



## 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 @ Bio-Med | Program Number<br>2250031732      | Program Type<br>Child Care Center |                   |
| Address<br>4519 OH 303 Ravenna<br>OH<br>44266   |                                   | County<br>PORTAGE                 |                   |
| Building Approval Date                          | Use Group/Code<br>School Building | Occupancy Limit                   | Maximum Under 2 ½ |
| Fire Inspection Approval Date                   | Food Service Risk Level<br>Exempt |                                   |                   |

| Inspection Information         |                          |                                  |
|--------------------------------|--------------------------|----------------------------------|
| Inspection Type<br>Provisional | Inspection Scope<br>Full | Inspection Notice<br>Unannounced |
| Inspection Date<br>01/12/2026  | Begin Time<br>3:30 PM    | End Time<br>6:07 PM              |
| Reviewer:<br>Michele Matheny   |                          |                                  |

| Summary of Findings      |                                     |                       |                        |                   |
|--------------------------|-------------------------------------|-----------------------|------------------------|-------------------|
| No. Rules Verified<br>58 | No. Rules with Non-compliances<br>4 | No. Serious Risk<br>0 | No. Moderate Risk<br>0 | No. Low Risk<br>4 |

| 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          | 20        | 20    |
| <b>Total Capacity/Enrollment</b>                          | 36               | 0          | 20        | 20    |

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

|            |                          |        |  |
|------------|--------------------------|--------|--|
| School Age | School-Age to < 11 years | 1 to 6 |  |
| School Age | School-Age to < 11 years | 1 to 1 |  |

**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: 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) 4 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: 02/11/2026

**Domain: 08 Staff Files**

Rule: 5180:2-12-07 Administrator Qualifications

Code: The program is required to maintain a qualified administrator.

Finding: During the inspection, it was determined the program did not have a qualified administrator as noted in number(s) 1 below:

1. There is no qualified administrator
2. The appointed administrator's CDA has expired
3. The appointed administrator's CPL no longer meets qualifications
4. Other [ ]

Submit additional documentation of education qualifications/experience as outlined in Appendix A of this rule, or a new individual must be appointed and documentation submitted. To name a new administrator, an administrator amendment must be submitted through the licensing system, OCLQS. Submit the program's

corrective action plan, which includes documents to support qualifications for the newly requested administrator, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 02/11/2026

**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: 02/11/2026

**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: 02/11/2026

### Rules In-Compliance/Not Verified

| Rule                                 | Status    | Documenting Statement(s), If applicable  |
|--------------------------------------|-----------|--|
| Rule: 5180:2-12-02 License Posted    | Compliant | Documenting Statement: The license was in a location visible to parents as required.                                     |
| 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 |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| Rule: 5180:2-12-04 Fire Inspection   | Compliant | Documenting Statement: This program serves only school age children in a public or chartered non-public school building. |

| Rule  | Status    | Documenting Statement(s), If applicable   |
|---|-----------|---|
| Rule: 5180:2-12-04 Food Service Requirements                        | Compliant | Documenting Statement: The program has obtained a food service exemption status from the local health department.   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5180:2-12-07 Administrator Responsibilities/Requirements            | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5180:2-12-07 Written Program Policies and Procedures          | Compliant | Documenting Statement: No changes have been made to the written policies and procedures since it was last approved by this Department.  |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5180:2-12-08 Child Care Staff Member Educational Requirements | Compliant | Documenting Statement: All Child Care Staff Members had verification of educational requirements on file at the program.  |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5180:2-12-08 Orientation Training & Whistle Blower Protection       | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5180:2-12-09 Background Check Requirements                    | Compliant | Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed.  |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| Rule: 5180:2-12-10 Health Training Requirements                     | Compliant | Documenting Statement: The program had at least one Child Care Staff Member with currently valid training in First Aid, Management of Communicable Disease, CPR, and Child Abuse Prevention present and readily accessible during all hours of operation. |
| Rule  | Status    | Documenting Statement(s), If applicable   |
| 5180:2-12-10 Professional Development Requirements                  | Compliant |   |

| Rule  | Status    | Documenting Statement(s), If applicable  |
|---|-----------|--|
| 5180:2-12-11 Outdoor Space Requirements                 | Compliant |  |
| 5180:2-12-11 Indoor Space Requirements                  | Compliant |  |
| 5180:2-12-12 Safe Equipment                             | Compliant |  |
| 5180:2-12-12 Safe Environment                           | Compliant |  |
| 5180:2-12-13 Sanitary Equipment and Environment         | Compliant |  |
| 5180:2-12-13 Handwashing Requirements                   | Compliant |  |
| 5180:2-12-13 Smoke Free Environment                     | Compliant |  |
| Rule: 5180:2-12-15 Child Medical and Enrollment Records | Compliant | Documenting Statement: At the time of the inspection, 25% of the children's records were reviewed, and the records were complete, as required by the rule. |
| Rule: 5180:2-12-15 Medical/Physical Care Plans          | Compliant | Documenting Statement: The program had current information on the medical status and the required treatment plan for the children with health conditions.  |
| 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  | Status    | Documenting Statement(s), If applicable   |
|---|-----------|---|
| Rule: 5180:2-12-16 First Aid/Standard Precautions     | Compliant | Documenting Statement: During the inspection, the program had complete first aid kits available as required.  |
| Rule: 5180:2-12-16 Management of Communicable Disease | Compliant | Documenting Statement: The JFS 08087 "Communicable Disease Chart" was posted and was readily available to staff and parents.                                |
| Rule: 5180:2-12-16 Incident/Injury Reporting          | Compliant |   |
| Rule: 5180:2-12-18 Attendance Records                 | Compliant |   |
| Rule: 5180:2-12-18 Group Size                         | Compliant |   |
| Rule: 5180:2-12-17 Daily Schedule                     | Compliant | Documenting Statement: Daily schedules were observed posted.  |
| Rule: 5180:2-12-17 Materials and Equipment            | Compliant |   |
| Rule: 5180:2-12-17 Daily Outdoor Play                 | Compliant |   |
| Rule: 5180:2-12-18 License Capacity                   | Compliant |   |
| Rule: 5180:2-12-18 Ratio                              | Compliant | Documenting Statement: The Appendix A "Staff/Child Ratios, Age Grouping and Maximum Group Size" was posted in a noticeable area at the program as required. |

| Rule   | Status    | Documenting Statement(s), If applicable                                       |
|--|-----------|---|
| 5180:2-12-19 Supervision                     | Compliant |   |
| 5180:2-12-19 Child Guidance                  | Compliant |   |
| 5180:2-12-22 Meal and Snack Requirements     | Compliant |   |
| 5180:2-12-22 Safe Food Handling/Storage      | Compliant |   |
| 5180:2-12-22 Fluid Milk Requirements         | Compliant |   |
| Rule: 5180:2-12-25 Medication Administration | Compliant | Documenting Statement: The program's policy was not to administer medication. |
| 5180:2-12-04 Building Department Inspection  | Compliant |   |