

# **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 <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. 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                     | Program Number          |                 | Program Type      |  |
| KINDERCARE LEARNING CENTER #1685 | 000000105050            |                 | Child Care Center |  |
|                                  |                         |                 |                   |  |
| Address                          |                         |                 | County            |  |
| 4195 KINROSS LAKE PKY RICHFIELD  |                         |                 | SUMMIT            |  |
| OH 44286                         |                         |                 |                   |  |
|                                  |                         |                 |                   |  |
|                                  |                         |                 |                   |  |
| Building Approval Date           | Use Group/Code          | Occupancy Limit | Maximum Under 2 ½ |  |
| 12/10/1999                       | E with I-2              | 135             |                   |  |
| Fire Inspection Approval Date    | Food Service Risk Level |                 |                   |  |
| 03/04/2022                       | Level III               |                 |                   |  |

| Inspection Information     |                                |                  |                   |              |
|----------------------------|--------------------------------|------------------|-------------------|--------------|
| Inspection Type            | Inspection S                   | cope             | Inspection Notice |              |
| Annual                     | Full                           |                  | Unannounced       |              |
| Inspection Date 11/03/2022 | Begin Time 9                   | 9:40 AM          | End Time 4:45 PM  |              |
| Reviewer:                  | ·                              |                  |                   |              |
| BETH RAGLE                 |                                |                  |                   |              |
| Summary of Findings        |                                |                  |                   |              |
| No. Rules Verified         | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |
| 58                         | 11                             | 0                | 1                 | 14           |

| 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)                                 |                  | 17         | 0         | 17    |
| Young Toddler   |                  | 10         | 0         | 10    |
| Total Under 2 ½ Years                                     | 42               | 27         | 0         | 27    |
| Older Toddler   |                  | 8          | 0         | 8     |
| Preschool   |                  | 32         | 0         | 32    |
| School Age  |                  | 0          | 0         | 0     |
| Total Capacity/Enrollment                                 | 112              | 40         | 0         | 67    |

| Staff-Child Ratios at the Time of Inspection |                 |                |         |
|--|-----------------|----------------|---------|
| Group  | Age Group/Range | Ratio Observed | Comment |

| Infant A and B combined | 0 to < 12 months         | 2 to 8  | Tummy time;        |
|-------------------------|--------------------------|---------|--------------------|
|                         |                          |         | naps               |
| Infant A and B combined | 0 to < 12 months         | 2 to 8  | Meals; bottles     |
| Infant A and B combined | 0 to < 12 months         | 2 to 8  | Diapering          |
| Toddlers                | 12 months to < 18 months | 2 to 8  | Sensory activities |
| Toddlers                | 12 months to < 18 months | 2 to 8  | Lunch              |
| Toddlers                | 12 months to < 18 months | 2 to 8  | Nap                |
| Discovery Preschool     | 18 months to < 30 months | 2 to 11 | Outdoor play       |
| Discovery Preschool     | 18 months to < 30 months | 2 to 14 | Lunch              |
| Discovery Preschool     | 18 months to < 30 months | 1 to 13 | Nap                |
| Preschool               | 3 years to < 4 years     | 2 to 13 | Centers            |
| Preschool               | 3 years to < 4 years     | 2 to 13 | Lunch              |
| Preschool               | 3 years to < 4 years     | 1 to 13 | Nap                |
| PreK                    | 4 years to < 5 years     | 1 to 11 | Centers            |
| PreK                    | 4 years to < 5 years     | 1 to 11 | Lunch              |
| PreK                    | 4 years to < 5 years     | 2 to 11 | Nap                |

# **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: 08 Staff Files** 

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

<u>Code</u>: The program is required to have all staff request background checks as required.



<u>Finding</u>: 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 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 to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/03/2022

# **Low Risk Non-Compliances**

### Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Sanitary Equipment and Environment

<u>Code</u>: The program is required to clean equipment throughout the day if dirty or soiled.

<u>Finding</u>: During the inspection, it was determined that the following equipment was unclean or soiled during daily use: Toddler wall; DP bookshelf and stool. 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: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Sanitary Equipment and Environment

<u>Code</u>: The program is required to provide equipment and materials that are easy to clean.

<u>Finding</u>: During the inspection, it was determined that at least one piece of equipment, furnishings, or material at the program was not constructed of materials to facilitate cleaning as noted in number 4 below:

- 1. The material had a tear.
- 2. The material was not washable.

- 3. The material was porous.
- 4. The surface was cracked blue vinyl chairs.
- 5. The surface was repaired, but in a manner that still did not facilitate cleaning.
- 6. Other.

Equipment, furnishings, and furniture shall be constructed of materials to facilitate cleaning. 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: 05 Health & Safety

Rule: 5101:2-12-16 Emergency Drills

<u>Code</u>: The program is required to complete fire drills, weather drills, and emergency/lockdown drills

appropriately.

<u>Finding</u>: During the inspection, it was determined that the required drills were not completed for item number(s) 1, 2, 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.

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

Corrective Action Plan Due: 12/03/2022

#### Domain: 05 Health & Safety

Rule: 5101:2-12-16 Management of Communicable Disease

<u>Code</u>: The program is required to identify and respond to communicable diseases.

<u>Finding</u>: During the inspection, it was determined the program did not meet the requirements for responding to a communicable disease as noted in number 1, 2 below.

- 1. The program did not follow the instructions on the JFS 08087 "Ohio Communicable Disease Chart".
- 2. The program did not report a communicable disease that is required to be reported to the local health department to ODJFS in OCLQS by the end of the next business day.

Technical assistance was provided at the time of 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.

<u>Finding</u>: 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 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: 12/03/2022

### **Domain: 08 Staff Files**

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

Code: The program is required to maintain a current JFS 01176 "Program Notification of Background Check

Review for Child Care" on file for each staff.

<u>Finding</u>: In review of the staff records, it was determined that background check requirements had not been followed, for the individual(s) listed on the Employee Record Chart, as noted in number 3 below:

- 1. The JFS 01176 Program Notification of Background Check Review for Child Care the program received from the Department was not on file and the individual was not left alone with children.
- 2. The JFS 01177 Individual Notification of Background Check Review for Child Care was on file instead of the JFS 01176.
- 3. The JFS 01176 on file was for a different program.

Submit the program's corrective action plan, which includes a statement that the correct form is now on file, to the Department to verify compliance with the requirements of this rule.

| Corrective Action Plan Due: 12/03/2022 |  |
|--|--|
|  |  |

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

<u>Code</u>: The program is required to maintain a staff schedule with coverage of the required health trainings.

<u>Finding</u>: In review of the staff records, it was determined the program did not have at least one child care staff member present/scheduled to be present during all hours of operation with currently valid documentation for the training(s) listed in number(s) 2, 5, 10 below:

- 1. First Aid child care staff members scheduled during the hours of [ ] and [ ] had expired training
- 2. First Aid child care staff members scheduled during the hours of 6:30-8:00 AM did not have verification of completion of First Aid
- 3. First Aid trained child care staff member was not present in each building used by the program.
- 4. CPR child care staff members scheduled during the hours of [ ] and [ ] had expired training
- 5. CPR child care staff scheduled during the hours of 6:30-8:00 AM had did not have verification of completion of CPR
- 6. CPR trained child care staff member was not present in each building used by children
- 7. CPR training taken by staff was not appropriate for all ages and developmental levels of the children in care
- 8. CPR audiovisual or electronic media training taken by staff did not include an in-person component of the training
- 9. Communicable Disease child care staff members scheduled during the hours of [ ] and [ ] had expired training
- 10. Communicable Disease child care staff scheduled during the hours of 6:30 AM-6:00 PM had not taken Communicable Disease training
- 11. Communicable Disease trained child care staff member was not present in each building used by the program
- 12. Child Abuse child care staff members scheduled during the hours of [ ] and [ ] had expired training
- 13. Child Abuse child care staff scheduled during the hours of [ ] and [ ] had not taken Child Abuse training
- 14. Child Abuse trained child care staff was not in each building used by the program

Refer to the Employee Record Chart for specific details. Submit the program's corrective action plan, which includes verification of complete coverage for any training listed, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 12/03/2022

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.

<u>Finding</u>: 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: 12/03/2022

### **Domain: 08 Staff Files**

Rule: 5101:2-12-08 Medical Statement

Code: The program staff medicals are required to include all information.

<u>Finding</u>: In review of the staff records, it was determined that the medical statements for those employees listed on the Employee Record Chart did not include the required information listed below in number 3a.

- 1. Date of examination;
- 2. Signature, business address, and telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination;
- 3. A statement that verifies that 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);
- 4. Tuberculosis (TB) screening/test
- 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 4a;
- 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: 12/03/2022



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

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

Registry.

<u>Finding</u>: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in number(s) 2, 4, 5, 6, 7 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.

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

Corrective Action Plan Due: 12/03/2022

### **Domain: 08 Staff Files**

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

<u>Code</u>: The program administrator is required to have hours of availability to meet with parents and have the hours posted in a noticeable location.

<u>Finding</u>: During the inspection, it was determined that the administrator did not have scheduled hours of availability to meet with parents, or the hours of availability were not posted in a noticeable location. 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.

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

<u>Code</u>: 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.

<u>Finding</u>: 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, 5, 6 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: 12/03/2022

#### Domain: 09 Children's Files

Rule: 5101:2-12-25 Medication Administration

<u>Code</u>: The program is required to removed all medication, medical foods and topical products that are no longer being administered or have expired.

<u>Finding</u>: During the inspection, it was determined that medication, medical foods and/or topical products had not been removed from the program and were no longer needed or had expired. 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: 09 Children's Files

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

<u>Code</u>: The program is required to use the updated JFS 01234 "Child Enrollment and Health Information For Child

Care".

<u>Finding</u>: 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) 4, 5, 6, 10, 12, 13, 14 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. |
|---|---------------------|--|
| Dollar                                    | C1 1                | Decree 1 - Chater and A If and I all a   |
| Rule: 5101:2-12-02 Current                | Status<br>Compliant | Documenting Statement(s), If applicable  Documenting Statement: The program          |
| Information                               | Compliant           | had current information entered in the   |
| mermation                                 |                     | Ohio Child Licensing and Quality System  |
|   |                     | (OCLQS).   |
|   |                     |  |
| Rule                                      | Status              | Documenting Statement(s), If applicable  |
| 5101:2-12-03 Inspection Requirements      | Compliant           |  |
|   | <u></u>             |  |
| Rule                                      | Status              | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-04 Building               | Compliant           | Documenting Statement: On the day of   |
| Department Inspection                     |                     | the inspection, the program was  |
|   |                     | operating in compliance with the current   |
|   |                     | building approval(s).  |
| Rule                                      | Status              | Decumenting Statement(s) If applicable   |
| Rule: 5101:2-12-04 Fire Inspection        | Compliant           | Documenting Statement(s), If applicable  Documenting Statement: Please Note:         |
| Naie. 5101.2 12 04 The hispection         | Compliant           | Documentation of a fire inspection   |
|   |                     | without any uncorrected violations must  |
|   |                     | be secured for the program by 3/4/2023.  |
|   |                     |  |
| Rule                                      | Status              | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-04 Food Service           | Compliant           | Documenting Statement: The food service  |
| Requirements                              |                     | license was observed posted. Following is  |
|   |                     | the date of expiration: 3/1/2023.  |
|   |                     |  |
| Rule                                      | Status              | Documenting Statement(s), If applicable  |
| 5101:2-12-07 Administrator Qualifications | Compliant           |  |
|   |                     |  |
| Rule                                      | Status              | Documenting Statement(s), If applicable  |
| 5101:2-12-07 Written Program              | Compliant           |  |
| Policies and Procedures                   |                     |  |
| Rule                                      | Status              | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-10 Professional           | Compliant           | Documenting Statement: At the time of  |
| Development Requirements                  |                     | the inspection, all child care staff   |
|   |                     | members had completed the required   |

|  |                     | amount of professional development training.                                |
|--|---------------------|---|
| Rule                                     | Status              | Documenting Statement(s), If applicable                                     |
| 5101:2-12-11 Indoor Space                | Compliant           | bocumenting statement(s), if applicable                                     |
| Requirements                             | SSpac               |   |
| 1  | !                   |   |
| Rule                                     | Status              | Documenting Statement(s), If applicable                                     |
| 5101:2-12-11 Separation of Children      | Compliant           |   |
| Under 2 1/2 Years                        |                     |   |
| Rule                                     | Status              | Decumenting Statement(s) If applicable                                      |
| Rule: 5101:2-12-11 Outdoor Space         | Compliant           | Documenting Statement(s), If applicable  Documenting Statement: The outdoor |
| Requirements                             | Compilant           | play area is separated from traffic and                                     |
| Requirements                             |                     | other hazards by a fence.   |
|  |                     |   |
| Rule: 5101:2-12-11 Outdoor Space         | Compliant           | Documenting Statement: The quarterly  |
| Requirements                             |                     | playground inspections were completed                                       |
|  |                     | and documented, as required. The most                                       |
|  |                     | recent inspection report form was dated                                     |
|  |                     | 9/23/22.  |
| L  |                     |   |
| Rule                                     | Status              | Documenting Statement(s), If applicable                                     |
| Rule: 5101:2-12-11 Outdoor Play          | Compliant           | Documenting Statement: Outdoor  |
| Equipment                                |                     | equipment was viewed to be safe and   |
|  |                     | free of rust, sharp points, and other                                       |
|  |                     | hazards.  |
|  |                     |   |
| Rule                                     | Status              | Documenting Statement(s), If applicable                                     |
| Rule: 5101:2-12-11 Outdoor Play Fall     | Compliant           | Documenting Statement: The protective                                       |
| Zones                                    |                     | material used under outdoor equipment                                       |
|  |                     | was rubber mulch and wood mulch.  |
|  | 1                   |   |
| Rule                                     | Status              | Documenting Statement(s), If applicable                                     |
| Rule: 5101:2-12-12 Safe Equipment        | Compliant           | Documenting Statement: Equipment was  |
|  |                     | observed to be in good condition.   |
|  |                     |   |
| Rule                                     | Status              | Documenting Statement(s) If applicable                                      |
| Rule: 5101:2-12-12 Safe Environment      | Status<br>Compliant | Documenting Statement(s), If applicable  Documenting Statement: Cleaning    |
| Maior 5101.2 12 12 3aic Elivirolillielit | Compilant           | supplies were viewed stored out of the                                      |
|  |                     | reach of children.  |
|  |                     |   |
| Rule: 5101:2-12-12 Safe Environment      | Compliant           | Documenting Statement: All area rugs  |
|  |                     | had nonskid backing.  |

| Designation:                          | T         |  |
|---------------------------------------|-----------|--|
|                                       |           |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-13 Handwashing        | Compliant | Documenting Statement: Staff and         |
| Requirements                          | Compilant | children were observed washing hands as  |
| riequi ements                         |           | required by the rule.                    |
|                                       |           | required by the rule.                    |
|                                       |           |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-13 Smoke Free         | Compliant | Documenting Statement: A notice was      |
| Environment                           |           | observed posted stating that smoking is  |
|                                       |           | prohibited at the program.               |
|                                       |           |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-15 Medical/Physical   | Compliant | Documenting Statement: The program       |
| Care Plans                            |           | had current information on the medical   |
|                                       |           | status and the required treatment plan   |
|                                       |           | for the children with health conditions. |
|                                       |           |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-16 Medical, Dental,   | Compliant | Documenting Statement: On the day of     |
| and General Emergency Plan            |           | 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 | Compliant | Documenting Statement: During the        |
| Precautions                           |           | inspection, the program had complete     |
|                                       |           | first aid kits available as required.    |
|                                       |           |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-16 Incident/Injury    | Compliant | Documenting Statement: The JFS 01299     |
| Reporting                             |           | "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 |  |
|                                       | 1         |  |
| Rule                                  | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-17 Daily Schedule     | Compliant | Documenting Statement: Daily schedules   |
|                                       |           | were observed posted.                    |

|                                       | T             |  |
|---------------------------------------|---------------|--|
|                                       |               |  |
|                                       | 1             |  |
| Rule                                  | Status        | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-17 Materials and      | Compliant     | Documenting Statement: Sufficient  |
| Equipment                             |               | equipment was observed in all categories.  |
|                                       |               |  |
| 3                                     |               |  |
| Rule                                  | Status        | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-17 Daily Outdoor Play | Compliant     | Documenting Statement: Outdoor play  |
|                                       |               | was observed for the toddler; preschool  |
|                                       |               | group(s).  |
|                                       |               | ~ ***  |
|                                       |               |  |
| Rule                                  | Status        | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-18 License Capacity   | Compliant     | Documenting Statement: The program   |
|                                       |               | was operating within their license   |
|                                       |               | capacity limits.   |
|                                       |               | The state of the s |
|                                       | 1             |  |
| Rule                                  | Status        | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-18 Ratio              | Compliant     | Documenting Statement: The Appendix A  |
| Maiore 22 22 10 Maio                  | - Compilation | "Staff/Child Ratios, Age Grouping and  |
|                                       |               | Maximum Group Size" was posted in a  |
|                                       |               | noticeable area at the program as  |
|                                       |               | required.  |
|                                       |               | required.  |
| Rule: 5101:2-12-18 Ratio              | Compliant     | Documenting Statement: Staff/child   |
| Naic. 5101.2 12 16 Natio              | Compilant     | ratios observed during the inspection  |
|                                       |               |  |
|                                       |               | were in compliance.  |
|                                       |               |  |
| Rule                                  | Status        | Decumenting Statement(s) If applicable   |
| 3233054                               |               | Documenting Statement(s), If applicable  Documenting Statement: The group sizes  |
| Rule: 5101:2-12-18 Group Size         | Compliant     |  |
|                                       |               | observed on the day of the inspection  |
|                                       |               | were in compliance.  |
|                                       |               |  |
| D. L.                                 | Cit           | D  |
| Rule                                  | Status        | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-18 Attendance         | Compliant     | Documenting Statement: Child Care Staff  |
| Records                               |               | Members were observed recording the  |
|                                       |               | attendance for each child upon arrival   |
|                                       |               | and documenting each child's departure.  |
|                                       |               |  |
|                                       | 1 ==          |  |
| 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                                       |
|--------------------------------------|-------------------------|---|
| Rule: 5101:2-12-19 Child Guidance    | Compliant               | Documenting Statement: Appropriate  |
|                                      |                         | child guidance techniques and practices                                       |
|                                      |                         | were observed being used during the   |
|                                      |                         | inspection.   |
|                                      |                         |   |
| Rule                                 | Chahua                  | Description (takens and (a) If a multiple                                     |
|                                      | Status                  | Documenting Statement(s), If applicable                                       |
| Rule: 5101:2-12-20 Cots and Napping  | Compliant               | Documenting Statement: The rest area had adequate lighting, which allowed for |
|                                      |                         | the visual supervision of children.   |
|                                      |                         | the visual supervision of children.   |
| Rule: 5101:2-12-20 Cots and Napping  | Compliant               | Documenting Statement: Cots were  |
|                                      | contrated interestable. | placed appropriately and safely during  |
|                                      |                         | nap time.   |
|                                      |                         |   |
|                                      | ,                       |   |
| Rule                                 | Status                  | Documenting Statement(s), If applicable                                       |
| Rule: 5101:2-12-20 Cribs             | Compliant               | Documenting Statement: Cribs were   |
|                                      |                         | separated from the play space by a safe                                       |
|                                      |                         | and sturdy and physical barrier.  |
|                                      |                         |   |
| Rule                                 | Status                  | Documenting Statement(s), If applicable                                       |
| Rule: 5101:2-12-22 Meal and Snack    | Compliant               | Documenting Statement: Posted menus   |
| Requirements                         | Somphane                | were current and dated.   |
| inequilements                        |                         | Were carrent and dated.   |
| Rule: 5101:2-12-22 Meal and Snack    | Compliant               | Documenting Statement: Meals served at  |
| Requirements                         |                         | the program included foods from the four                                      |
|                                      |                         | food groups in sufficient amounts.  |
|                                      |                         |   |
|                                      |                         |   |
| Rule                                 | Status                  | Documenting Statement(s), If applicable                                       |
| 5101:2-12-22 Fluid Milk Requirements | Compliant               |   |
|                                      | I                       |   |
| Rule                                 | Status                  | Documenting Statement(s), If applicable                                       |
| 5101:2-12-22 Safe Food               | Compliant               |   |
| Handling/Storage                     |                         |   |
|                                      |                         |   |
| Rule                                 | Status                  | Documenting Statement(s), If applicable                                       |
| Rule: 5101:2-12-23 Infant Daily Care | Compliant               | Documenting Statement: An appropriate   |
|                                      |                         | program of activities with infants was  |
|                                      |                         | observed.   |
| Pula F101 2 12 22 lafa 1 D 1 C       | Committee               | Design out is a Chatagoria A and a little                                     |
| Rule: 5101:2-12-23 Infant Daily Care | Compliant               | Documenting Statement: Appropriate  |
|                                      |                         | daily written records for all infants were                                    |
|                                      |                         | viewed.   |

| Rule  | Status    | Documenting Statement(s), If applicable  |
|---|-----------|--|
| Rule: 5101:2-12-23 Infant Bottle and Food Preparation | Compliant | Documenting Statement: All bottles were labeled as required.   |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-23 Diapering and<br>Toilet Training   | Compliant | Documenting Statement: Appropriate diaper changing procedures were observed during the inspection in the infant room(s). |