

# **Center Licensing Inspection Full Report**

All licensed child care programs are inspected at least once each year. Non-compliances are documented and grouped as Serious, Moderate or Low risk violations. Documenting statements and supplemental information may be included in this report. Licensing inspection reports from the previous three years can be viewed on the child care website at <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. This includes complaint investigation reports with substantiated allegations. For any other child care records, please contact the Child Care Help Desk at 1-877-302-2347, option 4.

|  | Program Deta        | ils             |                    |
|--|---------------------|-----------------|--------------------|
| Program Name                             | Program Number      |                 | Program Type       |
| HOPES & DREAMS CHILDCARE CENTER          | 000000100305        |                 | Child Care Center  |
|  |                     |                 |                    |
| Address<br>4490 NORQUEST BLVD YOUNGSTOWN |                     |                 | County<br>MAHONING |
| OH 44515                                 |                     |                 | MAHONING           |
|  |                     |                 |                    |
|  |                     |                 |                    |
| Building Approval Date                   | Use Group/Code      | Occupancy Limit | Maximum Under 2 ½  |
| 08/07/2017                               | E                   |                 |                    |
| Fire Inspection Approval Date            | Food Service Risk L | evel            |                    |
| 11/07/2023                               | Level III           |                 |                    |

|                     | Inspection Information         |                  |                   |              |  |
|---------------------|--------------------------------|------------------|-------------------|--------------|--|
| Inspection Type     | Inspection S                   | соре             | Inspection Notice |              |  |
| Annual              | Full                           |                  | Unannounced       |              |  |
| Inspection Date     | Begin Time 1                   | L1:15 AM         | End Time 3:30 PM  |              |  |
| 01/05/2024          |                                |                  |                   |              |  |
| Reviewer:           |                                |                  |                   |              |  |
| KATHLEEN BONACCI    |                                |                  |                   |              |  |
| Summary of Findings |                                |                  |                   |              |  |
| No. Rules Verified  | No. Rules with Non-compliances | No. Serious Risk | No. Moderate Risk | No. Low Risk |  |
| 58                  | 1                              | 0                | 0                 | 1            |  |

| License Capacity and Enrollment at the Time of Inspection |                  |              |           |       |
|---|------------------|--------------|-----------|-------|
| Age Group   | License Capacity | y Enrollment |           |       |
|   | Totals           | Full Time    | Part Time | Total |
| Infant ( Birth to < 18 m)                                 |                  | 11           | 0         | 11    |
| Young Toddler   |                  | 16           | 0         | 16    |
| Total Under 2 ½ Years                                     | 50               | 27           | 0         | 27    |
| Older Toddler   |                  | 7            | 1         | 8     |
| Preschool   |                  | 28           | 1         | 29    |
| School Age  |                  | 0            | 35        | 35    |
| Total Capacity/Enrollment                                 | 170              | 35           | 37        | 99    |

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



| a                        |  |  |
|--------------------------|--|--|
| 0 to < 12 months         | 3 to 8   | Diaper change                                  |
|                          |  | Sleeping                                       |
|                          |  | Floor time                                     |
|                          |  | Feeding  |
| 0 to < 12 months         | 3 to 8   | Swing  |
|                          |  | Floor time                                     |
|                          |  | Feeding  |
|                          |  | Snack (Goldfish                                |
|                          |  | crackers & 100%                                |
|                          |  | juice.)  |
| 12 months to < 18 months | 3 to 8   | Diaper change                                  |
|                          |  | Music  |
| 12 months to < 18 months | 3 to 8   | Music  |
| 3 years to < 4 years     | 2 to 10  | Lunch  |
| 4 years to < 5 years     | 2 to 10  | Nap  |
| 18 months to < 30 months | 2 to 9   | Lunch  |
| 18 months to < 30 months | 2 to 10  | Handwashing                                    |
|                          |  | Diaper change                                  |
| School-Age to < 11 years | 1 to 1   | Off school bus                                 |
|                          |  | Handwashing                                    |
| 4 years to < 5 years     | 2 to 9   | Lunch  |
| 4 years to < 5 years     | 1 to 10  | Nap  |
| 3 years to < 4 years     | 2 to 19  | Freeplay                                       |
|                          |  |  |
|                          | 12 months to < 18 months<br>12 months to < 18 months<br>3 years to < 4 years<br>4 years to < 5 years<br>18 months to < 30 months<br>18 months to < 30 months<br>School-Age to < 11 years<br>4 years to < 5 years<br>4 years to < 5 years<br>4 years to < 5 years | 0 to < 12 months3 to 812 months to < 18 months |

## **Summary of Non-Compliances**

If a program disagrees with a licensing finding, the program may request a review of the finding(s). Ohio Administrative Code 5101:2-12-03 and 5101:2-13-03 detail the process for submitting a request for review. The request for review must be submitted within seven business days from the receipt of the licensing report. In addition, if the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited.

### Serious Risk Non-Compliances

No Serious Risk Non-Compliances were observed during this inspection



### **Moderate Risk Non-Compliances**

#### No Moderate Risk Non-Compliances were observed during this inspection

Low Risk Non-Compliances

#### Domain: 08 Staff Files

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

<u>Code</u>: 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.

<u>Finding</u>: 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 members 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: 02/04/2024



## 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     |
|                                   | compliant | in a location visible to parents as        |
|                                   |           | required.                                  |
|                                   |           |  |
|                                   |           |  |
| Rule                              | Status    | Documenting Statement(s), If applicable    |
| Rule: 5101:2-12-02 Current        | Compliant | Documenting Statement: The program         |
| Information                       |           | had current information entered in the     |
|                                   |           | Ohio Child Licensing and Quality System    |
|                                   |           | (OCLQS).                                   |
|                                   |           |  |
| Rule                              | Status    | Documenting Statement(s), If applicable    |
| 5101:2-12-03 Inspection           | Compliant |  |
| Requirements                      |           |  |
|                                   |           |  |
| Rule                              | Status    | Documenting Statement(s), If applicable    |
| Rule: 5101:2-12-04 Building       | Compliant | Documenting Statement: A copy of the       |
| Department Inspection             |           | certificate of occupancy was available on- |
|                                   |           | site for review.                           |
|                                   |           |  |
| Rule                              | Status    | Documenting Statement(s), If applicable    |
| 5101:2-12-04 Fire Inspection      | Compliant |  |
|                                   |           |  |
| Rule                              | Status    | Documenting Statement(s), If applicable    |
| Rule: 5101:2-12-04 Food Service   | Compliant | Documenting Statement: The food service    |
| Requirements                      |           | license was observed posted. Following is  |
|                                   |           | the audit number and date of expiration:   |
|                                   |           | 9969438,691,expires 3-1-2024.              |
|                                   |           |  |
| Rule: 5101:2-12-04 Food Service   | Compliant | Documenting Statement: The off-site        |
| Requirements                      |           | food processing establishment's current    |
|                                   |           | Ohio Department of Agriculture             |
|                                   |           | registration information was observed      |
|                                   |           | during the inspection.                     |
|                                   |           |  |



| Rule                                 | Status    | Documenting Statement(s), If applicable  |
|--------------------------------------|-----------|--|
| Rule: 5101:2-12-07 Administrator     | Compliant | Documenting Statement: The               |
| Qualifications                       |           | administrator has completed the rules    |
|                                      |           | review course.                           |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-07 Administrator     | Compliant | Documenting Statement: The               |
| Responsibilities/Requirements        |           | administrator's hours of availability to |
|                                      |           | meet with parents were posted in a       |
|                                      |           | noticeable location.                     |
|                                      |           |  |
| Rule: 5101:2-12-07 Administrator     | Compliant | Documenting Statement: Employment        |
| Responsibilities/Requirements        |           | records for current as well as past      |
|                                      |           | employees were being maintained on file  |
|                                      |           | as required.                             |
|                                      |           |  |
| Rule: 5101:2-12-07 Administrator     | Compliant | Documenting Statement: The current       |
| Responsibilities/Requirements        |           | licensing rules were available in a      |
|                                      |           | noticeable location on the premises.     |
|                                      |           | Online.                                  |
|                                      | I         |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-07 Written Program   | Compliant | Documenting Statement: The written       |
| Policies and Procedures              |           | policies and procedures reviewed on the  |
|                                      |           | day of the inspection were verified as   |
|                                      |           | complete.                                |
|                                      |           |  |
| Rule                                 | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-08 Medical Statement | Compliant | Documenting Statement: All employees     |
|                                      |           | had current medical statements on file.  |
| Rule: 5101:2-12-08 Medical Statement | Compliant | Documenting Statement: During the        |
|                                      |           | inspection, the requirements of the rule |
|                                      |           | regarding staff medical statements were  |
|                                      |           | discussed.                               |
|                                      |           |  |

| Rule   | Status    | Documenting Statement(s), If applicable   |
|--|-----------|---|
| Rule: 5101:2-12-08 Orientation<br>Training & Whistle Blower Protection | Compliant | Documenting Statement: On the day of<br>the inspection, all child care staff<br>members had met orientation training<br>requirements. |

| Rule | Status | Documenting Statement(s), If applicable |
|------|--------|---|
|      |        |   |



| Rule: 5101:2-12-09 Background Check | Compliant | Documenting Statement: During the       |
|-------------------------------------|-----------|---|
| Requirements                        |           | 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 | Compliant | Documenting Statement: The program          |
| Requirements                       |           | 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 |
|---------------------------|-----------|---|
| 5101:2-12-11 Indoor Space | Compliant |   |
| Requirements              |           |   |

| Rule                                | Status    | Documenting Statement(s), If applicable |
|-------------------------------------|-----------|---|
| 5101:2-12-11 Separation of Children | Compliant |   |
| Under 2 1/2 Years                   |           |   |

| Rule   | Status    | Documenting Statement(s), If applicable  |
|--|-----------|--|
| Rule: 5101:2-12-11 Outdoor Space<br>Requirements | Compliant | Documenting Statement: Drinking water<br>is provided by means of a pitcher of water<br>and disposable cups.  |
| Rule: 5101:2-12-11 Outdoor Space<br>Requirements | Compliant | Documenting Statement: Indoor play<br>space used for gross motor activities was<br>the hallway.  |
| Rule: 5101:2-12-11 Outdoor Space<br>Requirements | Compliant | Documenting Statement: Outdoor play<br>was not observed due to weather<br>conditions however, the quarterly<br>playground inspections were discussed<br>and documentation was on file, as<br>required. |

| Rule                            | Status    | Documenting Statement(s), If applicable   |
|---------------------------------|-----------|---|
| Rule: 5101:2-12-11 Outdoor Play | Compliant | Documenting Statement: The outdoor        |
| Equipment                       |           | play space and equipment were not         |
|                                 |           | viewed during this inspection due to snow |
|                                 |           | covering; inclement weather conditions;   |
|                                 |           | however, the requirements were            |
|                                 |           | discussed.                                |
|                                 |           |   |



|           | discussed.  |
|-----------|---|
|           |   |
|           | Documenting Statement(s), If applicable   |
| Compliant | Documenting Statement: The protective material used under outdoor equipment was pea gravel .  |
| Status    | Documenting Statement(s), If applicable   |
|           | Documenting Statement: Equipment was  |
| Compliant | observed to be in good condition.   |
| Status    | Documenting Statement(s), If applicable   |
|           |   |
| Compliant |   |
| Status    | Documenting Statement(s), If applicable   |
| Compliant | Documenting Statement: During the   |
|           | inspection, the cleaning and sanitation of items and toys mouthed by children were discussed. |
| Compliant | Documenting Statement: During the   |
|           | inspection, the equipment was observed clean and in good repair.                              |
| Status    | Documenting Statement(c) If applicable  |
|           | Documenting Statement(s), If applicable<br>Documenting Statement: Staff and                   |
| Compliant | children were observed washing hands as   |
|           | required by the rule.   |
|           |   |
|           | Documenting Statement(s), If applicable   |
| Compliant |   |
| Status    | Documenting Statement(s), If applicable   |
| Compliant | Documenting Statement: At the time of   |
|           | the inspection, 25% of the children's   |
|           | records were reviewed, and the records  |
|           | were complete, as required by the rule.   |
|           | Compliant Compliant Status Compliant Status Compliant Status Status Status                    |



| Rule: 5101:2-12-15 Child Medical and<br>Enrollment Records | Compliant | Documenting Statement: In review of<br>25% of the records, at the time of the<br>inspection, children's medical statements<br>were complete and on file, as required by<br>the rule. |
|--|-----------|--|
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-15 Medical/Physical                        | Compliant | Documenting Statement: The program   |
| Care Plans   | compliant | had current information on the medical   |
|  |           | status and the required treatment plan   |
|  |           | for the children with health conditions.   |
|  | L         |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-16 Medical, Dental,                        | Compliant | Documenting Statement: On the day of   |
| and General Emergency Plan                                 |           | the inspection, the complete prescribed  |
|  |           | JFS 01242 "Medical, Dental, and General  |
|  |           | Emergency Plan For Child Care" were  |
|  |           | posted in the program as required.   |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-16 Emergency Drills                        | Compliant | Documenting Statement: Documentation   |
| Rule. 5101.2-12-10 Emergency Drins                         | Compliant | for completed fire, weather, and   |
|  |           | emergency/lockdown drills was verified   |
|  |           | during this inspection.  |
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-16 First Aid/Standard                      | Compliant | Documenting Statement: During the  |
| Precautions  |           | inspection, the program had complete   |
|  |           | first aid kit available as required.   |
| Rule: 5101:2-12-16 First Aid/Standard                      | Compliant | Documenting Statement: The program   |
| Precautions  |           | had a system in place for regularly  |
|  |           | checking and replacing first aid kit   |
|  |           | supplies.  |
|  |           |  |

| Rule   | Status    | Documenting Statement(s), If applicable   |
|--|-----------|---|
| Rule: 5101:2-12-16 Management of<br>Communicable Disease | Compliant | Documenting Statement: The JFS 08087<br>"Communicable Disease Chart" was<br>posted and was readily available to staff<br>and parents. |
| Rule: 5101:2-12-16 Management of Communicable Disease    | Compliant | Documenting Statement: The program staff stated parents were informed when  |



| Beg <u>inning</u>                   |           |   |
|-------------------------------------|-----------|---|
|                                     |           | their child had any exposure to a         |
|                                     |           | contagious illness by number 1 below:     |
|                                     |           |   |
|                                     |           | 1. A posted notice;                       |
|                                     |           | 2. Verbal communication;                  |
|                                     |           |   |
|                                     |           | 3. A written notice sent home;            |
|                                     |           | 4. A note posted on the classroom door;   |
|                                     |           | 5. Other [ ].                             |
|                                     |           |   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Incident/Injury  | Compliant | Documenting Statement: The JFS 01299      |
| Reporting                           |           | "Incident/Injury Report For Child Care"   |
| hepoteng                            |           | forms reviewed during this inspection     |
|                                     |           |   |
|                                     |           | were complete as required.                |
|                                     |           |   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-16 Written Disaster | Compliant | Documenting Statement: Annual training    |
| Plan                                |           | of the written disaster plan was          |
|                                     |           | completed by staff.                       |
|                                     |           |   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-17 Daily Schedule   | Compliant | Documenting Statement: Daily schedules    |
| Rule. 5101.2-12-17 Daily Schedule   | Compliant |   |
|                                     |           | were observed posted.                     |
|                                     |           |   |
| Rule: 5101:2-12-17 Daily Schedule   | Compliant | Documenting Statement: During the         |
|                                     |           | inspection, developmentally-appropriate   |
|                                     |           | practices were observed in the            |
|                                     |           | classroom(s).                             |
|                                     |           |   |
|                                     | 1         |   |
| Rule                                | Status    | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-17 Materials and    | Compliant | Documenting Statement: Sufficient         |
|                                     | Compliant | -   |
| Equipment                           |           | equipment was observed in all categories. |
|                                     |           |   |
|                                     |           |   |
| Rule                                | Status    | Documenting Statement(s), If applicable   |
| 5101:2-12-17 Daily Outdoor Play     | Compliant |   |
|                                     |           |   |
| l                                   |           |   |
| 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   |



| Be <u>ginning</u> !                      |                     |   |
|--|---------------------|---|
| Rule: 5101:2-12-18 Ratio                 | Compliant           | Documenting Statement: During the inspection, enough Child Care Staff Members were employed to meet the staff/child ratios.   |
| Rule: 5101:2-12-18 Ratio                 | Compliant           | Documenting Statement: The Appendix A<br>"Staff/Child Ratios, Age Grouping and<br>Maximum Group Size" was posted in a<br>noticeable area at the program as<br>required.   |
| Rule: 5101:2-12-18 Ratio                 | Compliant           | Documenting Statement: Staff/child<br>ratios observed during the inspection<br>were in compliance.  |
| Rule: 5101:2-12-18 Ratio                 | Compliant           | Documenting Statement: During the<br>inspection, the requirements of the rule<br>regarding staff/child ratios were<br>discussed. Use updated ration chart 10-<br>2021.  |
|  | -                   |   |
| Rule: 5101:2-12-18 Group Size            | Status<br>Compliant | Documenting Statement(s), If applicableDocumenting Statement: The group sizesobserved on the day of the inspectionwere in compliance.   |
| Rule: 5101:2-12-18 Group Size            | Compliant           | Documenting Statement: Complete<br>transition agreements were verified in the<br>classrooms for children currently in<br>transition to a new group.   |
|  |                     |   |
| Rule                                     | Status              | Documenting Statement(s), If applicable   |
| Rule: 5101:2-12-18 Attendance<br>Records | Compliant           | Documenting Statement: During the<br>inspection, attendance records were<br>reviewed. Child Care Staff Members were<br>viewed recording the attendance for each<br>child upon arrival and departure. All<br>attendance records met the requirements<br>of the rule and were kept with the group |

| Rule                           | Status    | Documenting Statement(s), If applicable |
|--------------------------------|-----------|---|
| Rule: 5101:2-12-19 Supervision | Compliant | Documenting Statement: Child Care Staff |
|                                |           | Members were supervising the children   |
|                                |           | and were able to intervene as needed.   |
|                                |           |   |

at all times.



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

Requirements

| Rule: 5101:2-12-19 Supervision      | Compliant | Documenting Statement: During the inspection, child care staff were observed assisting children throughout the day.                          |
|-------------------------------------|-----------|--|
|                                     |           |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-19 Child Guidance   | Compliant | Documenting Statement: Appropriate<br>child guidance techniques and practices<br>were observed being used during the<br>inspection.          |
|                                     | 1-        |  |
| Rule                                | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-20 Cots and Napping | Compliant | Documenting Statement: The rest area<br>had adequate lighting, which allowed for<br>the visual supervision of children.                      |
| Rule: 5101:2-12-20 Cots and Napping | Compliant | Documenting Statement: Cots were<br>placed appropriately and safely during<br>nap time.  |
| Rule: 5101:2-12-20 Cots and Napping | Compliant | Documenting Statement: The cots were disinfected daily.  |
| Rule: 5101:2-12-20 Cots and Napping | Compliant | Documenting Statement: Children who<br>did not fall asleep were permitted to<br>engage in the following quiet activities:<br>books, puzzles. |
|                                     |           |  |

| Rule   | Status    | Documenting Statement(s), If applicable  |
|--|-----------|--|
| Rule: 5101:2-12-20 Cribs                       | Compliant | Documenting Statement: All cribs were placed 2 feet apart.   |
| Rule: 5101:2-12-20 Cribs                       | Compliant | Documenting Statement: Cribs were<br>separated from the play space by a safe<br>and sturdy and physical barrier. |
| Rule: 5101:2-12-20 Cribs                       | Compliant | Documenting Statement: All cribs were labeled with the assigned infant's name.                                   |
|  |           |  |
| Rule   | Status    | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-22 Meal and Snack Requirements | Compliant | Documenting Statement: Posted menus were current and dated.  |

Documenting Statement: Water was provided to children throughout the day

by pitchers of water & cups..

Compliant



| Rule: 5101:2-12-22 Meal and Snack<br>Requirements | Compliant           | Documenting Statement: Snacks were<br>provided at intervals as required by this<br>rule.   |
|---|---------------------|--|
| Rule: 5101:2-12-22 Meal and Snack<br>Requirements | Compliant           | Documenting Statement: Snacks served at<br>the program included foods from two of<br>the four food groups and provided<br>nutritional value in addition to calories.                 |
| Rule: 5101:2-12-22 Meal and Snack<br>Requirements | Compliant           | Documenting Statement: The menu was posted parent board.   |
| Rule: 5101:2-12-22 Meal and Snack<br>Requirements | Compliant           | Documenting Statement: Meals were<br>provided at intervals as required by this<br>rule.  |
| Rule: 5101:2-12-22 Meal and Snack<br>Requirements | Compliant           | Documenting Statement: The program<br>served the following: BQ hamburger ,<br>bun, mixed vegetables, oranges , baked<br>beans and milk   |
| Rule: 5101:2-12-22 Meal and Snack<br>Requirements | Compliant           | Documenting Statement: The food served<br>at meal time to the infants; toddlers was<br>developmentally appropriate and did not<br>pose a choking hazard.                             |
| Rule: 5101:2-12-22 Meal and Snack<br>Requirements | Compliant           | Documenting Statement: Meals served at<br>the program included foods from the four<br>food groups in sufficient amounts.   |
|   |                     | · · · · · · · · · · · · · · · · · ·  |
| Rule: 5101:2-12-22 Fluid Milk<br>Requirements     | Status<br>Compliant | Documenting Statement(s), If applicable<br>Documenting Statement: All<br>infants/toddlers were served<br>formula/milk in sufficient amounts to<br>meet the nutritional requirements. |
| Rule  | Status              | Documenting Statement(s), If applicable  |
| Rule: 5101:2-12-22 Safe Food<br>Handling/Storage  | Compliant           | Documenting Statement: Sack lunches<br>were stored with ice packs or place in<br>refrigerator.   |
| Rule: 5101:2-12-22 Safe Food<br>Handling/Storage  | Compliant           | Documenting Statement: All eating<br>utensils were developmentally<br>appropriate.   |



Department of Education Department of Job and Family Services

| Rule                                 | Status    | Documenting Statement(s), If applicable  |
|--------------------------------------|-----------|--|
| Rule: 5101:2-12-23 Infant Daily Care | Compliant | Documenting Statement: Appropriate daily written records for all infants were viewed.  |
| Rule: 5101:2-12-23 Infant Daily Care | Compliant | Documenting Statement: An appropriate program of activities with infants was observed. |

| Rule   | Status    | Documenting Statement(s), If applicable  |
|--|-----------|--|
| Rule: 5101:2-12-23 Infant Bottle and<br>Food Preparation | Compliant | Documenting Statement: All bottles were labeled as required.   |
| Rule: 5101:2-12-23 Infant Bottle and<br>Food Preparation | Compliant | Documenting Statement: Bottles and<br>opened food were stored in a refrigerator<br>located in the classroom. |
| Rule: 5101:2-12-23 Infant Bottle and<br>Food Preparation | Compliant | Documenting Statement: All bottles were<br>warmed in accordance with the rule in a<br>bottle warmer.         |

| Rule                             | Status    | Documenting Statement(s), If applicable |
|----------------------------------|-----------|---|
| Rule: 5101:2-12-23 Diapering and | Compliant | Documenting Statement: Appropriate      |
| Toilet Training                  |           | diaper changing procedures were         |
|                                  |           | observed during the inspection in the   |
|                                  |           | toddler room.                           |
|                                  |           |   |

| Rule                          | Status    | Documenting Statement(s), If applicable |
|-------------------------------|-----------|---|
| Rule: 5101:2-12-25 Medication | Compliant | Documenting Statement: Medication was   |
| Administration                |           | stored in the office.                   |
|                               |           |   |

| Documenting Statement(s), If applicable   |
|---|
| Documenting Statement: All Child Care<br>Staff Members had verification of<br>educational requirements on file at the<br>program. |
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