Rule: 5180:2-12-13 Smoke Free Environment

Code: The program is required to post a "No Smoking" sign in a conspicuous place at the main entrance.

Finding: During the inspection, it was determined that a "No Smoking" sign was not displayed in a conspicuous place at the main entrance. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/22/2025

**Domain: 03 Postings & Equipment**

Rule: 5180:2-12-16 Medical, Dental, and General Emergency Plan

Code: The program is required to post and implement the JFS 01242 "Medical, Dental, and General Emergency Plan" when necessary.

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

1. The plan was not posted in each classroom.
2. The plan was not posted in other spaces used by children.
3. The name, address and telephone number of the program were not complete.
4. The location of first aid kit, fire extinguishers and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.
5. 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.
6. Location of children's records was not complete.
7. Emergency information including any medications or supplies needed in the event of an evacuation was not complete.
8. The current version of the prescribed form was not used.

9. 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: 06/22/2025

### **Domain: 03 Postings & Equipment**

Rule: 5180:2-12-17 Daily Schedule

Code: The program is required to have the daily program schedule posted in all required areas.

Finding: During the inspection, it was determined that a copy of the daily program schedule was not posted in the classroom area as required. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/22/2025

### **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) 9, 10, 14 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).

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

Corrective Action Plan Due: 06/22/2025

**Domain: 08 Staff Files**

Rule: 5180:2-12-08 Child Care Staff Member Educational Requirements

Code: The program staff is required to have educational verification on file at the program.

Finding: In review of the staff records, it was determined that verification of a high school education for the child care staff member(s) listed on the Employee Record Chart, did not meet the requirements as listed in number(s) 1 below:

1. Verification of completion of a high school education was not on file.
2. Documentation was incomplete or not on file for a high school junior or senior who is enrolled in a career-technical program.
3. Documentation was not on file for a high school junior or senior who is also enrolled in a college credit program in child development or early childhood education.
4. Documentation was not on file for a high school junior or senior who is enrolled in a Child Development Associate (CDA) training program.

Submit the program's corrective action plan, which includes a copy of the education verification, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 06/22/2025

**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.

**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: 06/22/2025

#### **Domain: 08 Staff Files**

**Rule:** 5180:2-12-07 Administrator Responsibilities/Requirements

**Code:** The program administrator is required to maintain current employee records in the Ohio Professional Registry.

**Finding:** During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 1, 4, 5 below:

1. At least one administrator, employee or child care staff member (including substitutes) had not created a profile.
2. At least one administrator, employee or child care staff member had not created an employment record for the program on or before their first day of employment.

3. At least one administrator, employee or child care staff member had not updated changes to positions or roles within five calendar days of the change.
4. The administrator had not assigned at least one employee or child care staff member to the program's organization dashboard.
5. At least one individual's schedule was not current.
6. At least one individual's position or role did not include an applicable group assignment.
7. At least one individual's employment had not been end dated.
8. Other: [ ]

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

Corrective Action Plan Due: 06/22/2025

### 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 |
| 5180:2-12-04 Building Department Inspection | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-03 Inspection Requirements        | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-02 Current Information            | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-04 Fire Inspection                | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |

|   |           |   |
|---|-----------|---|
| 5180:2-12-04 Food Service Requirements                        | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5180:2-12-07 Administrator Qualifications                     | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5180:2-12-07 Written Program Policies and Procedures          | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5180:2-12-08 Orientation Training & Whistle Blower Protection | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5180:2-12-10 Health Training Requirements                     | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5180:2-12-11 Indoor Space Requirements                        | Compliant |   |
| 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 Requirements                       | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5180:2-12-11 Outdoor Play Fall Zones                    | Compliant | Documenting Statement: The protective material used under outdoor equipment was wood mulch and poured rubber surface. |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5180:2-12-12 Safe Environment                                 | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5180:2-12-12 Safe Equipment                                   | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5180:2-12-13 Sanitary Equipment and Environment               | Compliant |   |





| Rule  | Status    | Documenting Statement(s), If applicable |
|---|-----------|---|
| 5180:2-12-16 Management of Communicable Disease | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-17 Materials and Equipment            | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-18 License Capacity                   | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-22 Meal and Snack Requirements        | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5180:2-12-22 Safe Food Handling/Storage         | Compliant |   |