



## 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 KCE Champions LLC @ Middletown Preparatory and Fitness Academy	Program Number 2250032154	Program Type Child Care Center	
Address 816 2nd Ave. Middletown OH 45044		County BUTLER	
Building Approval Date	Use Group/Code	Occupancy Limit	Maximum Under 2 ½
Fire Inspection Approval Date	Food Service Risk Level		

Inspection Information		
Inspection Type Pre-license	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 08/07/2025	Begin Time 11:00 AM	End Time 3:53 PM
Reviewer: BRENDA MEYER		

Summary of Findings				
No. Rules Verified 58	No. Rules with Non-compliances 3	No. Serious Risk 0	No. Moderate Risk 1	No. Low Risk 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
<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>	54	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: 04 Indoor/Outdoor Space**

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

Code: The program is required to provide adequate fall surface for the outdoor play space.

Finding: During the inspection, it was determined that the playground did not have adequate fall surface under and around equipment as noted in number 2 below:

1. No fall surface
2. Adequate fall surface to soften the impact of a fall
3. Adequate fall surface to soften the impact of a fall that extended the length of the required fall zone
4. Other [ ]

With any equipment designed for climbing, swinging, bouncing, or sliding, resilient material, as specified in Appendix A, needs to be added in order to protect children in the event of a fall. Submit the program’s corrective action plan, which includes written verification of the discontinued use of this equipment until corrections are made along with a description of the resilient material added, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/06/2025

### Low Risk Non-Compliances

#### 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 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. Cafeteria table was leaning against the wall on it's side.

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: 09/06/2025

**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 2 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: 09/06/2025

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-16 Written Disaster Plan	Compliant	
Rule: 5180:2-12-02 License Posted	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding posting the program's license were discussed.
5180:2-12-04 Building Department Inspection	Compliant	
5180:2-12-03 Inspection Requirements	Compliant	
5180:2-12-02 Current Information	Compliant	
5180:2-12-04 Fire Inspection	Compliant	
5180:2-12-04 Food Service Requirements	Compliant	
5180:2-12-07 Administrator Qualifications	Compliant	
5180:2-12-05 Denial, Revocation and Suspension	Compliant	
5180:2-12-07 Administrator Responsibilities/Requirements	Compliant	
5180:2-12-07 Written Program Policies and Procedures	Compliant	
Rule	Status	Documenting Statement(s), If applicable

5180:2-12-08 Child Care Staff Member Educational Requirements	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
5180:2-12-09 Background Check Requirements	Compliant	
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 Indoor Space Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-11 Separation of Children Under 2 1/2 Years	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
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
5180:2-12-13 Handwashing Requirements	Compliant	
Rule: 5180:2-12-13 Smoke Free Environment	Compliant	Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program.
5180:2-12-15 Child Medical and Enrollment Records	Compliant	
5180:2-12-15 Medical/Physical Care Plans	Compliant	
Rule: 5180:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	Documenting Statement: On the day of the inspection, the complete prescribed JFS 01242 "Medical, Dental, and General Emergency Plan For Child Care" were posted in the program as required.
5180:2-12-16 Emergency Drills	Compliant	
Rule: 5180:2-12-17 Daily Schedule	Compliant	Documenting Statement: Daily schedules were observed posted.
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 First Aid/Standard Precautions	Compliant	Documenting Statement: During the inspection, the program had complete first aid kits available as required.
Rule	Status	Documenting Statement(s), If applicable

5180:2-12-16 Incident/Injury Reporting	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5180:2-12-17 Materials and Equipment	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5180:2-12-17 Daily Outdoor Play	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5180:2-12-18 Ratio	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5180:2-12-18 License Capacity	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5180:2-12-18 Group Size	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
Rule: 5180:2-12-18 Attendance Records	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding attendance records were discussed.
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5180:2-12-19 Supervision	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5180:2-12-19 Child Guidance	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5180:2-12-22 Fluid Milk Requirements	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5180:2-12-22 Meal and Snack Requirements	Compliant	
<b>Rule</b>	<b>Status</b>	<b>Documenting Statement(s), If applicable</b>
5180:2-12-22 Safe Food Handling/Storage	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5180:2-12-24 Swimming and Water Safety Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5180:2-12-25 Medication Administration	Compliant	