



Center Complaint Inspection Summary 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 The University of Preschool & Childcare Center	Program Number 2250031849	Program Type Child Care Center
Address 2600 w. sylvania Ave ste 104 toledo OH 43613		County LUCAS

Inspection Information				
Inspection Type Complaint	Inspection Scope Partial	Inspection Notice Unannounced		
Reviewer(s) ELLEN WOODRUFF	Inspection Day 10/21/2025	Begin Time 7:00 AM		
Summary of Findings				
No. Rules Verified 10	No. Rules with Non-compliances 8	No. Serious Risk 0	No. Moderate Risk 2	No. Low Risk 6

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
Mixed group	0 to < 12 months	1 to 11	

Complaint Allegations

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.

Domain:01 Ratio & Supervision

Rule: 5180:2-12-20 Cots and Napping

Code: The program is required to provide enough cots or mats for each child in attendance to be assigned their individual cot/mat. Cots and mats must be firm, resilient, and in good condition.

Allegation: Children are not provided cots or mats and are permitted to sleep on the floor.

Determination: Substantiated

Findings: During the inspection, it was determined that cots or mats did not meet the requirements as noted in number 2 below:

1. The program did not have enough individually assigned cots and/or mats for each child.
2. Child were sleeping on the floor.
3. Frames were bent/broken.
4. Covers were torn.
5. Cots were missing bolts.
6. Cots were sagging.
7. Legs on the cots were broken.
8. Cots did not stand at least 3 inches but no more than 18 inches off the floor.
9. Cots were not at least 36 inches in length and as long as the child is tall.
10. Mats were not at least 1 inch thick and as wide and long as the child assigned.
11. 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.

Risk Level: Low

Domain:01 Ratio & Supervision

Rule: 5180:2-12-19 Supervision

Code: The program staff is required to supervise children in their assigned group by sight and hearing. Supervision includes being near enough to respond and reach children immediately and protecting them from harm.

Allegation: Children are not being properly supervised.

Determination: Substantiated

Findings: During the inspection, it was determined that children were left unattended while inside the program as noted in number(s) 8 below:

1. Child(ren) were left unattended once.
2. Child(ren) were left unattended more than once.

3. Child(ren) left the group and were unattended.
4. Child care staff were using a baby monitor to supervise children.
5. Child care staff were using a walkie talkie to supervise children.
6. Child care staff were using mirrors to view children in another room.
7. Child care staff were using a video camera instead of physically being present in the room.
8. Other: a school age child left the group for an extended length of time without checking on their whereabouts.

Children must be supervised and within sight and hearing of a child care staff member at all times. 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.

Risk Level: Moderate

Corrective Action Plan Due: 12/03/2025

Domain:06 Program Information

Rule: 5180:2-13-21 Evening and Overnight Care

Code: The program is required to provide adequate lighting in all areas, including bathrooms, hallways, sleeping rooms and outdoor walkways and entrances.

Allegation: Center did not provide adequate lighting.

Determination: Substantiated

Findings: During the inspection, it was determined that adequate lighting was not provided as noted in number 2 below:

1. Lighting was inadequate outdoors in the [walkway/home entrances].
2. Child care staff were not able to see children due to inadequate lighting in the middle, left room where children were sleeping.

Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule..

Risk Level: Low

Corrective Action Plan Due: 12/06/2025

Summary of Additional Non-Compliances

Serious Risk Non-Compliances

No Additional Serious Risk Non-Compliances were observed during this inspection

Moderate Risk Non-Compliances

Domain:01 Ratio & Supervision

Rule: 5180:2-12-18 Ratio

Code: The program is required to maintain the appropriate staff to child ratio for each group served.

Findings: During the inspection, a ratio of 1 child care staff member for 11 children was determined to have occurred for the mixed age overnight group, which included an infant when the situation in number 15 below occurred:

1. A child care staff member stepped out of the room.
2. A child care staff member had not arrived at work on time.
3. Children were present who were not scheduled to be there.
4. A child care staff member was unable to work.
5. A child was injured in that group.
6. A child arrived in the group before a second staff member was scheduled to arrive with the group.
7. Two groups were combined, and the program did not follow the ratio for the youngest child in the group.
8. A child was transitioning to the next older age group, and the program did not follow the ratio for the youngest child in the group.
9. Ratio was doubled for more than two hours while children were napping.
10. Ratio was doubled while children were napping for a group that included at least one infant.
11. Ratio was doubled while children were napping and there were not enough staff members in the building to meet staff/child ratio.
12. Ratio was doubled in the school age group to allow access to the program, however, the program does not serve only school age children.
13. Both child care staff members did not have a working communication device when one staff member left the group to allow access to the school age only program.
14. The child care staff member did not return to the group after allowing access to the school age only program.
15. Other: only 1 child care staff member was scheduled to work.

Additional child care staff members must be hired or current child care staff members must be rescheduled to maintain compliance. 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: 12/03/2025

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.

Findings: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in numbers 2, 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 the 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: 12/03/2025

Domain:05 Health & Safety

Rule: 5180:2-12-16 Incident/Injury Reporting

Code: The program is required to submit notification of a serious incident in OCLQS by the next business day.

Findings: During the inspection, it was determined that a Serious Incident was not reported in the Ohio Child Licensing and Quality System (OCLQS), as required, by the program administrator or designee for an incident(s) as listed in number 2 below:

1. An incident, injury or illness that required professional medical consultation or treatment.
2. An unusual or unexpected incident which jeopardizes the safety of a child, child care staff member or employee of the program when the smoke alarm was triggered due to burnt popcorn and caused the fire dept to investigate.
3. An incident defined as a serious risk non-compliance in appendix A to rule 5101:2-12-03 of the Administrative Code.
4. The program did not submit the report in OCLQS by the next business day as required by rule.

Submit the program's corrective action plan, which includes a statement that the program administrator or designee has completed the Serious Incident Report in OCLQS, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/03/2025

Domain:07 Diapering & Infant Care

Rule: 5180:2-12-20 Cribs

Code: The program is required to space cribs two feet apart when in use.

Findings: During the inspection, it was determined that cribs were not two feet apart when in use, as required by this rule. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. Provide a written response assuring compliance with this rule.

Corrective Action Plan Due: 12/03/2025

Domain:08 Staff Files

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

Code: The program administrator is required to be onsite at the program for the required amount of time.

Findings: During the inspection, it was determined that the program did not have at least one administrator onsite for 50 percent of the program's operating hours or 40 hours a week, as required by this rule. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/03/2025