Department of Children & Youth

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 HEAVEN SENT CHILDREN'S ACADEMY	Program Number 000000400157	Program Type Child Care Center
Address 5616 GENDER RD. CANAL WINCHESTE OH 43110		County FRANKLIN

Inspection Information			
Inspection Type Complaint		Inspection Scope Partial	Inspection Notice Unannounced
Reviewer(s) BEVERLY JAMES	Inspection Day 03/11/2025	Begin Time 8:33 AM	End Time 10:30 AM

Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
4	4	0	2	2

Staff-Child Ratios at the Time of Inspection			
Group	**Age Group/Range**	**Ratio Observed**	**Comment**
Toddler 1	18 months to < 30 months	1 to 8	out of ratio
Infant 2	12 months to < 18 months	2 to 9	
Infant 1	0 to < 12 months	1 to 5	
Toddler 2	3 years to < 4 years	1 to 10	
PreK	4 years to < 5 years	1 to 8	
Preschool Headstart	3 years to < 4 years	2 to 8	
School Age	School-Age to < 11 years	1 to 8	

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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: 5180:2-12-19 Child Guidance
Code: The program staff shall use developmentally appropriate techniques when managing children's behavior. Corporal punishment is prohibited, as well as any cruel, harsh, unusual or extreme techniques.

Allegation: The program staff did not use developmentally appropriate techniques when managing children's behavior. Corporal punishment is prohibited, as well as any cruel, harsh, unusual or extreme techniques.

Determination: Substantiated

Findings: During the inspection, it was determined that a Child Care Staff Member had used the inappropriate techniques in number(s) 1 below when managing unacceptable behavior in children:

1. Utilize cruel, harsh, unusual, or extreme techniques; (CCSM pinched child. CCSM was fired.)
2. Utilize any form of corporal punishment;
3. Delegate children to manage or discipline other children;
4. Use physical restraints on a child;
5. Restrain a child by prone restraint or any means other than holding children for a short period of time, such as in a protective hug, so that the children may regain control;
6. Place children in a locked room or confine children in any enclosed area;
7. Confine children to equipment such as cribs or highchairs;
8. Humiliate, threaten or frighten children;
9. Subject children to profane language or verbal abuse;
10. Make derogatory or sarcastic remarks about children or their families;
11. Punish children for failure to eat or sleep or for toileting accidents;
12. Withhold any food (including snacks and treats), rest or toilet use;
13. Punish an entire group of children due to the unacceptable behavior of one or a few;
14. Isolate and restrict children from all activities for an extended period of time.

Child Care Staff Members and other employees must always use appropriate guidance and management methods with children. 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: 04/19/2025

Domain:05 Health & Safety

Rule: 5180:2-12-16 Incident/Injury Reporting
Code: The program is required to complete the JFS 01299 "Incident/Injury Report" for injuries and incidents at the program, provide a copy to the person who picks the child up on the day of the incident, and retain a copy of the form onsite at the program for one year.

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Allegation: The program did not complete the JFS 01299 "Incident/Injury Report" for injuries and incidents at the program, provide a copy to the person who picks the child up on the day of the incident, and retain a copy of the form onsite at the program for one year.

Determination: Substantiated

Findings: In review of the records, it was determined the program did not meet the requirements for completing a JFS 01299 "Incident/Injury Report" as noted in number(s) 4 below:

1. The JFS 01299 was not completed when a child became ill or received an injury which required first aid treatment.
2.The JFS 01299 was not completed when a child was transported to a source for emergency assistance.
3. The JFS 01299 was not completed when a child received a bump or blow to the head.
4. The JFS 01299 was not completed when an unusual or unexpected incident which jeopardized the safety of a child or employee of a program.
5. The parent or a person picking up the child did not receive the JFS 01299 on the day of the incident.
6. The program information (program name, number, address) was incomplete on the JFS 01299.
7. Child's name was incomplete on the JFS 01299.
8. Child's birthdate was incomplete on the JFS 01299.
9. Name of person(s) responsible for the child at the time of the incident was incomplete on the JFS 01299.
10. Number of children present in the group at the time of the incident was incomplete on the JFS 01299.
11. Date and/or time of the incident was incomplete on the JFS 01299.
12. Whether or not parents were contacted was incomplete on the JFS 01299.
13. Complete summary of the incident was incomplete on the JFS 01299.
14. Accurate summary of the incident was incomplete on the JFS 01299.
15. Name and/or signature of the person completing the form was incomplete on the JFS 01299.
16. The JFS 01299 was not kept on file at the program for at least one year.
17. 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 required at this time.

Risk Level: Low

Corrective Action Plan Due: 04/19/2025

Summary of Additional Non-Compliances

Serious Risk Non-Compliances

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

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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(s) for 8 children was determined to have occurred for the Toddler 1 group when the situation in number(s) 2 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 [ ].

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: 04/19/2025

Low Risk Non-Compliances

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 including responding to the child's basic needs and protecting them from harm.

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Findings: During the inspection, it was determined that children were not being properly supervised as noted in number(s) 5 below:

1. Child(ren) were not within both sight and hearing of a child care staff member during indoor play.
2. Child(ren) were not within both sight and hearing of a child care staff member during outdoor play.
3. Child(ren) were not within both sight and hearing of a child care staff member more than once.
4. Staff were not physically present in the space and near enough to respond and reach the child(ren) immediately.
5. Other: (Child(ren) were not within both sight and hearing of a child care staff member. Preschool child was in restroom by themselves with door closed.)

Children must be supervised according to rule and within both 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.

Corrective Action Plan Due: 04/19/2025