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 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) Andrea Clark	Inspection Day 11/24/2025	Begin Time 1:35 PM	End Time 2:05 PM
Reviewer(s) Megan Wolford	Inspection Day 11/24/2025	Begin Time 1:35 PM	End Time 2:05 PM

Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
5	4	0	2	2

Staff-Child Ratios at the Time of Inspection			
Group	**Age Group/Range**	**Ratio Observed**	**Comment**
School Age	School-Age to < 11 years	1 to 23	
Preschool	18 months to < 30 months	2 to 23	Nap ratio with 1 child under 2 1/2.
Toddler	12 months to < 18 months	1 to 16	Nap ratio with 2 children from the infant room under 18 months.
Infant	0 to < 12 months	1 to 5	

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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.

No Complaints were observed during this inspection.

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, required staff/child ratios were not maintained for the School Age, Preschool & Toddler groups on multiple occasions, as noted below:

The ratio determined for the School Age group was 1 Child Care Staff Member(s) for 23 children. Additionally, a ratio of 1 Child Care Staff Member(s) for 16 children was determined for the Toddler group with 2 infants in attendance for nap and a

ratio of 2 child care staff members for 23 children in the Preschool group that had a child under the age of 2 1/2 in attendance for nap.

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.

Corrective Action Plan Due: 12/24/2025

Domain:07 Diapering & Infant Care

Rule: 5180:2-12-20 Cribs
Code: The program staff is required to remove any items listed in rule that are a potential suffocation risk from cribs.

Findings: During the inspection, it was determined that a child had been placed in a crib with an object that created a potential strangulation or suffocation risk, as indicated in number(s) 6 & 12 below:

1. Bib
2. Pacifier clip/ribbon
3. Teething jewelry
4. Blanket for infant under twelve months old
5. Pillow
6. Boppie
7. Bumper pad
8. Clothing stored in the crib
9. Diaper bag
10. Object or toy strung over the crib in which a child can pull himself up
11. Stuffed animal that is large/soft enough to conform to the shape of the child's face
12. Infant bottle.

The rule prohibits any item which obstructs child-care staff's visibility or poses a risk of strangulation or suffocation from being placed on or in a crib. Remove the item(s) immediately. 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: 12/24/2025

Low Risk Non-Compliances

Domain:01 Ratio & Supervision

Rule: 5180:2-12-18 Group Size
Code: The program is required to maintain the appropriate group size for each group of children served.

Findings: During the inspection, group size limitations were not maintained for the Toddler group with 2 infant children in attendance there were 16 children for nap & for the Preschool group there were 23 children during nap with 1 child under the age of 2 1/2. The group size shall not exceed twice the maximum number of children allowed per Child Care Staff

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Member. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/24/2025

Domain:01 Ratio & Supervision

Rule: 5180:2-12-18 Attendance Records
Code: The program is required to have a method for tracking the children in each group. The tracking method must be updated throughout the day and kept with the group at all times.

Findings: During the inspection, it was determined that the method for tracking children in each group did not meet the requirements of the rule as noted in number(s) 1 below:

1. There was no method in place; (for use between infants and toddlers)
2. The method did not include each child's name;
3. The method did not include each child's date of birth;
4. The tracking method did not remain with the group at all times;
5. The tracking method was not updated throughout the day as children entered or left the group.

Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/24/2025