



## 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 YMCA PRESCHOOL LEARNING CENTER	Program Number 000000101996	Program Type Child Care Center	
Address 600 MONROE STREET DOVER OH 44622			County TUSCARAWAS
Building Approval Date 05/13/2016	Use Group/Code E	Occupancy Limit 141	Maximum Under 2 ½
Fire Inspection Approval Date 08/05/2021	Food Service Risk Level Exempt		

Inspection Information		
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 01/11/2023	Begin Time 8:30 AM	End Time 9:30 AM
Inspection Date 01/11/2023	Begin Time 4:15 PM	End Time 6:30 PM
Reviewer: SARAH HEIL-HINTON		
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Summary of Findings				
No. Rules Verified 58	No. Rules with Non-compliances 20	No. Serious Risk 0	No. Moderate Risk 8	No. Low Risk 17

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	30	30
School Age		0	21	21



Total Capacity/Enrollment	104	0	51	51
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Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
AM Preschool	12 months to < 18 months	2 to 16	Music Activity/Circle Time
AM Preschool	12 months to < 18 months	2 to 16	Free play/Small Group Activities
School Age After Care	12 months to < 18 months	2 to 15	Snack/Activity Centers
School Age After Care	12 months to < 18 months	2 to 9	Gross Motor Activity

#### 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 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.

#### Serious Risk Non-Compliances

No Serious Risk Non-Compliances were observed during this inspection

#### Moderate Risk Non-Compliances

##### Domain: 00 License & Approvals

Rule: 5101:2-12-18 License Capacity

Code: The program is required to maintain the capacity that is indicated on the license.

Finding: During the inspection, it was determined that there were 16 total children with 1 child under 2 1/2. The program is currently licensed to serve 104 total children, with no more than 0 children under 2 1/2. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.



Corrective Action Plan Due: 03/01/2023

**Domain: 00 License & Approvals**

Rule: 5101:2-12-04 Fire Inspection

Code: The program is required to have all spaces used for child care inspected by the fire department or the state fire marshal's office prior to serving children. The program is required to obtain a fire inspection without any uncorrected violations within 12 months from the date of the last fire inspection. If violations are noted during the inspection, the program is required to have all violations corrected and have the program re-inspected to obtain a completed fire form.

Finding: During the inspection, it was determined the program did not meet the requirements for fire inspection as noted in number(s) 1 below:

1. The program did not have documentation on file for a fire inspection without any uncorrected violations within 12 months from the date of the last fire inspection and the request for the new inspection was not made at least 30 days prior to the expiration of the previous fire inspection.
2. The documentation for the most recent fire inspection contained violations that had not been corrected.
3. The [ ] space was being used and had not been approved by the fire department or the state fire marshal's office for child care.

Submit the program's corrective action plan, which includes an updated fire inspection without any uncorrected violations, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/01/2023

**Domain: 00 License & Approvals**

Rule: 5101:2-12-04 Building Department Inspection

Code: The program is required to refrain from using space that did not receive building approval and from caring for children in spaces not approved for that age group. The program is required to refrain from using a remodeled or modified space before obtaining building approval. The program is required to maintain building occupancy limitations.

Finding: During the inspection, it was determined the program was using space for child care in a manner that was not approved by the Ohio Department of Commerce or local certified building authority as noted in number(s) 7 below:

1. The [ ] room or space was not approved.
2. Children under school age were being cared for in a building only approved for school age.





3. The space had been modified and not yet re-inspected and approved.
4. The [ ] floor, which had not been approved by the building department for child care, was being used.
5. The building limitation had been exceeded. [ ] children were being cared for and the building had been approved for [ ] children.
6. The [ ] room(s) occupancy had been exceeded. [ ] children were being cared for in this space that had been approved for [ ] children.
7. Care was provided to 1 child less than two and one-half years of age. This violated the program's building code limitation in that, no children under two and one-half years of age were to be cared for.

Submit the program's corrective action plan, which includes building approval for use of this space, a written statement that the building occupancy limitations are being maintained, or a written statement that it is no longer being used, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/01/2023

#### 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.

Finding: During the inspection, a ratio of 2 child care staff member(s) for 16 children was determined to have occurred for the preschool group when the situation in number(s) 15 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: a staff member brought their 18 month old to work and he was present in the classroom.

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: 03/01/2023

#### **Domain: 05 Health & Safety**

Rule: 5101:2-12-22 Meal and Snack Requirements

Code: Meals and snacks provided or served by the program must include all required food groups and meet the recommended daily dietary allowances as specified by the USDA.

Finding: During the inspection, it was determined that a meal or snack at the program did not meet the requirements as noted in number(s) 2 below:

1. The breakfast served did not include foods from three of the four food groups.
2. Snack served did not include foods from two of the four food groups.
3. The meal did not provide 1/3 of the recommended daily dietary allowances as specified by the USDA.
4. Juice used to meet the fruit or snack component was not 100% undiluted fruit or vegetable juice.
5. The meal served did not include an item from the meat or meat alternative group.
6. The meal served did not include an item from the bread or grain group.
7. The meal served did not include two items from the fruit/vegetable group.
8. The meal served did not include a vegetable (two fruits were served).
9. The meal served did not include a serving of fluid milk.

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

Corrective Action Plan Due: 03/01/2023

#### **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.

Finding: In review of the staff records, it was determined that background checks were not requested for the person(s) listed on the Employee Record Chart as noted in number(s) 1 below:

1. Submitting the request for a background check for child care in the OPR.
2. Submitting fingerprints electronically according to the process established by BCI.



Submit the program's corrective action plan, which includes a copy of the JFS 01176, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/01/2023

**Domain: 08 Staff Files**

Rule: 5101:2-12-09 Background Check Requirements

Code: The program is required to have documentation from ODJFS, indicating the individual is eligible to be employed in child care, on file before allowing the staff to have sole responsibility of children.

Finding: During the inspection, it was determined that child care staff member(s) had sole responsibility of children in the school age group(s) and neither a preliminary approval nor the JFS 01176 "Program Notification of Background Check Review for Child Care" were on file as required. Submit the program's corrective action plan, which includes a copy of the JFS 01176 or a statement that the child care staff member(s) no longer have sole responsibility of children, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/01/2023

**Domain: 09 Children's Files**

Rule: 5101:2-12-15 Medical/Physical Care Plans

Code: The program is required to have a completed JFS 01236 "Child Medical/Physical Care Plan for Child Care" on file at the program for any child having a health condition. The program is required to implement and/or follow instructions on the JFS 01236 for a child with a health condition.

Finding: A written, signed and dated JFS 01236 "Child Medical/Physical Care Plan for Child Care" must be on file for any child having health conditions which require monitoring for symptoms, or a medical procedure be performed, or ongoing administration of medication or medical foods at the program. In review of the children's records, it was determined that the required written information was either not on file, implemented or followed, for at least one child indicated on the Children Records Review, as noted in number(s) 1 below:

1. No plan was on file (Lactose intolerance & asthma).
2. Child's name was missing.
3. Child's date of birth was missing.
4. Name of the condition was missing.
5. Indication if medication is required was missing.
6. Symptoms to watch for were missing.
7. Directions for when should the medication or medical food be administered were missing.
8. Instructions for administration were missing.
9. Conditions that trigger the need for medication or medical foods were missing.





10. Expected results of the medication or medical food were missing.
11. Actions to be taken if the symptoms do not subside were missing.
12. Activities, foods, environmental conditions to avoid were missing.
13. Training instructions were missing.
14. Directions for action to be taken if expected result of medication or medical food does not occur were missing.
15. Instructions regarding emergency evacuation, if applicable, were missing.
16. Dated signature of parent was missing.
17. Dated signature of certified professional who trained the program staff was missing, if parent was not the trainer.
18. Printed name(s)/Dated signature(s) of child care staff member(s) trained to perform the procedure were missing.
19. Dated signature(s) of administrator was missing.
20. Name of any applicable medication was missing.
21. Date medication was administered was missing.
22. Time medication was administered was missing.
23. Dosage administered was missing.
24. Signature of staff member who administered the medication was missing.
25. Medication listed in the procedures to follow was not onsite available to administer as instructed and alternate instructions for this situation were not included on the plan.
26. The plan was not implemented.
27. The plan was not able to be implemented due to conflicting information.
28. The plan was not followed.

Submit the program's corrective action plan, which includes a copy of the completed JFS 01236, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/01/2023

### Low Risk Non-Compliances

#### Domain: 00 License & Approvals

Rule: 5101:2-12-03 Inspection Requirements

Code: The program is required to respond to noncompliances by the date noted in the inspection report.

Finding: During the inspection, it was determined the program had not responded to the non-compliances addressed in the inspection report dated 4/25/22. The rule requires the program to complete and submit a corrective action plan in OCLQS to address non-compliances detailed in written inspection reports within the timeframe outlined in the report. Submit the program's corrective action plan, which includes a statement that



current and future corrective action plans will be submitted timely, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/01/2023

### Domain: 00 License & Approvals

Rule: 5101:2-12-04 Food Service Requirements

Code: The program is required to refrain from preparing and serving food as stated in their exemption from a food service license.

Finding: During the inspection, it was determined that food was prepared and served in violation of the terms of the program's food service license exemption report which stated the program was exempt as noted in number(s) 4 below:

1. Prepares and serves no food;
2. Prepares and serves food to thirteen or fewer individuals daily;
3. Prepares no food but food is prepared and served by a licensed caterer as directed by Chapter 3717 ORC;
4. Other: The food service exemption refers to the summer school age program but the program operates a before and after school age program as well. It also refers to the Department of Education and is not licensed through ODE.

The program must operate in accordance with the terms of the food service exemption status. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/01/2023

### Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Group Size

Code: The program is required to maintain the appropriate group size for each group of children served.

Finding: During the inspection, group size limitations were not maintained for the group of preschool children and school age children as it was determined there was an infant present in both groups. The group size shall not exceed twice the maximum number of children allowed per Child Care Staff Member. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/01/2023





**Domain: 01 Ratio & Supervision**

Rule: 5101:2-12-18 Attendance Records

Code: The program is required to have the information listed in rule on all attendance records.

Finding: During the inspection, it was determined that the attendance records did not include the required information listed in number(s) 4 below:

1. The name of the child.
2. The birth date of the child.
3. The assigned group.
4. The child's weekly schedule.
5. The time (hours and minutes) of each child's arrival and departure to the program, including transportation by the program.

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

Corrective Action Plan Due: 03/01/2023

**Domain: 05 Health & Safety**

Rule: 5101:2-12-16 Emergency Drills

Code: The program is required to complete fire drills, weather drills, and emergency/lockdown drills appropriately.

Finding: During the inspection, it was determined that the required drills were not completed for item number(s) 3 below:

1. Monthly fire drills.
2. Monthly weather emergency drills (March through September).
3. Emergency/lockdown drills in each quarter of the calendar year (Quarter 4 of 2022).

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

Corrective Action Plan Due: 03/01/2023



**Domain: 06 Program Information**

Rule: 5101:2-12-14 Transportation and Field Trip Procedures

Code: The program is required to have staff trained in CPR, First Aid, and Communicable Diseases on all trips.

Finding: During the inspection, it was determined that a person trained in cardiopulmonary resuscitation (CPR), first aid and management of communicable disease, had not been present for number(s) 1 below as required by the rule:

1. In the vehicle for routine trips;
2. In the vehicle for field trips;
3. At the destination on all field trips.

Secure current training for the area needed or restructure the staff who are currently trained on the vehicle during routine trips and field trips. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/01/2023

**Domain: 06 Program Information**

Rule: 5101:2-12-14 Transportation - Driver Requirements

Code: The program is required to have all drivers transporting children complete the driver training.

Finding: During the inspection, it was determined that at least one employee who is responsible for transporting children did not have documentation of completion of the prescribed driver training as noted in number(s) 1 below:

1. No documentation on file
2. Incomplete documentation

Please refer to the Employee Record Chart which indicates any driver needing current documentation of completion of this training. Complete the training as discussed. 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: 03/01/2023



#### Domain: 06 Program Information

Rule: 5101:2-12-14 Transportation and Field Trip Procedures

Code: The program is required to obtain written parental permission before leaving the premises.

Finding: During the inspection, it was determined that written parental permission was not secured for or routine trips off the premises or out of the areas approved for child care, as required. 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 not required at this time.

#### Domain: 08 Staff Files

Rule: 5101:2-12-08 Orientation Training & Whistle Blower Protection

Code: The program is required to have staff complete the online staff orientation training.

Finding: In review of the staff records, it was determined that child care staff member(s) had not completed the online orientation training as noted in number(s) 1 below:

1. Within 30 days of starting employment at the program as a child care staff member.
2. No documentation of completing the training after December 31, 2016.
3. Completion of the training was not verified in the OPR.

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

Corrective Action Plan Due: 03/01/2023

#### Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to be completed and on file at the program.

Finding: In review of the staff records, it was determined a completed medical examination statement for the employee(s) listed on the Employee Record Chart was not on file, as required by this rule. Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/01/2023





**Domain: 08 Staff Files**

Rule: 5101:2-12-07 Administrator Responsibilities/Requirements

Code: The program administrator is responsible for the daily operation of the program and maintaining compliance.

Finding: During the inspection, it was determined that the person designated as the administrator was not responsible for the daily operation of the program and for maintaining compliance in that she is scheduled as the AM, PM & School Age teacher. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/01/2023

**Domain: 08 Staff Files**

Rule: 5101:2-12-07 Administrator Responsibilities/Requirements

Code: The program administrator is required to maintain current employee records in the Ohio Professional Registry.

Finding: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 5,6,8 below:

1. At least one administrator, employee or child care staff member (including substitutes) had not created a profile.
2. At least one administrator, employee or child care staff member had not created an employment record for the program on or before their first day of employment.
3. At least one administrator, employee or child care staff member had not updated changes to positions or roles within five calendar days of the change.
4. The administrator had not assigned at least one employee or child care staff member to the program's organization dashboard.
5. At least one individual's schedule was not current.
6. At least one individual's position or role did not include an applicable group assignment.
7. At least one individual's employment had not been end dated.
8. Other: PM Group had not been created.

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



Corrective Action Plan Due: 03/01/2023

**Domain: 08 Staff Files**

Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements

Code: The program staff is required to have educational verification on file at the program or in the Ohio Professional Registry.

Finding: In review of the staff records, it was determined that verification of a high school education was not on file nor verified in the Ohio Professional Registry for Child Care Staff Member(s) listed on the Employee Record Chart, as required. Submit the program's corrective action plan, which includes a copy of the verification of a high school education, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/01/2023

**Domain: 08 Staff Files**

Rule: 5101:2-12-10 Health Training Requirements

Code: The program is required to have all child care staff members complete training in child abuse and neglect recognition and prevention within sixty days of hire. Staff must complete training in first aid and CPR within the first ninety days of hire.

Finding: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in number(s) 2,3,4 below:

1. Child abuse and neglect recognition and prevention training was not completed within sixty days of hire.
2. First aid training was not completed within ninety days of hire.
3. Cardiopulmonary resuscitation (CPR) training was not completed within ninety days of hire.
4. The child abuse and neglect recognition and prevention training was expired.
5. The first aid training was expired.
6. The CPR training was expired.

Refer to the Employee Record Chart for the name(s) of the child care staff member(s) who must complete the required health and safety training(s). Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/01/2023



#### Domain: 08 Staff Files

Rule: 5101:2-12-08 Orientation Training & Whistle Blower Protection

Code: The program is required to have staff complete the online staff orientation training before they are permitted to have sole responsibility of children.

Finding: During the inspection, it was determined that Child Care Staff Member(s) listed on the Employee Record Chart had sole responsibility of children and had not completed the online orientation, as required by this rule. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/01/2023

#### Domain: 09 Children's Files

Rule: 5101:2-12-15 Child Medical and Enrollment Records

Code: The program is required to have a completed medical on file at the program for each child enrolled.

Finding: In review of 25% of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in number(s) 2 below:

1. No medical was on file for at least one child
2. Medical(s) on file was not updated every 13 months
3. Medical(s) were missing child's name and date of birth
4. Medical(s) were missing the date of the medical examination
5. The date of the exam was more than 13 months prior to the date the form was signed.
6. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care
7. Medical(s) were missing the signature, business address and telephone number of the physician, physician's assistant(PA), advance practice nurse (APN) or certified nurse practitioner (CNP) who examined the child
8. Medical(s) were missing a record of immunizations the child has had specifying month, day and year
9. Medical(s) were missing a statement from the physician, PA, APN, or CNP that the child has been immunized or is in the process of being immunized against the diseases required by division 5104.014 of the Revised Code and found in appendix A to this rule
10. Medical(s) were missing a statement from the child's parent or guardian that he or she has declined to have the child immunized against the disease for reasons of conscience, including religious convictions
11. Other [ ]





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

Corrective Action Plan Due: 03/01/2023

**Domain: 09 Children's Files**

Rule: 5101:2-12-15 Child Medical and Enrollment Records

Code: The program is required to use the updated JFS 01234 "Child Enrollment and Health Information For Child Care" .

Finding: In review of 25% of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in number(s) 1,4,7,10, 13 below.

1. No enrollment form was completed for at least one child
2. The current JFS 01234 was not completed for at least one child
3. Complete child information
4. Complete parent information
5. Complete emergency contact information
6. Complete physician information
7. Information regarding the parent list
8. Health information
9. Additional information for all boxes checked "yes"
10. Emergency transportation information
11. Parent/guardian's signature
12. Diapering Statement
13. Acknowledgement of Policies and Procedures
14. Enrollment form for at least one child was not updated by either the parent or the administrator
15. Enrollment form for at least one child was not signed by the administrator
16. 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 not required at this time.



### Rules In-Compliance/Not Verified

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-02 License Posted	Compliant	Documenting Statement: The license was in a location visible to parents as required; classrooms.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-02 Current Information	Compliant	Documenting Statement: The program had current information entered in the Ohio Child Licensing and Quality System (OCLQS).
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Administrator Qualifications	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-07 Written Program Policies and Procedures	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding the program's written policies and procedures were discussed. Handbook will reviewed at the second visit.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-10 Professional Development Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Indoor Space Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Space Requirements	Compliant	Documenting Statement: The quarterly playground inspections were completed and documented, as required. The most recent inspection report form was dated 10/1/22.
Rule	Status	Documenting Statement(s), If applicable



Rule: 5101:2-12-11 Outdoor Play Equipment	Compliant	Documenting Statement: Entrapment issues on the playground equipment were not verified on this inspection as the necessary tools in the playground safety kit were not used. The program has no equipment and uses a large grassy area for the school age program. Outdoor materials are taken outside.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-11 Outdoor Play Fall Zones	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Sanitary Equipment and Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Handwashing Requirements	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-13 Smoke Free Environment	Compliant	Documenting Statement: A notice was observed posted stating that smoking is prohibited at the program; entryway doors.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-14 Transportation - Vehicle Requirements	Compliant	Documenting Statement: An annual safety check of the vehicle(s), using the JFS 01230 "Vehicle Inspection Report For Child Care Centers" form, were verified and dated 8/10/22 & 8/22/22.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 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.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 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
Rule: 5101:2-12-16 Management of Communicable Disease	Compliant	Documenting Statement: The JFS 08087 "Communicable Disease Chart" was posted and was readily available to staff and parents.
Rule: 5101:2-12-16 Management of Communicable Disease	Compliant	<p>Documenting Statement: The program staff stated parents were informed when their child had any exposure to a contagious illness by number(s) 1 &amp; 5 below:</p> <ol style="list-style-type: none"> <li>1. A posted notice;</li> <li>2. Verbal communication;</li> <li>3. A written notice sent home;</li> <li>4. A note posted on the classroom door;</li> <li>5. Other: Classroom Dojo.</li> </ol>
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Incident/Injury Reporting	Compliant	Documenting Statement: The JFS 01299 "Incident/Injury Report For Child Care" forms reviewed during this inspection were complete as required.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Written Disaster Plan	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-17 Daily Schedule	Compliant	Documenting Statement: Daily schedules were observed posted in each classroom.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Materials and Equipment	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-19 Supervision	Compliant	Documenting Statement: Child Care Staff Members were supervising the children and were able to intervene as needed.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food Handling/Storage	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-24 Swimming and Water Safety Requirements	Compliant	Documenting Statement: Swimming activities were part of the program's schedule in the summer only.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-25 Medication Administration	Compliant	