Department of Education
Department of Job and Family Services

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 Great Beginnings Child Care LLC	Program Number 2170015643	Program Type Child Care Center
Address 3595 Sullivant Ave Columbus OH 43228		County FRANKLIN

Inspection Information			
Inspection Type Complaint		Inspection Scope Partial	Inspection Notice Unannounced
Reviewer(s) STEPHANIE WALTERS	Inspection Day 10/21/2024	Begin Time 11:15 AM	End Time 11:35 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**
Toddlers	18 months to < 30 months	2 to 12	
Infants	0 to < 12 months	1 to 6	NR was with group, but not counted in ratio
School age	School-Age to < 11 years	1 to 27	
Preschool	3 years to < 4 years	2 to 20	

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: 5101:2-12-18 Ratio
Code: The program is required to maintain the appropriate staff to child ratio for each group served.

Allegation: It is alleged that the program does not always maintain the required staff/child ratios in the Infant room.

Determination: Substantiated

Findings: During the inspection, required staff/child ratios were not maintained for different groups on multiple occasions, as noted below:

The ratio determined for the Infant group was 1 Child Care Staff Member(s) for 6 children which included children younger than 12 months old. Additionally, a ratio of 1 Child Care Staff Member(s) for 27 children was determined for the School Age group.

Additional 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.

Risk Level: Moderate

Corrective Action Plan Due: 11/20/2024

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:08 Staff Files

Rule: 5101:2-12-09 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.

Findings: 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, 2, 3 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: 11/20/2024

Low Risk Non-Compliances

Domain:00 License & Approvals

Rule: 5101:2-12-02 Current Information
Code: The rule requires the program to request an administrator amendment, and submit qualifications for a new administrator, within thirty days of the change.

Findings: During the inspection, it was determined that a change of administrator had been made and the owner or administrator had failed to provide notification of this change to the Department and/or submit qualifications for the new administrator within 30 days. A license is only valid for the licensee, administrator, address and license capacity designated on the license. Submit the request to amend the license and any required documentation, if applicable, through the licensing system, OCLQS. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/20/2024

Domain:08 Staff Files

Rule: 5101:2-12-08 Medical Statement
Code: The program staff's medical statements are required to be completed and on file at the program.

Findings: 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: 11/20/2024