Family Child Care 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 | Program Number | Program Type |
| Beautiful Minds Childcare LLC | 2180017194 | FCC - Type B Home |
| Address | | County |
| 8798 Fontainebleau Terrace | | HAMILTON |
| | | |
| Cincinnati | | |
| OH 45231 | | |

| Inspection Information | | | | | |
|------------------------|--------------------------------|------------------|-------------------|--------------|--|
| Inspection Type | Inspection Sc | cope | Inspection Notice | | |
| Compliance | Full | | Announced | | |
| Inspection Date | Inspection Date Begin Time | | End Time | End Time | |
| 08/25/2021 | 11:50 AM | | 12:35 PM | | |
| Reviewer: | | | | | |
| Eryn Hunt | | | | | |
| Summary of Findings | | | | | |
| No. Rules Verified | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk | |
| 78 | 18 | 0 | 1 | 20 | |

| 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) | | 2 | 0 | 2 |
| Young Toddler | | 4 | 0 | 4 |
| Total Under 2 Years | 3 | 6 | 0 | 6 |
| Older Toddler | | 2 | 0 | 2 |
| Preschool | | 2 | 0 | 2 |
| School Age | | 4 | 5 | 9 |
| Total Capacity/Enrollment | 6 | 8 | 5 | 19 |

| Staff-Child Ratios at the Time of Inspection | | | |
|----------------------------------------------|--|--------|--|
| Group Age Group/Range Ratio Observed Comment | | | |
| PLACEMENTS 8/25/21 | | 1 to 6 | |



Summary of Non-Compliances

If the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited. Ohio Administrative Code 5101: 2-13-03 details the process for submitting a request for a review if a program disagrees with a licensing finding. The request for review must be submitted within seven days from the receipt of the licensing report.

| Serious Risk Non-Compliances | | |
|----------------------------------------------------------------------|--|--|
| No Serious Risk Non-Compliances were observed during this inspection | | |
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Moderate Risk Non-Compliances

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to refrain from using and storing outdoor machinery around children.

Findings: During the inspection, a potentially hazardous item or toxic substance was used or stored where children had access to it as noted in number(s) 1,2 below. The potentially hazardous substance or item that posed a risk to children was determined to be accessible to children in they were in an unlocked lower cabinet in the kitchen that this writer locked during the inspection .

- 1. Bleach.
- 2. Cleaning agent.
- 3. Fish tank chemicals.
- 4. Gasoline.
- 5. Pesticide.
- 6. Poison, including insect/rodent poison.
- 7. Flammable substance.
- 8. Windshield washer fluid.
- 9. Aerosol cans.
- 10. A lawn mower.
- 11. A weed trimmer.
- 12. Hedge trimmers.
- 13. A snow blower.
- 14. Other potentially hazardous substance, equipment or machinery: []. Provide staff training. Submit the program's corrective action plan, which includes a statement that the potentially hazardous substance or item is no longer accessible to children and/or children will not be outside when machinery is in use and a statement that training was provided, to the Department to verify compliance with the requirements of this rule.



Corrective Action Plan Due: 09/25/2021

Low Risk Non-Compliances

Domain: 01 Ratio & Supervision

Rule: 5101:2-13-18 Attendance

Code: The program is required to maintain attendance records.

Findings: During the inspection, it was determined the program did not meet the requirements for keeping an attendance record as listed in number(s) 2 below:

- 1. No attendance record was being maintained.
- 2. The attendance record was not being consistently completed.
- 3. The attendance documentation was not kept at the program for a period of one year. 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: 09/25/2021

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-13 Handwashing

Code: The program staff is required to have children wash their hands at the appropriate times as outlined in

rule.

Findings: During the inspection, it was determined the hand washing requirements were not being followed by the children in care at the program, in that hands were not washed before eating. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/25/2021

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-13-12 Safe Environment

Code: The program is required to have all outlets and surge protectors covered.



Findings: During the inspection, it was determined that surge protectors or outlets did not have childproof receptacle covers. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 09/25/2021

Domain: 03 Postings & Equipment

Rule: 5101:2-13-17 Programming

Code: The program is required to have a daily schedule posted in a visible place.

Findings: During the inspection, it was determined the daily schedule was not posted in the program. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 09/25/2021

Domain: 05 Health & Safety

Rule: 5101:2-13-16 Disaster Plan

Code: The program is required to have a completed written disaster plan.

Findings: During the inspection, it was determined the program's written disaster plan did not meet the requirement or was missing the information in number(s) 1-16below:

Procedures:

- 1. The written disaster plan had not been completed
- 2. The plan was not provided to all child care staff and employees
- 3. Weather emergencies and natural disasters which include severe thunderstorms, tornadoes, flash flooding, major snowfall, blizzards, ice storms or earthquakes
- 4. Emergency outdoor and indoor lockdown or evacuation due to threats of violence which includes active shooter, bioterrorism or terrorism
- 5. Emergency or disaster evacuations due to hazardous materials and spills, gas leaks or bomb threats.
- 6. Outbreaks, epidemics or other infectious disease emergencies
- 7. Loss of power, water, or heat
- 8. Other threatening situations that may pose a health or safety hazard to the children in the program Details:
- 9. Shelter in place or evacuation, how the program will care for and account for the children until they can be reunited with the parent
- 10. Assisting infants and children with special needs and/or health conditions
- 11. Emergency contact information for parents and the program
- 12. Procedures for notifying and communicating with parents regarding the location of the children if evacuated
- 13. Procedures for communicating with parents during loss of communications, no phone or internet service available



- 14. The location of supplies and procedures for gathering necessary supplies for staff and children if required to shelter in place
- 15. What to do if a disaster occurs during the transport of children or when on a field trip or routine trip
- 16. Training of staff or reassignment of staff duties as appropriate
- 17. Updating the plan on a yearly basis
- 18. Contact with local emergency management officials

Add the missing information to the disaster plan. Submit the program's corrective action plan, which includes the missing information, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/25/2021

Domain: 05 Health & Safety

Rule: 5101:2-13-16 First Aid Kit

Code: The program is required to meet the requirements for first aid kits.

Findings: During the inspection, it was determined that the program did not have a first aid kit [onsite/ on the vehicle/ on a field trip] as required, that included all items listed in the appendix A of the rule. The kit(s) were missing the item(s) or the item(s) were not replaced after use, when expired or damaged listed in number(s) 11 below:

- 1. One roll of hypoallergenic first-aid tape;
- 2. Individually wrapped sterile gauze squares in assorted sizes;
- 3. Sterile adhesive bandages in assorted sizes;
- 4.Tweezers;
- 5. Gauze rolled bandage;
- 6. Triangular bandage;
- 7. Rounded end scissors;
- 8. Tooth preservation system or fresh chilled liquid milk in which to transport a lost permanent tooth, including a written reference indicating location of the refrigerator/freezer where milk is stored if a tooth preservation system is not part of the first aid kit (for programs serving school age children only);
- 9. A working digital thermometer;
- 10. Disposable non-latex gloves;
- 11. A working flashlight;
- 12. An instant cold pack that has not been activated or ice, including a written reference indicating location of the refrigerator/freezer where the ice is stored if an instant cold pack is not part of the first aid kit;
- 13. Sealable leak-proof plastic bags in assorted sizes or double bagged plastic bags that can be securely tied for materials soiled with blood or bodily fluids;
- 14. Pocket mask or face shield, appropriate; for all ages of children in care, for cardiopulmonary resuscitation (CPR) administration;
- 15. Soap or waterless sanitizer (field trip or transporting away from the program only);
- 16. Bottled water (field trip or transporting away from the program only).

Correct the violation and submit the program's corrective action plan to verify compliance with the requirements of this rule.



Corrective Action Plan Due: 09/25/2021

Domain: 05 Health & Safety

Rule: 5101:2-13-22 Meals and Snacks

Code: The program is required to post a current menu for the week.

Findings: During this inspection, it was observed that the current menu for this week was not posted. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 09/25/2021

Domain: 06 Program Information

Rule: 5101:2-13-14 Requirements for Field and Routine Trips Code: The program is required to have all required items on trips.

Findings: The following items need to be taken on routine trips and field trips:1

- 1. First aid supplies;
- 2. JFS 01234 "Child Enrollment and Health information" (except routine walks);
- 3. A working cellular phone or other means of immediate communication (not to be used while a vehicle is in motion).

During the inspection, it was determined item number(s) [] [was/were] missing. Submit the program's action plan to meet the requirements of this rule.

Corrective Action Plan Due: 09/25/2021

Domain: 06 Program Information

Rule: 5101:2-13-14 Vehicle Requirements

Code: The program is required to complete and document weekly vehicle inspections.

Findings: During the inspection, it was determined that the program and/or transportation services had not performed/documented weekly inspections of vehicles used for transporting children. The weekly inspection needs to include the following:

- 1. A visual inspection of the tires for wear and tire pressure;
- 2. A visual inspection of headlights, taillights, signals, mirrors, wiper blades, and dash gauges;
- 3. An inspection for properly functioning child and driver restraints;

- 4. An inspection for properly functioning doors and windows;
- 5. An inspection for, and cleaning of, debris from the inside of the vehicle;

6. Other [].

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

Corrective Action Plan Due: 09/25/2021

Domain: 06 Program Information

Rule: 5101:2-13-14 Requirements for Field and Routine Trips

Code: The program is required to have written parental permission for trips on file.

Findings: During the inspection, it was determined that written parental permission was not secured for field trips and/or routine trips off the premises or out of the areas approved for child care, as required. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/25/2021

Domain: 06 Program Information

Rule: 5101:2-13-14 Driver Requirements

Code: The program is required to have all drivers complete and annually update the bus driver training.

Findings: 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 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: 09/25/2021

Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-23 Infant Bottle and Food Preparation

Code: The program is required to retain and update infant feeding instructions.



Findings: During the inspection, it was determined that written instructions for feeding the infants noted on the Children Record Review form were [not on file/updated], as required by this rule. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 09/25/2021

Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-23 Infant Bottle and Food Preparation

Code: The program staff is required to have all bottles labeled.

Findings: During the inspection, it was determined that bottles containing milk/formula for a particular infant were not labeled with the child's name and date of preparation. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/25/2021

Domain: 07 Diapering & Infant Care

Rule: 5101:2-13-23 Infant Daily Care

Code: The program staff is required to provide a daily written record for each infant in care.

Findings: During the inspection, it was determined that there was no daily written record for each infant provided to the parent or person picking up the infant on a daily basis. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/25/2021

Domain: 08 Staff Files

Rule: 5101:2-13-10 Health Training B

Code: The program staff is required to complete the prescribed child abuse and neglect course within the

required timeframe.

Findings: In review of records, it was determined the CCSM or Substitute CCSM was left alone with children and did not have current valid documentation for training(s) listed in number(s) 2,6,11,15 below:

- 1. First Aid expired training
- 2. First Aid not taken First Aid training
- 3. First Aid not have verification of completion of First Aid
- 4. First Aid Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.
- 5. CPR expired training

- 6. CPR not taken CPR training
- 7. CPR not have verification of CPR training
- 8. CPR training taken did not include all age groups the program serves
- 9. CPR Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.
- 10. Management of Communicable Disease expired training
- 11. Management of Communicable Disease not taken CD training
- 12. Managment of Communicable Disease not have verification of completion of the full CD training
- 13. Management of Communicable Disease Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.
- 14. Child Abuse Recognition and Prevention expired training
- 15. Child Abuse Recognition and Prevention not taken Child Abuse training
- 16. Child Abuse Recognition and Prevention Documentation did not demonstrate the person who provided the training met the trainer qualifications as stated in the rule.

Correct the violation and submit the documentation of current certification with the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 09/25/2021

Domain: 08 Staff Files

Rule: 5101:2-13-08 Substitute Requirements

Code: The program is required to have substitutes that meet the requirements in rule.

Findings: During the inspection, it was determined that a substitute did not meet the following requirements proof of education, medical statement. Correct the violation and submit the program's corrective action plan to verify compliance with the requirement of the rule.

Corrective Action Plan Due: 09/25/2021

Domain: 08 Staff Files

Rule: 5101:2-13-09 Background Checks

Code: The program is required to have the applicable JFS 01176 "Program Notification of Background Check Review for Child Care" on file.

Findings: 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(s) 4 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.



4. The JFS 01176 "Program Notification of Background check Review for Child Care" was not on file at the program, but was on file at the county agency and the individual is eligible.

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

Corrective Action Plan Due: 09/25/2021

Domain: 08 Staff Files

Rule: 5101:2-13-08 Staff Records

Code: The program is required to maintain a file for each staff member at the program.

Findings: During the inspection, it was determined that documentation was not on file at the program to meet the requirements of this rule for the employee(s), as noted on the Employee Record Chart. Submit the program's corrective action plan to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/25/2021

Domain: 09 Children's Files

Rule: 5101:2-13-15 JFS 01234 'Child Enrollment and Health Information' Code: The program is required to have all children's records available.

Findings: During the inspection, it was determined that children's records had not been available to the Department and/or the Ohio Department of Health. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/25/2021

Domain: 09 Children's Files

Rule: 5101:2-13-15 Child's Medical

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

Findings: In review of 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) 1 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. Medical(s) were missing a statement that the child has been examined and is in suitable condition for participation in group care

- 6. 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
- 7. Medical(s) were missing a record of immunizations the child has had specifying month, day and year
- 8. 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
- 9. 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

10. Other []

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

Corrective Action Plan Due: 09/25/2021

Rules In-Compliance/Not Verified

| Rule | Status | Documenting Statement(s), If applicable |
|------------------------------------|-----------|-----------------------------------------|
| 5101:2-13-21 Evening and Overnight | Compliant | |
| Care | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 License Posted | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-18 Ratio and Group Size | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-18 Ratio and Group Size | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-07 Provider Requirements | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-11 Indoor Space | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-08 Child Care Staff | Compliant | bocumenting statement(s), if applicable |
| Requirements | Compilant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Flammable and | Compliant | |
| Combustible Materials in Type B Home | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-25 Topical Products and | Compliant | |
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| Rule 5101:2-13-24 On-site Pools | Status Compliant | Documenting Statement(s), If applicable |
| 5101:2-13-24 Off-Site Pools | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-12 Safe Equipment | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-04 Fire Safety for Type B | Compliant | - comment of the second of the |
| Homes | ' | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-24 Parent Permission for | Compliant | |
| Swimming | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-20 Sleep and Napping | Compliant | |
| Requirements for a Licensed Family | | |
| Child Care Provider | | |
| 0.1 | | |
| Rule 5101:2 12 12 Smoke Free | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Smoke Free | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-08 Employee Requirements | Compliant | |

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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Standard Precautions | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Vehicle Inspections | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-08 Review Policies and | Compliant | |
| Procedures | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Voluntary Temporary | Compliant | |
| Closure | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-22 Fluid Milk | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-20 Crib and Playpen | Compliant | |
| Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-11 Fall Zone | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| | | Documenting Statement(s), if applicable |
| 5101:2-13-16 Incident/Injury | Compliant | |
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| Rule | Status | Documenting Statement(s) If applicable |
| | | Documenting Statement(s), If applicable |
| 5101:2-13-23 Diapering | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| | | Documenting Statement(s), if applicable |
| 5101:2-13-12 Pets | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-24 Swimming Sites | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-22 Food Handling | Compliant | Bocamenting statement(5), it applicable |
| 5101.2-15-22 FOOd Halldling | Compilant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-11 Outdoor Equipment | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-19 Child Guidance | Compliant | |
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| Rule | Status | Documenting Statement/s) If applicable |
| | | Documenting Statement(s), If applicable |
| 5101:2-13-04 Heaters in a Type B | Compliant | |
| Home | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-14 Ratio and Supervision | Compliant | Secretary of the secret |
| • | Compilant | |
| for Field and Routine Trips | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Medical, Dental, and | Compliant | |
| General Emergency Requirements | ' | |
| General Emergency Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Medical, Dental, and | Compliant | |
| General Emergency Requirements | | |
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| Rule | Status | Documenting Statement(s), If applicable |
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| 5101:2-13-25 Medication Storage | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-19 School Age Supervision | Compliant | 0 2 2 2 2 2 (c), 11 app. 12 2 2 2 |
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| Rule | Status | Documenting Statement(s), If applicable |

| 5101:2-13-07 Type B Provider - Foster Parent | Compliant | |
|-------------------------------------------------|---------------------|-------------------------------------------|
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Toothbrushing | Compliant | Documenting Statement(s), if applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-17 Materials and | Compliant | Documenting Statement(s), if applicable |
| Equipment | Соттриате | |
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| Rule 5101:2-13-19 Supervision | Status Compliant | Documenting Statement(s), If applicable |
| 3101.2-13-19 Supervision | Соттриать | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-13 Clean Environment and | Compliant | bootimenting otatement(s), it applicable |
| Equipment | Сотрист | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-16 Communicable Diseases | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-21 Sanitary Environment | Compliant | Documentally occurrence(o)) if applicable |
| and Hygiene | | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-25 Medication Requirements | Compliant | Documenting Statement(s), if applicable |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Information in Provider Portal | Compliant | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-08 Whistle Blower | Compliant | Documenting statement(s), if applicable |
| Rule | Status | Documenting Statement(s) If applicable |
| 5101:2-13-16 Serious Incident | Status Compliant | Documenting Statement(s), If applicable |
| 3101.2-13-10 Serious incluent | Compilant | |

| - Committee | | |
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| Dula | Chahua | Decumenting Statement(s) If applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-10 Professional | Compliant | |
| Development | | |
| | | |
| Dula | Chahua | Decumenting Statement(s) If applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-20 Use of Crib and Playpen | Compliant | |
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| Rule | Status | Documenting Statement/s) If applicable |
| | | Documenting Statement(s), If applicable |
| 5101:2-13-08 Substitute | Compliant | |
| Requirements | | |
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| Rule | Ctatus | Documenting Statements) If anylinghis |
| | Status | Documenting Statement(s), If applicable |
| 5101:2-13-15 Health Conditions | Compliant | |
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| Dula | Chahua | Decumenting Statement(s) If applicable |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Information in OCLQS | Compliant | |
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| Rule | Ctatus | Decumenting Statement/s) If applicable |
| | Status | Documenting Statement(s), If applicable |
| 5101:2-13-11 Outdoor Space | Compliant | |
| | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-02 Provider Medical | Compliant | Documenting Statement(3), it applicable |
| 3101.2-13-02 FTOVIder Wiedicar | Compliant | |
| | | |
| | J | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-09 Background Checks | Compliant | bocumenting statement(s), if applicable |
| 3101.2-13-09 Background Checks | Compliant | |
| | | |
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| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-09 Background Checks | Compliant | bocumenting statement(s), if applicable |
| 5101.2-13-03 Dackground Checks | Compnant | |
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| L | 1 | |
| Rule | Status | Documenting Statement(s), If applicable |
| 5101:2-13-09 Background Checks | Compliant | bocumenting statement(s), if applicable |
| 5101.2-13-03 Dackground Checks | Compnant | |
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| | Rule | Status | Documenting Statement(s), If applicable |
|---|---------------------------------|-----------|-----------------------------------------|
| | 5101:2-13-02 Change of Location | Compliant | |
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| Rule | Status | Documenting Statement(s), If applicable |
|------------------------------------------|-------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Rule: 5101:2-13-07 Provider Requirements | Status Compliant | Documenting Statement(s), If applicable Documenting Statement: During the inspection, it was determined the provider did not obtain or maintain the required liability insurance/have a completed JFS 01933 "Liability Insurance Statement for Family Child Care Providers" completed for each child in care. Correct the violation and submit proof of insurance with the program's corrective action plan to verify |
| | | compliance with the requirement of the rule. |

| Rule | Status | Documenting Statement(s), If applicable |
|-------------------------|-----------|-----------------------------------------|
| 5101:2-13-03 Inspection | Compliant | |
| Requirements | | |
| | | |