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 GLTX/Daddys at Work ChildCare Center	Program Number 2230028123	Program Type Child Care Center
Address 315 South Collins Avenue Lima OH 45804		County ALLEN

Inspection Information			
Inspection Type Complaint		Inspection Scope Partial	Inspection Notice Unannounced
Reviewer(s) SARA DIERKSHEIDE	Inspection Day 03/26/2025	Begin Time 9:00 AM	End Time 12:30 PM

Summary of Findings				
No. Rules Verified	No. Rules with Non-compliances	No. Serious Risk	No. Moderate Risk	No. Low Risk
7	4	0	3	1

Staff-Child Ratios at the Time of Inspection			
Group	**Age Group/Range**	**Ratio Observed**	**Comment**
Infants	0 to < 12 months	2 to 10	
Wobblers	12 months to < 18 months	2 to 8	
Toddlers	18 months to < 30 months	2 to 9	
Preschool	3 years to < 4 years	0 to 7	Girls RR group
Preschool	3 years to < 4 years	1 to 8	Boys RR group
Preschool	3 years to < 4 years	2 to 15	

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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: Staff are using inappropriate guidance and discipline with children.

Determination: Substantiated

Findings: During the inspection, it was determined that a Child Care Staff Member had used the inappropriate techniques in number(s) 1, 2 below when managing unacceptable behavior in children:

1. Utilize cruel, harsh, unusual, or extreme techniques;
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: 04/25/2025

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.

Allegation: The program is out of ratio

Determination: Substantiated

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Findings: During the inspection, a ratio of 0 child care staff member(s) for 7 children was determined to have occurred for the preschool group when the situation in number(s) 1 below occurred:

1. A child care staff member stepped out of the room- preschool girls left alone in restroom.
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.

Risk Level: Moderate

Corrective Action Plan Due: 04/25/2025

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: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) 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. Other : 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: 04/25/2025

Low Risk Non-Compliances

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(s) 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.
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.

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Corrective Action Plan Due: 04/25/2025