



## 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<br>A CHILD'S PLACE LEARNING CENTER           | Program Number<br>000000401176       | Program Type<br>Child Care Center |                   |
| Address<br>2010 OFFICEVIEW PLACE REYNOLDSBURG<br>OH 43068 |                                      | County<br>FRANKLIN                |                   |
| Building Approval Date<br>02/10/2017                      | Use Group/Code<br>I-4                | Occupancy Limit<br>114            | Maximum Under 2 ½ |
| Fire Inspection Approval Date<br>03/02/2022               | Food Service Risk Level<br>Level III |                                   |                   |

| Inspection Information        |                          |                                  |
|-------------------------------|--------------------------|----------------------------------|
| Inspection Type<br>Annual     | Inspection Scope<br>Full | Inspection Notice<br>Unannounced |
| Inspection Date<br>02/24/2023 | Begin Time 3:30 PM       | End Time 5:15 PM                 |
| Inspection Date<br>02/24/2023 | Begin Time 8:30 AM       | End Time 1:00 PM                 |
| Reviewer:<br>LISA NUTTER      |                          |                                  |
| Reviewer:<br>LISA NUTTER      |                          |                                  |

| Summary of Findings      |                                      |                       |                        |                    |
|--------------------------|--------------------------------------|-----------------------|------------------------|--------------------|
| No. Rules Verified<br>58 | No. Rules with Non-compliances<br>14 | No. Serious Risk<br>0 | No. Moderate Risk<br>2 | No. Low Risk<br>16 |

| 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)                                 |                  | 16         | 0         | 16    |
| Young Toddler   |                  | 19         | 0         | 19    |
| <b>Total Under 2 ½ Years</b>                              | 54               | 35         | 0         | 35    |
| Older Toddler   |                  | 7          | 0         | 7     |
| Preschool   |                  | 51         | 0         | 51    |
| School Age  |                  | 39         | 0         | 39    |



|                                  |     |    |   |     |
|----------------------------------|-----|----|---|-----|
| <b>Total Capacity/Enrollment</b> | 156 | 97 | 0 | 132 |
|----------------------------------|-----|----|---|-----|

| <b>Staff-Child Ratios at the Time of Inspection</b> |                          |                       |                        |
|---|--------------------------|-----------------------|------------------------|
| <b>Group</b>  | <b>Age Group/Range</b>   | <b>Ratio Observed</b> | <b>Comment</b>         |
| bumblebees  | 4 years to < 5 years     | 2 to 19               |                        |
| bumblebees  | 4 years to < 5 years     | 2 to 18               |                        |
| butterflies   | 18 months to < 30 months | 2 to 11               |                        |
| butterflies   | 18 months to < 30 months | 2 to 13               |                        |
| toddler 2   | 18 months to < 30 months | 1 to 5                |                        |
| toddler 2   | 18 months to < 30 months | 1 to 7                |                        |
| tigers  | 3 years to < 4 years     | 2 to 12               |                        |
| tigers  | 3 years to < 4 years     | 2 to 14               |                        |
| infant 2  | 12 months to < 18 months | 2 to 5                |                        |
| infant 2  | 12 months to < 18 months | 1 to 5                |                        |
| infant 1  | 0 to < 12 months         | 2 to 8                |                        |
| infant 1  | 0 to < 12 months         | 2 to 8                |                        |
| school age  | School-Age to < 11 years | 1 to 3                | routine trip to school |

**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.*

| <b>Serious Risk Non-Compliances</b>   |
|---|
| <b>No Serious Risk Non-Compliances were observed during this inspection</b> |
|   |
|   |

| <b>Moderate Risk Non-Compliances</b>          |
|---|
| <b>Domain: 07 Diapering &amp; Infant Care</b> |
| Rule: 5101:2-12-20 Cribs                      |



**Code:** The program is required to place infants in cribs while sleeping.

**Finding:** During the inspection, it was determined that the equipment in number 6 below had been used for sleeping infants and did not allow the infant to sleep on a firm mattress:

1. Mesh cribs;
2. Play pens;
3. Bassinets;
4. Cots;
5. Car seats;
6. Infant swing;
7. The floor;
8. Infant seats;
9. An infant placed in a car seat in a crib;
10. Other [ ].

Infants must be provided with a crib, which meets requirements specified in this rule, for resting and sleeping. Provide staff training. Submit the program's corrective action plan, which includes a statement that staff training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/26/2023

**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 numbers 19 and 23 below:

1. No plan was on file.
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 exceeded the instructions on the prescription label and physicians instructions were not included
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: 03/26/2023

### 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 fully responded to the non-compliances addressed in the inspection report dated 6/9/22. 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: 03/26/2023

**Domain: 02 Safe & Sanitary Environment**

**Rule:** 5101:2-12-13 Handwashing Requirements

**Code:** The program is required to have all staff wash their hands as outlined in rule.

**Finding:** During the inspection, it was determined that at least one staff member with the toddler 2 group did not wash his or her hands at the time listed in numbers 5 and 6 below, as required in rule.

1. Upon arrival for the day.
2. Prior to departure.
3. Upon entry into a classroom.
4. After toileting or assisting a child with toileting.
5. After each diaper change or pull-up change.
6. After contact with bodily fluids or cleaning up spills or objects contaminated with bodily fluids.
7. After cleaning or sanitizing or using any chemical products.
8. After handling pets, pet cages or other pet objects that have come in contact with the pet.
9. Before eating, serving or preparing food or bottles or feeding a child.
10. Before and after completing a medical procedure or administering medication.
11. When visibly soiled (must use soap and water).
12. Other [ ].

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

Corrective Action Plan Due: 03/26/2023

**Domain: 02 Safe & Sanitary Environment**

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

**Code:** The program is required to provide a clean restroom with the appropriate materials available.

**Finding:** During the inspection, it was determined that unsanitary conditions, as noted in number 6 below, were in the preschool restroom:



1. There was no liquid soap.
2. There was no toilet paper.
3. There were no paper towels.
4. The toilet cleaning brush was accessible to the children.
5. The plunger was accessible to the children.
6. The toilet(s) were not flushed.
7. The trash was not emptied from the day before.
8. There was a strong urine odor.
9. Other [ ].

The restroom(s) must be kept sanitary at all times. 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:** 5101:2-12-12 Safe Environment

**Code:** The program is required to store chemicals in a place that is inaccessible to children.

**Finding:** During the inspection, a potentially hazardous substance, which was determined to not present a serious risk to a child, was accessible to children as noted in numbers 9 and 10 below:

1. Cosmetics;
2. Disinfecting wipes;
3. Fish food;
4. Hand lotion;
5. Hand sanitizer (for children under 24 months);
6. Laundry detergent;
7. Powder dish washing soap;
8. Paint cans;
9. White out; (butterfly and tiger room)
10. Potting Soil; (bumble bee)
11. Other potentially hazardous substance [ ].

Provide staff training. Submit the program's corrective action plan, which includes a statement that the potentially hazardous substance is no longer accessible to children and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/26/2023



**Domain: 07 Diapering & Infant Care**

Rule: 5101:2-12-20 Cribs

Code: The program is required to space cribs two feet apart when in use.

Finding: During the inspection, it was determined that cribs were not two feet apart when in use, as required by this rule. 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: 5101:2-12-10 Professional Development Requirements

Code: The program is required to document the number of days substitute child care staff members work.

Finding: During the inspection, it was determined the program was not documenting the number of days substitute child care staff member(s) worked for a period of eighteen months. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 03/26/2023

**Domain: 08 Staff Files**

Rule: 5101:2-12-10 Professional Development Requirements

Code: The program is required to ensure child care staff members, including substitutes used more than ninety days annually, obtain at least 6 hours of professional development each state fiscal year.

Finding: In review of the staff records, it was determined that at least one child care staff member did not meet the annual professional development requirement as noted in number 1 below:

1. The child care staff member(s) had not completed at least six hours of professional development.
2. Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.
3. Training topic did not meet the requirements listed in appendix A of this rule.
4. Documentation of training did not meet the requirements of this rule.



5. The substitute(s) had been used more than ninety days annually between July first and June thirtieth and had not completed at least six hours of professional development

6. Other [ ].

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

Corrective Action Plan Due: 03/26/2023

**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 numbers 2,3, and 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: 03/26/2023

**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.





Finding: 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: 03/26/2023

**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: 03/26/2023

**Domain: 08 Staff Files**

Rule: 5101:2-12-08 Medical Statement

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

Finding: 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 numbers 1,3b, 3c, and 4

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: 03/26/2023

**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 numbers 2,3, and 5 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: 03/26/2023



**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 numbers 2 and 8 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: 03/26/2023

**Domain: 09 Children's Files**

**Rule:** 5101:2-12-25 Medication Administration

**Code:** The program is required to store medical foods and topical products out of the reach of children.

**Finding:** During the inspection, it was determined that a medical food or topical product, diaper cream, was within the reach of children in the Butterfly room. 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

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 numbers 4,8,10,12,13,14,and 15 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.

**Domain: 10 Written Policies & Procedures**



**Rule:** 5101:2-12-16 Written Disaster Plan

**Code:** The program is required to train child care staff members and employees on the written disaster plan annually and keep written documentation of the training on-site.

**Finding:** During the inspection, it was determined the program's written disaster plan did not meet the requirement for training child care staff members and employees on the plan annually as noted in number 1 below:

1. Child care staff members and employees were not trained annually.
2. Written documentation of the training was not kept on file.

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

Corrective Action Plan Due: 03/26/2023

**Rules In-Compliance/Not Verified**

| Rule   | Status    | Documenting Statement(s), If applicable   |
|--|-----------|---|
| 5101:2-12-02 License Posted                  | Compliant |   |
| 5101:2-12-02 Current Information             | Compliant |   |
| 5101:2-12-04 Building Department Inspection  | Compliant |   |
| 5101:2-12-04 Fire Inspection                 | Compliant |   |
| Rule: 5101:2-12-04 Food Service Requirements | Compliant | Documenting Statement: The food service license was observed posted. Following is |



|   |           | the audit number and date of expiration:<br>LCOECNTV733/1/24.  |
|---|-----------|--|
| 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 Policies and Procedures          | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-08 Child Care Staff Member Educational Requirements | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-08 Orientation Training & Whistle Blower Protection | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-11 Indoor Space Requirements                        | Compliant |  |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-11 Separation of Children Under 2 1/2 Years         | 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 1/3/23. |
| Rule  | Status    | Documenting Statement(s), If applicable  |
| 5101:2-12-11 Outdoor Play Equipment                           | Compliant |  |
| 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  |
|   |           |  |



|  |               |  |
|--|---------------|--|
| 5101:2-12-13 Smoke Free Environment                      | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5101:2-12-14 Transportation and Field Trip Procedures    | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5101:2-12-14 Transportation - Driver Requirements        | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5101:2-12-14 Transportation - Vehicle Requirements       | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5101:2-12-16 Medical, Dental, and General Emergency Plan | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| Rule: 5101:2-12-16 Emergency Drills                      | Compliant     | Documenting Statement: Documentation for completed fire, weather, and emergency/lockdown drills was verified during this inspection. |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 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.                         |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5101:2-12-16 Management of Communicable Disease          | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5101:2-12-16 Incident/Injury Reporting                   | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 5101:2-12-17 Daily Schedule                              | Compliant     |  |
| <b>Rule</b>  | <b>Status</b> | <b>Documenting Statement(s), If applicable</b>   |
| 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   |
| 5101:2-12-18 License Capacity            | Compliant |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-18 Ratio                       | Compliant |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-18 Group Size                  | Compliant |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-18 Attendance Records    | Compliant | Documenting Statement: During the inspection, attendance records were reviewed. Child Care Staff Members were viewed recording the attendance for each child upon arrival and departure. All attendance records met the requirements of the rule and were kept with the group at all times. |
| Rule                                     | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-19 Supervision                 | Compliant |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-19 Child Guidance              | Compliant |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-20 Cots and Napping            | Compliant |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-22 Meal and Snack Requirements | Compliant |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-22 Fluid Milk Requirements     | Compliant |   |
| Rule                                     | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-22 Safe Food Handling/Storage  | Compliant |   |





| Rule  | Status    | Documenting Statement(s), If applicable |
|---|-----------|---|
| 5101:2-12-23 Infant Daily Care                  | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-23 Infant Bottle and Food Preparation | Compliant |   |
| Rule  | Status    | Documenting Statement(s), If applicable |
| 5101:2-12-23 Diapering and Toilet Training      | Compliant |   |