



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 WEEKDAY PRESCHOOL OF FIRST UNITED METHODIST CHURCH	Program Number 000000100884	Program Type Child Care Center	
Address 245 PORTAGE TRAIL CUYAHOGA FALLS OH 44221		County SUMMIT	
Building Approval Date 01/11/1988	Use Group/Code E	Occupancy Limit 54	Maximum Under 2 ½
Fire Inspection Approval Date 08/23/2023	Food Service Risk Level Exempt		

Inspection Information		
Inspection Type Annual	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 10/18/2023	Begin Time 8:52 AM	End Time 3:51 PM
Inspection Date 10/19/2023	Begin Time 8:52 AM	End Time 12:15 PM
Reviewer: KATHLEEN BONACCI		
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Summary of Findings				
No. Rules Verified 58	No. Rules with Non-compliances 13	No. Serious Risk 0	No. Moderate Risk 3	No. Low Risk 11

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)		0	0	0
Young Toddler		0	0	0
Total Under 2 ½ Years	0	0	0	0
Older Toddler		0	0	0
Preschool		16	59	75
School Age		0	0	0



Total Capacity/Enrollment	64	16	59	75
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Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment
4's AM MWF Room 240	4 years to < 5 years	2 to 11	Circle
3's AM T/TH Room 203	3 years to < 4 years	2 to 7	Free play
Full Day Room 206	5 years to < Kindergarten	2 to 14	Free play Circle
Full Day Room 206	5 years to < Kindergarten	2 to 14	Snack Parent Provided
Full Day Room 206	5 years to < Kindergarten	2 to 14	Lunch in the cafeteria
5's AM MWF Room 207	5 years to < Kindergarten	2 to 13	Free play Table activities
5's AM MWF Room 207	5 years to < Kindergarten	2 to 13	Gym Nature Guy with/critter
4's PM MWF Room 240	4 years to < 5 years	2 to 15	Free play Painting
3's AM MWF Room 203	3 years to < 4 years	1 to 8	Playground
3's AM MWF Room 203	3 years to < 4 years	2 to 8	Circle
After Care Room 208	4 years to < 5 years	2 to 2	Free play
Enrichment Room 206T/TH AM	4 years to < 5 years	2 to 8	Free play
4 PM class & After Care	3 years to < 4 years	2 to 11	Lunch in the cafeteria

Summary of Non-Compliances

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

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



Moderate Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5101:2-12-04 Food Service Requirements

Code: The program is required to obtain and maintain a valid food license if they prepare and/or serve food. The program is required to correct any food service violations to maintain their food service license.

Finding: During the inspection, it was determined that the program failed to obtain or maintain a valid food service license as noted in number 3 below:

1. The program was unable to obtain the food service license due to violations.
2. The program was unable to maintain the food service license due to violations.
3. The program prepared and/or served food without obtaining a valid food service license. The local health department must be contacted so the health official may determine whether the program meets exemption status, or whether the program needs a food service license.

Submit the program's corrective action plan, which includes a copy of the food service license or exemption status, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/18/2023

Domain: 08 Staff Files

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

Code: The program is required to have all staff request background checks as required and receive a JFS 01176 or preliminary approval from ODJFS prior to allowing an individual to engage in assigned duties or be near children.

Finding: In review of the staff records, it was determined that background checks did not meet the requirements of the rule for the person(s) listed on the Employee Record Chart as noted in number 1, 2, 4 below:

1. The request for a background check for child care was not submitted in the OPR.
2. The fingerprints were not submitted electronically according to the process established by BCI.
3. The individual had engaged in assigned duties or were near children and preliminary approval from ODJFS was not on file.
4. Background checks were not updated every five years.

Submit the program's corrective action plan, which includes a copy of the JFS 01176, or a copy of the preliminary approval or a statement that the individual(s) are no longer engaged in assigned duties and are not near children until the preliminary approval has been received, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/18/2023



Domain: 09 Children's Files

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

Code: The program is required to have a completed JFS 01236 "Child Medical/Physical Care Plan for Child Care" on file at the program for any child having a health condition and must implement and/or follow instructions on the plan. The program is required to have staff trained to perform the procedures on the JFS 01236 "Child Medical/Physical Care Plan for Child Care" present at the program when the child requiring the procedure is onsite. Only staff who have been trained shall be permitted to perform the procedures listed on the JFS 01236.

Finding: In review of the children's records, it was determined the program did not meet the requirements for caring for at least one child, indicated on the Children Records Review, with a condition that requires a JFS 01236 ""Child Medical/Physical Care Plan"" as noted in number 1,13,14,22,23,27,28,29,30,31 below:

1. No plan was on file.

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2. Child's name was missing.

3. Name of the condition was missing.

4. Indication if medication or medical food is required was missing.

5. Signs, symptoms or situations that require staff to take action were missing.

6. Activities, foods, environmental conditions to avoid were missing.

7. Training instructions for procedures for staff to follow were missing or incomplete.

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8. Child's name was missing or not attached.

9. Child's date of birth was missing or not attached.

10. Child's weight was missing or not attached.

11. Name of the medication/medical food was missing or not attached.

12. Dosage of medication/medical food to be administered was missing or not attached.

13. Time for medication/medical food to be administered was missing or not attached.

14. Expiration date for medication/medical food was missing or not attached.

15. Symptoms that require staff to administer medication/medical food were missing or not attached.

16. Specific instructions to administer the medication/medical food were missing or not attached.

17. Actions to be taken if the symptoms do not subside were missing or not attached.

18. Physician's signature was missing or not attached.

19. The date of the physician's signature was missing or not attached.

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20. Child's name was missing.

21. Instructions regarding emergency evacuation, if applicable, were missing.

22. Signature of parent granting permission to implement the plan and verifying training was missing.

23. Date of parent signature was missing.

24. Certified Professional Trainer information was missing.

25. Signature of certified professional who trained the program staff was missing, if parent was not the trainer.

26. Date of trainer signature was missing.

27. Printed name(s) of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.



28. Signature(s) of child care staff member(s) who have received instructions for care and/or have been trained to perform the procedure were missing.
29. Date of staff signature was missing.
30. Administrator/Provider signature was missing
31. Date of administrator/Provider was missing.
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32. Child's name was missing.
33. Name of medication or medical food was missing.
34. Date the medication/medical food was administered was missing.
35. Time medication/medical food was administered was missing.
36. Dosage of medication/medical food that was administered was missing.
37. Signature of person administering medication/medical food was missing.
38. The plan was not followed or implemented.
39. The plan was not able to be implemented due to conflicting information.
40. None of the child care staff members trained in the procedures on the JFS 01236 were onsite when a child requiring the plan was present.
41. Child care staff members trained in the procedures on the JFS 01236 were not scheduled to be present the entire the time the child requiring the plan was onsite.
42. None of the child care staff members trained in the procedures on the JFS 01236 accompanied the child requiring the plan during a trip.
43. A child care staff member who had not been trained in the procedures on the JFS 01236 performed the procedure.
44. 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.

Provide staff training. 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: 11/18/2023

Low Risk Non-Compliances

Domain: 00 License & Approvals

Rule: 5101:2-12-03 Inspection Requirements

Code: The program is required to respond to noncompliances by the date noted in the inspection report.

Finding: During the inspection, it was determined the program had not responded to returned for revisions for the non-compliances addressed in the inspection report dated 4-25-23 # 242006 . The rule requires the program to complete and submit a corrective action plan in OCLQS to address non-compliances detailed in written



inspection reports within the timeframe outlined in the report. Submit the program's corrective action plan, which includes a statement that current and future corrective action plans will be submitted timely, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/18/2023

Domain: 00 License & Approvals

Rule: 5101:2-12-04 Building Department Inspection

Code: The program is required to maintain a copy of the certificate of occupancy on file at the center for review.

Finding: During the inspection, it was determined the program did not have a copy of the certificate of occupancy available on-site for review. Submit the program's corrective action plan, which includes a copy of the certificate of occupancy, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/18/2023

Domain: 08 Staff Files

Rule: 5101:2-12-08 Orientation Training & Whistle Blower Protection

Code: The program is required to have staff complete the online staff orientation training. Additionally, the training must be completed before they are permitted to have sole responsibility of children.

Finding: In review of the staff records, it was determined that child care staff member(s) did not meet the requirements for completing the online orientation training as noted in number 1 below:

1. The training was not completed within 30 days of starting employment at the program as a child care staff member.
2. Documentation of completing the training after December 31, 2016 was not on file.
3. Completion of the training was not verified in the OPR.
4. A child care staff member had sole responsibility of children and had not completed the online orientation.

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

Corrective Action Plan Due: 11/18/2023



Domain: 08 Staff Files

Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements

Code: The program staff is required to have educational verification on file at the program.

Finding: In review of the staff records, it was determined that verification of a high school education for the child care staff member(s) listed on the Employee Record Chart, did not meet the requirements as listed in number 1 below:

1. Verification of completion of a high school education was not on file.
2. Documentation was incomplete or not on file for a high school junior or senior who is enrolled in a career-technical program.
3. Documentation was not on file for a high school junior or senior who is also enrolled in a college credit program in child development or early childhood education.
4. Documentation was not on file for a high school junior or senior who is enrolled in a Child Development Associate (CDA) training program.

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

Corrective Action Plan Due: 11/18/2023

Domain: 08 Staff Files

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

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

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

1. The child care staff 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: 11/18/2023

Domain: 08 Staff Files

Rule: 5101:2-12-08 Medical Statement

Code: The program staff's medical statements are required to be completed and on file at the program.

Finding: In review of the staff records, it was determined that the medical statements for the employees listed on the Employee Record Chart did not meet the requirements as listed in numbers 1,3,5b,5c,6a below.

1. A medical statement was not on file for at least one employee;
2. The medical statement(s) on file did not have a date of examination within 12 months of the employee's first day of employment;
3. Date of examination was missing;
4. Signature, business address, or telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination was missing;
5. A statement was missing that verifies 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);
6. Tuberculosis (TB) screening/test information was missing:
 - 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 6a.
 - 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: 11/18/2023

Domain: 08 Staff Files

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



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

Finding: During the inspection, it was determined employment records in the Ohio Professional Registry (OPR) were not created or maintained as noted in numbers 2,7 below:

1. At least one administrator, employee or child care staff member (including substitutes) had not created a profile. Speech therapist
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: 11/18/2023

Domain: 08 Staff Files

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

Code: The program is required to have all child care staff members complete training in child abuse and neglect recognition and prevention within sixty days of hire. Staff must complete training in first aid and CPR within the first ninety days of hire.

Finding: In review of the staff records, it was determined that at least one child care staff member had not completed required health and safety training as noted in number 1,2,3,4,5 below:

1. Child abuse and neglect recognition and prevention training was not completed within sixty days of hire. Speech Therapist
2. First aid training was not completed within ninety days of hire. Speech Therapist
3. Cardiopulmonary resuscitation (CPR) training was not completed within ninety days of hire. Speech Therapist
4. The child abuse and neglect recognition and prevention training was expired.
5. The first aid training was expired.
6. The CPR training was expired.



Refer to the Employee Record Chart for the name(s) of the child care staff member(s) who must complete the required health and safety training(s). Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 11/18/2023

Domain: 09 Children's Files

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

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

Finding: In review of 25% of the children's records, it was determined that information had not been secured from the parent/guardian on the JFS 01234 "Child Enrollment and Health Information For Child Care", as required, for the items in numbers 6,7,8,10 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: 11/18/2023



Domain: 09 Children's Files

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

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

Finding: In review of 25% of the children's records, it was determined that completed medical statements were not on file, as required, for children listed on the JFS Children's Record Review For Child Care as indicated in numbers 8,10 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: 11/18/2023

Domain: 10 Written Policies & Procedures

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

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

Finding: During the inspection, it was determined the program's written disaster plan did not meet the requirement for training child care staff members and employees on the plan annually as noted in number 2 below:

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



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

Corrective Action Plan Due: 11/18/2023

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. Parent Board near office.
Rule: 5101:2-12-02 Current Information	Compliant	Documenting Statement: The program had current information entered in the Ohio Child Licensing and Quality System (OCLQS).
Rule: 5101:2-12-04 Fire Inspection	Compliant	
Rule: 5101:2-12-07 Administrator Qualifications	Compliant	
Rule: 5101:2-12-07 Written Program Policies and Procedures	Compliant	Documenting Statement: During the inspection, the requirements of the rule regarding the program's written policies and procedures were discussed.
Rule	Status	Documenting Statement(s), If applicable



Rule: 5101:2-12-11 Indoor Space Requirements	Compliant	Documenting Statement: The following additional space was measured during the inspection: All rooms used for child care were measured ,Rooms 203,206,207,208 ,240 and gym.
Rule: 5101:2-12-11 Indoor Space Requirements	Compliant	Documenting Statement: The restrooms are used exclusively by the program during hours of operation.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Space Requirements	Compliant	Documenting Statement: The quarterly playground inspections were completed and documented, as required. The most recent inspection report form was dated 8-6-2023.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-11 Outdoor Play Equipment	Compliant	Documenting Statement: The playground safety kit was used to verify the outdoor play equipment was free from entrapment hazards and unsafe and protruding bolts.
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 wood chips.
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Equipment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-12 Safe Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Sanitary Equipment and Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Handwashing Requirements	Compliant	



Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Smoke Free Environment	Compliant	
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-14 Transportation and Field Trip Procedures	Compliant	Documenting Statement: Requirements regarding routine and/or field trips were discussed during the inspection. Parents driver and stay with their child.
Rule: 5101:2-12-14 Transportation and Field Trip Procedures	Compliant	Documenting Statement: The form used by the program for field trips were verified to meet the requirements of the rule. Parents are responsible to drive to & from fieldtrip location and stay with their child during the fieldtrip .
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan	Compliant	Documenting Statement: On the day of 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 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 Precautions	Compliant	Documenting Statement: During the inspection, the program had two complete first aid kits available as required. First Aid kit on both floors.
Rule: 5101:2-12-16 First Aid/Standard Precautions	Compliant	Documenting Statement: The program 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 Communicable Disease	Compliant	Documenting Statement: The JFS 08087 "Communicable Disease Chart" was



		posted and was readily available to staff and parents.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-16 Incident/Injury Reporting	Compliant	Documenting Statement: The JFS 01299 "Incident/Injury Report For Child Care" forms reviewed during this inspection were complete as required.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-17 Daily Schedule	Compliant	Documenting Statement: Daily schedules were observed posted.
Rule: 5101:2-12-17 Daily Schedule	Compliant	Documenting Statement: During the inspection, developmentally-appropriate practices were observed in the classrooms.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-17 Materials and Equipment	Compliant	Documenting Statement: Sufficient equipment was observed in all categories.
Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-17 Daily Outdoor Play	Compliant	Documenting Statement: Outdoor play was observed for the 3 year old AM group.
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
Rule: 5101:2-12-18 Ratio	Compliant	Documenting Statement: Staff/child ratios observed during the inspection were in compliance.
Rule: 5101:2-12-18 Ratio	Compliant	Documenting Statement: The Appendix A "Staff/Child Ratios, Age Grouping and Maximum Group Size" was posted in a noticeable area at the program as required.



Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-18 Group Size	Compliant	Documenting Statement: The group sizes observed on the day of the inspection were in compliance.
Rule: 5101:2-12-18 Attendance Records	Compliant	Documenting Statement: During the inspection, attendance records were reviewed. Child Care Staff Members were viewed recording the attendance for each child upon arrival and departure. All attendance records met the requirements of the rule and were kept with the group at all times.
Rule: 5101:2-12-19 Supervision	Compliant	
Rule: 5101:2-12-19 Child Guidance	Compliant	
Rule: 5101:2-12-20 Cots and Napping	Compliant	Documenting Statement: At the time of the inspection, the program operated fewer than 7 hours and did not include a nap or rest period.
Rule: 5101:2-12-22 Meal and Snack Requirements	Compliant	
Rule: 5101:2-12-22 Fluid Milk Requirements	Compliant	
Rule: 5101:2-12-22 Safe Food Handling/Storage	Compliant	
Rule: 5101:2-12-25 Medication Administration	Compliant	Documenting Statement: Medication was stored classrooms.



Department of Education
Department of Job and Family Services

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