



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 Lovebugs and Ladybugs Childcare Center	Program Number 2210024557	Program Type Child Care Center	
Address 1330 Market Ave N Canton OH 44714		County STARK	
Summary of Program Details			
Building Approval Date 05/18/2021	Use Group/Code I-4	Occupancy Limit 70	Maximum Under 2 ½ 40
Fire Inspection Approval Date	Food Service Risk Level Level III		

Inspection Information		
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 09/22/2022	Begin Time 12:50 PM	End Time 5:40 PM
Reviewer: MICHELE FAKAN		

Summary of Findings				
No. Rules Verified 58	No. Rules with Non-compliances 36	No. Serious Risk 1	No. Moderate Risk 5	No. Low Risk 40

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)		3	0	3
Young Toddler		4	0	4
Total Under 2 ½ Years	40	7	0	7
Older Toddler		1	0	1
Preschool		1	0	1
School Age		0	0	0
Total Capacity/Enrollment	70	2	0	9

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



Infant	Mixed Age Group	1 to 9	groups over and under 2 1/2 combined
Infant	Mixed Age Group	1 to 3	infant and toddler combined
Toddler	Mixed Age Group	1 to 9	groups combined staff answered door
Toddler	Mixed Age Group	1 to 3	infant and toddler combined
Preschool	Mixed Age Group	2 to 9	
Preschool	Mixed Age Group	1 to 6	combined with SA
School age	School-Age to < 11 years	1 to 2	combined with Preschool

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

Domain: 00 License & Approvals

Rule: 5101:2-12-03 Inspection Requirements
Code: The program administrator and owner are required to provide true and accurate information.

Finding: During the inspection, it was determined that the program provided false information, in that administrator stated they had no incident reports on file. CCLS asked staff who gave several examples of incidents forms they had completed and turned in to their administrator. Also administrator stated that they had not taken field trips, but CCLS was told by staff that they had taken field trips and the administrator drove some in her car and they drove children in their own vehicles. The rule requires the program to provide accurate and truthful information to the Department. Submit the program’s corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/09/2022

Moderate Risk Non-Compliances

Domain: 00 License & Approvals



Rule: 5101:2-12-04 Fire Inspection

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

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

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

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

Corrective Action Plan Due: 10/22/2022

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Ratio

Code: The program is required to maintain the appropriate staff to child ratio for each group served.

Finding: During the inspection, a ratio of 1 child care staff member(s) for 9 children was determined to have occurred for the mixed age group when the situation in number 1 below occurred:

1. A child care staff member stepped out of the room.
2. A child care staff member had not arrived at work on time.
3. Children were present who were not scheduled to be there.
4. A child care staff member was unable to work.
5. A child was injured in that group.
6. A child arrived in the group before a second staff member was scheduled to arrive with the group.
7. Two groups were combined, and the program did not follow the ratio for the youngest child in the group.
8. A child was transitioning to the next older age group, and the program did not follow the ratio for the youngest child in the group.
9. Ratio was doubled for more than two hours while children were napping.
10. Ratio was doubled while children were napping for a group that included at least one infant.
11. Ratio was doubled while children were napping and there were not enough staff members in the building to meet staff/child ratio.
12. Ratio was doubled in the school age group to allow access to the program, however, the program does not serve only school age children.



13. Both child care staff members did not have a working communication device when one staff member left the group to allow access to the school age only program.
14. The child care staff member did not return to the group after allowing access to the school age only program.
15. Other [].

Additional child care staff members must be hired or current child care staff members must be rescheduled to maintain compliance. Provide staff training. Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/22/2022

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Play Equipment

Code: The program is required to anchor equipment to the ground as required, to close "S" hooks to prevent the chain from slipping off and prevent strangulation and provide equipment with openings that will not pose a safety risk.

Finding: During the inspection, it was determined that equipment on the outdoor play space posed an imminent risk of harm to a child as noted in number 1 below:

1. The climber was not anchored.
2. The swings were not securely anchored.
3. The slide was not securely anchored.
4. The climbing rope was not securely anchored at both ends.
5. The "S" hooks on the climber were not closed in order to prevent the chain from slipping off the hook and prevent strangulation.
6. The "S" hooks on the swing(s) were not closed in order to prevent the chain from slipping off the hook and prevent strangulation.
7. The [] had an opening that was greater than three and one-half inches, but less than nine inches. Equipment openings must be less than 3 1/2 inches or more than 9 inches to avoid the risk of entrapment.

Discontinue the use of this equipment until it has been removed, repaired or replaced. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/22/2022

Domain: 06 Program Information

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



Code: The program is required to use the correct vehicle type as specified in rule. The program is also required to have all vehicles used to transport children inspected by an ASE certified mechanic, FMCSA inspector or the State Highway patrol annually, and correct all repairs that are listed on the vehicle inspection report.

Finding: During the inspection, it was determined the program used a vehicle to transport children that was not approved and/or did not have a current annual vehicle inspection indicating the vehicle was mechanically safe as noted in number 2 below:

1. The program used a converted cargo van or passenger vans designed to carry ten or more passengers. The program must cease the use of this vehicle immediately.
2. The vehicle was not inspected.
3. The vehicle was inspected by someone other than an ASE certified mechanic, federal motor carrier safety administration (FMCSA) safety inspector or the Ohio State Highway Patrol.
4. The vehicle inspection was not updated annually.
5. The vehicle inspection completed from the Ohio Highway Patrol did not meet the rule requirement.
6. The annual safety check of the vehicle(s) used by the program to transport children noted repairs or corrections that had not been completed and/or documented. The safety violations need to be corrected immediately.

Submit the program's corrective action plan, which includes either discontinuing the use of the vehicle, documentation for any new vehicle now being used to transport children, or a copy of the JFS 01230 "Vehicle Inspection Report for Child Care Centers", to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/03/2022

Domain: 09 Children's Files

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

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

Finding: A written, signed and dated JFS 01236 "Child Medical/Physical Care Plan for Child Care" must be on file for any child having health conditions which require monitoring for symptoms, or a medical procedure be performed, or ongoing administration of medication or medical foods at the program. In review of the children's records, it was determined that the required written information was either not on file, implemented or followed, for at least one child indicated on the Children Records Review, as noted in number 1 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 was missing.
24. Signature of staff member who administered the medication was missing.
25. Medication listed in the procedures to follow was not onsite available to administer as instructed and alternate instructions for this situation were not included on the plan.
26. The plan was not implemented.
27. The plan was not able to be implemented due to conflicting information.
28. The plan was not followed.

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

Corrective Action Plan Due: 10/22/2022

Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5101:2-12-02 Current Information

Code: The rule requires the program to request an administrator amendment, and submit qualifications for a new administrator, within thirty days of the change.



Finding: During the inspection, it was determined that a change of administrator had been made and the owner or administrator had failed to provide notification of this change to the Department and/or submit qualifications for the new administrator within 30 days. A license is only valid for the licensee, administrator, address and license capacity designated on the license. Technical assistance was provided, and as discussed, submit the request to amend the license and any required documentation, if applicable, through the licensing system, OCLQS.

Corrective Action Plan Due: 10/22/2022

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-19 Supervision

Code: The program staff is required to meet each child's basic, developmental, behavioral and special needs.

Finding: During the inspection, it was determined that child-care staff did not meet the basic needs of a child as noted in number 4 below:

1. Assisting children with toileting
2. Assisting children with handwashing
3. Assisting children with basic hygiene
4. Responding appropriately to a child in distress
5. Assisting a child wiping his/her nose
6. Washing a child's face
7. Assisting a child in tying his/her shoes
8. Assisting a child in changing his/her clothes when needed
9. A child's developmental needs were not met
10. A child's behavioral needs were not met
11. Parental preferences, that were not in conflict with a licensing rule, were not followed

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 required at this time.

Corrective Action Plan Due: 10/22/2022

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-20 Cots and Napping

Code: The program is required to provide a quiet activity for children who do not fall asleep after an appropriate length of time.



Finding: During the inspection, it was determined that at least one child who had not fallen asleep after an appropriate length of time was not provided with an opportunity to engage in quiet activities. 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 required at this time.

Corrective Action Plan Due: 11/03/2022

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

Code: The program is required to have a method for tracking the children in each group. The tracking method must be updated throughout the day and kept with the group at all times.

Finding: During the inspection, it was determined that the method for tracking children in each group did not meet the requirements of the rule as noted in numbers 4 and 5 below:

1. There was no method in place;
2. The method did not include each child's name;
3. The method did not include each child's date of birth;
4. The tracking method did not remain with the group at all times;
5. The tracking method was not updated throughout the day as children entered or left the group.

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

Corrective Action Plan Due: 10/22/2022

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Group Size

Code: The program may combine all age groups when there are twelve or fewer children in the center.

Finding: During the inspection, it was determined groups which included children less than two and one half years were combined with groups of children two and one half years and older and there were more than 12 children in the center. 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 required at this time.

Corrective Action Plan Due: 10/22/2022



Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

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

Finding: During the inspection, it was determined that the attendance records did not include the required information listed in numbers 2 and 4 below:

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

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

Corrective Action Plan Due: 10/22/2022

Domain: 01 Ratio & Supervision

Rule: 5101:2-12-18 Attendance Records

Code: The program is required to maintain a record of the arrival and departure of each child. The program is also required to retain the original attendance record at the center for a period of one year.

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

1. No attendance record was being maintained.
2. The attendance record was not being consistently completed.
3. The original 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: 10/22/2022



Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Equipment

Code: The program is required to use straps on equipment that is manufactured with straps.

Finding: During the inspection, it was determined that the following equipment was not used according to manufacturer's guidelines as noted in number 2 below:

1. The straps were missing on the [].
2. The straps were attached, but were not used on the highchairs and changing table during a diaper change.
3. The straps were attached and were used, but were not used in a safe manner.
4. Manufacturer's guidelines for the [] were not followed in that [].

Provide staff training. Submit the program's corrective action plan, which includes a statement that training has been provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/22/2022

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-13 Handwashing Requirements

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

Finding: During the inspection, it was determined that at least one child in the infant, preschool, and school age group did not wash his or her hands at the time listed in numbers 1, 2, 3, and 5 below, as required in rule.

1. Upon arrival.
2. Prior to departure.
3. After toileting/diaper change.
4. After contact with bodily fluids.
5. After returning from outdoor play.
6. After handling pets, pet cages, or other pet objects that have come in contact with the pet, before moving on to another activity.
7. Before eating or assisting with food preparation.
8. After water activities.
9. When visibly soiled (must use soap and water)
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: 10/22/2022

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 numbers 4 and 6 below, were in the boys, girls, and toddler 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 required at this time.

Corrective Action Plan Due: 10/22/2022

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to label all cleaning and sanitizing supplies.

Finding: During the inspection, it was determined that not all cleaning/sanitizing supplies had been clearly labeled. When cleaning or sanitizing supplies are not stored in their original containers, the container must be labeled with the contents. 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 required at this time.

Corrective Action Plan Due: 10/22/2022



Domain: 03 Postings & Equipment

Rule: 5101:2-12-17 Materials and Equipment

Code: The program is required to have play materials accessible and orderly.

Finding: During the inspection, it was determined that play materials were not accessible/orderly for the following reason(s) as noted in number 1 below:

1. Play materials were not readily accessible to the children in the mixed age classroom;
2. Play materials were not arranged in an orderly manner so that children have opportunities to select, remove and replace play materials with minimal assistance during the day in the [] classroom.

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 required at this time.

Corrective Action Plan Due: 11/03/2022

Domain: 03 Postings & Equipment

Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan

Code: The program is required to post and implement the JFS 01242 "Medical, Dental, and General Emergency Plan" when necessary.

Finding: During the inspection, it was determined the requirements for the JFS 01242 "Medical, Dental, and General Emergency Plan for Child Care" were not followed as noted in number 8 below:

1. The plan was not posted in each classroom.
2. The plan was not posted in other spaces used by children.
3. The name, address and telephone number of the program were not complete.
4. The location of first aid kit, fire extinguishers and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.
5. The telephone number for emergency squad, fire department, hospital, poison control program, public children services agency, local health department, local emergency management agency, and police department were not complete.
6. Location of children's records was not complete.
7. Emergency information including any medications or supplies needed in the event of an evacuation was not complete.
8. The current version of the prescribed form was not used.
9. The plan was not implemented when necessary in that [].



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

Corrective Action Plan Due: 10/22/2022

Domain: 03 Postings & Equipment

Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan

Code: The program is required to have the JFS 01201 "Dental First Aid" posted in a readily available area at the program.

Finding: During the inspection it was determined that the current JFS 01201 "Dental First Aid" was not posted in a location readily available to center staff and parents as required. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is required at this time.

Corrective Action Plan Due: 10/22/2022

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Space Requirements

Code: The program is required to conduct and document quarterly inspections of their outdoor play space.

Finding: During the inspection, it was determined that quarterly inspections of one or more outdoor play area(s) and equipment had not been completed and documented as required, using the JFS 01281 "Child Care Playground Inspection Report" form. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 10/22/2022

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Space Requirements

Code: The program is required to have an outdoor play space free from general hazards.



Finding: During the inspection, it was determined that hazardous conditions existed in the outdoor play area, as noted in numbers 2 and 6 below:

1. There was broken glass.
2. There were tall weeds.
3. There was poison ivy.
4. There were tree branches.
5. There was mold visible.
6. There were thistles with pricklers.
7. There were bird droppings.
8. There were bolts with more than two threads exposed along a fence line or gate on a playground.
9. The sandbox was contaminated.
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: 10/22/2022

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Space Requirements

Code: The program is required to have an outdoor play space free from debris.

Finding: During the inspection, it was determined that the trash can(s) on the outdoor play space did not meet the requirement(s) as noted in number 6 below:

1. The trash can was missing a lid.
2. The trash can was not emptied from the day(s) before.
3. The trash can was overflowing with trash.
4. The trash can was infested with insects.
5. The trash can was visibly dirty.
6. Other did not find trash can, but found a round container with some trash in it, but also trash on ground.

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 required at this time.

Corrective Action Plan Due: 10/22/2022

Domain: 05 Health & Safety



Rule: 5101:2-12-16 Emergency Drills

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

Finding: During the inspection, it was determined that the required drills were not completed for item numbers 1 and 2 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: 10/22/2022

Domain: 05 Health & Safety

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

Code: The program is required to post the JFS 08087 "Ohio Communicable Disease Chart".

Finding: During the inspection, it was determined that the JFS 08087 "Ohio Communicable Disease Chart" was not posted as required, as indicated in number 3 below:

1. The chart was not posted.
2. In a location readily available to program staff and parents.
3. The posted chart was not the current version.
4. The posted chart was not displayed in the size available in the ODJFS forms central to be easily read.

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 required at this time.

Corrective Action Plan Due: 10/22/2022

Domain: 05 Health & Safety

Rule: 5101:2-12-16 Incident/Injury Reporting

Code: The program is required to retain completed JFS 01299 "Incident/Injury Report For Child Care" on file for at least one year.



Finding: In review of the program's records, it was determined that completed JFS 01299 "Incident/Injury Report For Child Care" forms were not being kept on file at the program for at least one year, as required. Submit the program's corrective action plan, which includes a statement that all JFS 01299 forms will be maintained on file at the program for a minimum of one year, to the Department to verify compliance with the requirements of the rule.

Corrective Action Plan Due: 11/03/2022

Domain: 05 Health & Safety

Rule: 5101:2-12-22 Fluid Milk Requirements

Code: The program is required to serve age-appropriate fluid milk or obtain written documentation when serving substitutions for fluid milk.

Finding: During the inspection, it was determined that required documentation for substitutions for fluid milk was not on file as noted in number 2 below:

1. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when infants up to 12 months of age are served anything other than formula or breast milk.
2. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when infants and toddlers 12 months of age up to 24 months of age are served anything other than unflavored whole homogenized vitamin D fortified cow's milk, breast milk, or non-cow milk substitution that is nutritionally equivalent to milk.
3. Written instructions from a licensed physician, physician's assistant, or certified nurse practitioner when toddlers and children 24 months of age and older are served anything other than unflavored one per cent milk that is vitamin A and D fortified, unflavored fat free or skim milk that is vitamin A and D fortified, or non-cow milk substitutions that are nutritionally equivalent to milk.
4. Written parental consent for non-cow milk substitutions that are nutritionally equivalent to milk for children 12 months of age and older.
5. The program did not have the type of milk on-site to ensure that all children were served age-appropriate fluid milk.

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 required at this time.

Corrective Action Plan Due: 10/22/2022

Domain: 05 Health & Safety



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

Code: The program is required to post the current weekly menu in a noticeable location that is accessible to parents and note any substitutions at the time of the change.

Finding: During the inspection, it was determined that the program's weekly menu did not meet the requirement as noted in number 2 below.

1. The menu was not posted.
2. The posted menu was not in a visible place readily accessible to parents.
3. The menu was not currently dated.
4. The entire menu was substituted.
5. At least one item on menu did not match what was served.
6. The meal or snack served did not match the posted menu.

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 required at this time.

Corrective Action Plan Due: 10/22/2022

Domain: 06 Program Information

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

Code: The program is required to complete and document weekly inspections of vehicles used to transport children.

Finding: During the inspection, it was determined that the program had not performed and/or 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 inside the vehicle

Submit the program's corrective action plan, which includes a copy of the documented weekly inspection of vehicles, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/03/2022



Domain: 06 Program Information

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

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

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

1. No documentation on file
2. Incomplete documentation

Please refer to the Employee Record Chart which indicates any driver needing current documentation of completion of this training. Complete the training as discussed. Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/03/2022

Domain: 06 Program Information

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

Code: The program is required to have children and staff practice and document safely exiting vehicles during an emergency.

Finding: During the inspection, it was determined that the program had not conducted and/or documented monthly emergency exiting drills on vehicles with children, including the date of the drill and all staff who transport children. Provide staff training. Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/03/2022

Domain: 06 Program Information

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

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



Finding: During the inspection, it was determined that written parental permission was not secured for field trips and/or routine trips off the premises or out of the areas approved for child care, as required. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is required at this time.

Corrective Action Plan Due: 11/03/2022

Domain: 06 Program Information

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

Code: The program is required to retain a copy of all licenses for drivers of the program.

Finding: In review of employee records, it was determined that the driver(s) noted on the Employee Record Chart used for trips did not have a copy of a current driver's license on file. Submit the program's corrective action plan, which includes a copy of the current driver's license, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/03/2022

Domain: 07 Diapering & Infant Care

Rule: 5101:2-12-23 Diapering and Toilet Training

Code: The program staff is required to follow diaper changing procedures.

Finding: During this inspection, it was determined that proper diaper changing procedures were not followed as a common container became contaminated. 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 required at this time.

Corrective Action Plan Due: 11/03/2022

Domain: 07 Diapering & Infant Care

Rule: 5101:2-12-23 Infant Daily Care



Code: The program is required to provide a daily written record for each infant in care to the parents when picking up the infant each day.

Finding: 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. 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 required at this time.

Corrective Action Plan Due: 10/22/2022

Domain: 07 Diapering & Infant Care

Rule: 5101:2-12-20 Cribs

Code: The program is required to label all cribs.

Finding: During the inspection, it was determined that at least one crib was not labeled with the child's name, 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 required at this time.

Corrective Action Plan Due: 10/22/2022

Domain: 07 Diapering & Infant Care

Rule: 5101:2-12-20 Cribs

Code: The program is required to provide clean sheets for all cribs that are not too large or too small for the crib.

Finding: During the inspection, it was determined that sheets did not meet the rule requirement as noted in number 2 below:

1. At least one crib did not have a sheet.
2. At least one sheet was too large.
3. At least one sheet was too small.
4. At least one sheet was torn.
5. Crib sheets were not clean.

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 required at this time.

Corrective Action Plan Due: 10/22/2022



Domain: 07 Diapering & Infant Care

Rule: 5101:2-12-20 Cribs

Code: The program is required to stop using a crib for a child when they are able to climb out, are more than 35" tall, or the crib is hazardous for the child.

Finding: During the inspection, it was determined that a child was placed in a crib when the condition in number 1 below was met:

1. The child is able to climb out of the crib.
2. The child is 35" tall or more.
3. The crib is considered hazardous for the child.

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 required at this time.

Corrective Action Plan Due: 10/22/2022

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: 10/22/2022

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 3b and 3c.

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: 10/22/2022

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 3, 5, 6, and 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: 10/22/2022

Domain: 08 Staff Files

Rule: 5101:2-12-07 Administrator Qualifications

Code: The program administrator is required to complete the rules course reiew within the defined time period.

Finding: During the inspection, it was determined that the administrator had not completed the required rules review course provided by this Department for program administrators within the time period defined in 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 required at this time.

Corrective Action Plan Due: 10/22/2022

Domain: 09 Children's Files

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

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

Finding: In review of 25% of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in number 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. 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: 10/22/2022

Domain: 09 Children's Files

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

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

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



Corrective Action Plan Due: 10/22/2022

Domain: 10 Written Policies & Procedures

Rule: 5101:2-12-07 Written Program Policies and Procedures

Code: The program's policies and procedures are required to include all topics outlined in rule.

Finding: During the inspection, it was determined the program's written policies and procedures provided to the parents/guardians and employees was missing item number 15 below:

General Information

1. Program name, address, email address and telephone number.
2. Description of the program's program philosophy.
3. Days and hours of operation, scheduled closings and basic daily schedule.
4. Staff/child ratios and group size.
5. Opportunities for parent involvement in program activities.
6. Opportunities for parents to meet with teachers regarding their child.
7. Payment schedule, overtime charges and registration fees as applicable.
8. Supports for onsite breastfeeding or pumping for mothers who wish to do so (if the program serves infants or toddlers).

Program Policies and Procedures

9. Enrollment including required enrollment information.
10. Care of children without immunizations.
11. Attendance including procedures for arrival and departure, the program's absent day policy, releasing child to persons other than the parent, releasing a child according to a custody agreement and follow up when a child scheduled to arrive from another program or activity does not arrive.
12. Supervision of children, including a separate supervision policy for school-age children, if applicable.
13. Child guidance.
14. Suspension and expulsion.
15. Compliance with the Americans with Disabilities Act (ADA), including administering medication to children with disabilities and administering care procedures to children with disabilities.
16. Outdoor play, including limitations placed on outdoor play due to weather or safety issues (considerations may include but are not limited to temperature, humidity, wind chill, ozone levels, pollen count, lightning, rain or ice.)
17. Food and dietary policy, including, information regarding meeting one-third of the child's recommended daily dietary allowance, policy regarding formula, breast milk, meals and snacks, and a policy on providing supplemental food.
18. Management of illness including isolation precautions, symptoms for discharge and return and notification of parent of ill child.
19. Summary of procedures taken in the event of an emergency, serious illness or injury.
20. Administration of medication and topical products including medical foods, modified diets and whether school age children are permitted to carry their own medication and ointments.



21. Transportation for fieldtrips, routine trips (if applicable) and emergencies, including if the center will provide child care services to children whose parents refuse to grant consent for transportation to the source of emergency treatment.
22. Water activities/swimming.
23. Infant care, if applicable, including feeding, frequency of diaper checks and information about daily activities.
24. Sleeping, Napping and Resting.
25. Evening and overnight care, if applicable.
26. Policy on hours of operation including closing due to weather, school delays or closings and any other factors.
27. Situations that may require disenrollment of a child, if applicable.
28. Problem or issue resolution for parents or employees to follow when needing assistance in resolving problems related to the child care program.
29. Formal screenings and assessments on enrolled children and if the program reports child level data to ODJFS pursuant to 5101:2-17-02 of the Administrative Code.

Revise the program's written policies and procedures to include the missing information. Submit the program's corrective action plan, which includes the revised written policies and procedures, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/03/2022

Domain: 10 Written Policies & Procedures

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

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

Finding: During the inspection, it was determined the program's written disaster plan did not meet the requirement or was missing the information in numbers 18 and 19 below:

Procedures:

1. The written disaster plan had not been completed
2. The plan was not provided to all child care staff and employees
3. The plan was not used to respond to an emergency or disaster situation
4. Weather emergencies and natural disasters which include severe thunderstorms, tornadoes, flash flooding, major snowfall, blizzards, ice storms or earthquakes
5. Emergency outdoor and indoor lockdown or evacuation due to threats of violence which includes active shooter, bioterrorism or terrorism
6. Emergency or disaster evacuations due to hazardous materials and spills, gas leaks or bomb threats.
7. Outbreaks, epidemics or other infectious disease emergencies
8. Loss of power, water, or heat
9. Other threatening situations that may pose a health or safety hazard to the children in the program

Details:

10. Shelter in place or evacuation, how the program will care for and account for the children until they can be reunited with the parent



11. Assisting infants and children with special needs and/or health conditions
12. Emergency contact information for parents and the program
13. Procedures for notifying and communicating with parents regarding the location of the children if evacuated
14. Procedures for communicating with parents during loss of communications, no phone or internet service available
15. The location of supplies and procedures for gathering necessary supplies for staff and children if required to shelter in place
16. What to do if a disaster occurs during the transport of children or when on a field trip or routine trip
17. Making the plan available to all child care staff members and employees
18. Training of staff or reassignment of staff duties as appropriate
19. Updating the plan on a yearly basis
20. Contact with local emergency management officials

Make the necessary revisions to the disaster plan. Submit the program's corrective action plan, which includes the revised information, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/03/2022

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.
Rule: 5101:2-12-04 Building Department Inspection	Compliant	Documenting Statement: On the day of the inspection, the program was operating in compliance with the current building approval(s).
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; #9949163 and expires 3/1/2023.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements	Compliant	Documenting Statement: All Child Care Staff Members had verification of educational requirements on file at the program.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-09 Background Check Requirements	Compliant	Documenting Statement: During the inspection, the required documentation regarding background checks was on file for all employees listed.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-10 Health Training Requirements	Compliant	Documenting Statement: The program had at least one Child Care Staff Member with currently valid training in First Aid, Management of Communicable Disease, CPR, and Child Abuse Prevention present and readily accessible during all hours of operation.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-10 Professional Development Requirements	Compliant	Documenting Statement: At the time of the inspection, all child care staff members had completed the required amount of professional development training.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Indoor Space Requirements	Compliant	Documenting Statement: The restrooms are used exclusively by the program.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Play Fall Zones	Compliant	Documenting Statement: The protective material used under outdoor equipment was rubber mulch.
Rule	Status	Documenting Statement(s), If applicable



5101:2-12-13 Smoke Free Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 First Aid/Standard Precautions	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Schedule	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-17 Daily Outdoor Play	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 License Capacity	Compliant	Documenting Statement: The program was operating within their license capacity limits.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-19 Child Guidance	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-22 Safe Food Handling/Storage	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-23 Infant Bottle and Food Preparation	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-25 Medication Administration	Compliant	